

CODE TALK

- Per the NFPA 101 Life Safety Code, hospitals are required to keep corridors clear and unobstructed.
- The minimum clear and unobstructed width of an egress corridor must be maintained at 8 feet.
 - Using the ceiling tiles can help to determine the width of a corridor. Most ceiling tiles are 1 or 2 feet wide.
- “In Use” – When a piece of support or medical equipment, bed or furniture is actively being used by staff.
- Idle workstations on wheels and beds must be stored in a place not located in an egress corridor.
 - 30 minutes or longer in a corridor is considered idle and stored. Plugged in items are automatically considered permanently stored.
- Items stored in the corridor that can be considered “In Use”. These items cannot block FIRE DOORS when stored in the corridor.
 - Crash Carts – ANYTIME AND PLUGGED IN
 - Isolation Carts – WHERE THE TREATMENT OF PATIENT REQUIRES
 - Patient Lift Equipment – WHERE THE TREATMENT OF PATIENT REQUIRES and THE CORRIDOR IS NOT REDUCED TO LESS THAN 5 FEET
- Healthcare Interpretation Task Force* (HITF) ruled during a 2008 meeting that patients cannot sleep or receive treatment in a corridor.
 - The rule that specifies this (HITF) is not intending to prohibit an organization from this practice when a patient surge emergency is declared from a situation that has occurred because of a manmade or natural disaster.
- Each unit must have a written fire plan for the removal of equipment or furniture from the corridor in the event of an emergency (Fire, Tornado Warning, etc.)

EXAMPLES OF NONCOMPLIANCE



NONCOMPLIANT

Work stations on wheels cannot be plugged in or stored in an egress corridor.



NONCOMPLIANT

Beds or other furniture cannot be stored in the corridor as it reduces the free and unobstructed width.



COMPLIANT

Crash carts can be plugged in and stored in the corridor.

TOOLS FOR SUCCESS

- Discuss with the UIHC Life Safety Manager if your unit is defined as a “Suite” as the minimum corridor free and unobstructed width is reduced to 36” and storage in the permitted.
- Discuss storage in corridors with UIHC Life Safety Manager to determine best locations of equipment.
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**The Healthcare Interpretation Task Force (HITF) is chaired by the NFPA, with representatives from CMS, The Joint Commission, VHA, Department of Defense, Indian Health Service, State Fire Marshal, International Fire Marshal, the Agency for Health Care Association, American Society for Healthcare Engineering, and American Health Care Association.*