DHCD, DBFR 2009 Code Change Process

August 20, 2009 at 9:30 a.m. at DHCD, 11th Floor Conference Room
Assisted Living Facilities
Sub-group Meeting Agenda

1. **DSS ALF regulations** - update status - review §63.2.1705 and coordinate with the 2009 or 2012 USBC and SFPC as necessary. Review for legislative changes to refuge area or some assistance.

2. **ICC CTC** - update

3. **USBC code change** –

   - 13 minutes to exit for ambulatory residents that include those with canes, walkers, wheelchairs based on §63.2-1705 without assistance. Need to determine if there is a consensus to support, amend or oppose.
   - Clarifies and puts into the USBC that there can be 5 non-ambulatory residents in an I-1 facility. There is already language that there can be 5 residents in an R-4 and in I-2 there can be 5 non-ambulatory residents in a licensed residential occupancy. Need to determine if there is a consensus to support, amend or oppose.
   - Does the USBC, for life safety reasons need, to say the 5 non-ambulatory residents need to be on grade level? Can they be on other floors if there are fire service elevators, areas of refuges on the floor or in the exit stair similar to requirements for persons in wheelchairs or where there is a smoke compartment? What about residents defined as ambulatory in wheelchairs or use canes, walkers or prosthetic devices? Some CO's are being issued now with this condition of being on the grade floors. Need to determine if there is a consensus to support, amend or oppose. Will plan to have further discussion at future meetings.
   - IBC has area of refuge with rated walls. Do we need or should we have a USBC code change that allows in sprinkled I-1's requirements (instead of expensive rated refuge areas that are tied into horizontal exits) for smoke compartments such as one per floor or every 75 feet? If smoke is the more likely problem and is supported by fire data, then is this a reasonable option? No code change. Bring back for discussion at next meeting.

4. **ALF code changes for the 2009 USBC** - Five non-ambulatory residents can reside in R-5, R-4 or I-1. Will discuss other conditions such as grade floor. Discussion on R-4, code change to say nine or more sprinkled.

5. **ALF fire data** - will look at data from sprinkled facilities versus unsprinkled for injuries, deaths and damages. All new I-1's are required to be sprinkled, including the attic while all new R-4's have to be sprinkled at 9 residents. Anecdotal feedback is that most facilities have few fires, injuries, deaths or damages. Of 565 licensed ALF's, DHCD estimates 385 are sprinkled (I-2's-255, I-1's-105, Mixed-Use and R-4's-25). Confirmation of sprinkled facilities would assist in dealing with issues associated with evacuation drills required by the SFPC and assist in determining if new I-1's require additional life safety or building construction requirements where residents are deemed to have the need for some assistance.

6. **SFPC** - Discuss current fire evacuation drills. Frequencies seem ok. Uniformity on conducting them is inconsistent from locality to locality probably based on the fire official's resources. Section 408.5.3 wants residents with capacity to do so to be trained to assist other residents. Is this contrary to I-1 occupancy that residents have no assistance? Table 405.2 b says go to 408.10.5 and must do complete evacuations of the premises. Section 408.6.1 for I-2 says not required for patients to be moved to "safe area" or evacuate the building. One locality supposedly has a local I-2 fire prevention ordinance that requires I-2 patient to exit outside. Do Section 408.10.5 and T405.2b need changes with some flexibility to not do complete exits for drills such as to a "safe area" or refuge area in the buildings that is defined in the USBC for construction requirements?

7. **Carbon Monoxide Alarms** -VFCAV code change for the USBC that includes CO alarms for new I occupancies that would include I-1 ALF's, I-2 nursing homes, I-3 jails and I-4 adult day care. Will be discussed in the fall/winter work groups with the IRC CO alarm requirement as some coordination maybe necessary for the R-3, R-4 and r-5 dwelling units. Need to determine if there is a consensus to support, amend or oppose. Will plan to have further discussion at future meetings.

8. **Next meeting** - would be after the 60 day public comment period this fall.

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§ 63.2-1705. Compliance with Uniform Statewide Building Code.

A. Buildings licensed as assisted living facilities, adult day care centers and child welfare agencies shall be classified by and meet the specifications for the proper Use Group as required by the Virginia Uniform Statewide Building Code.

B. Buildings used for assisted living facilities or adult day care centers shall be licensed for ambulatory or nonambulatory residents or participants. Ambulatory means the condition of a resident or participant who is physically and mentally capable of self-preservation by evacuating in response to an emergency to a refuge area as defined by the Uniform Statewide Building Code without the assistance of another person, or from the structure itself without the assistance of another person if there is no such refuge area within the structure, even if such resident or participant may require the assistance of a wheelchair, walker, cane, prosthetic device, or a single verbal command to evacuate. Nonambulatory means the condition of a resident or participant who by reason of physical or mental impairment is not capable of self-preservation without the assistance of another person.

(1981, c. 275, § 63.1-174.1; 1986, c. 430; 1989, c. 173; 1991, c. 532; 1992, c. 356, § 63.1-194.4; 1993, cc. 957, 993; 1998, c. 552; 2002, c. 747.)

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305.1.1 Day care facilities: A day care facility which provides care for more than five persons more than 2½ years of age for less than 24 hours per day shall be classified as Use Group E.

Code Interpretation No. 10/201/81
First Issued: 8/10/80, 1978 Edition

A church building contains a Sunday school classroom wing with two nursery rooms used only for a few hours at a time once a week.

Q #1: Must these nursery rooms be considered as an occupancy in Use Group I-2 or E?

A: Yes. The use group classification is dependent on the age of individuals cared for in the nursery. If care is provided for more than five individuals who are more than 2½ years old, the nursery is classified as Use Group E. If there are more than five children 2½ years of age or younger, the nursery is classified as Use Group I-2.

Q #2: Would Section 313.0 regarding mixed uses and occupancies apply?

A: Yes. Because the use group of the nursery is either E or I-2 and the use group of the church is A-4, Section 313.0 provisions would apply.

Q #3: Would the nursery room use group classification change if the rooms were occupied during the week as part of a day care facility?

A: No. The use group classification is not a function of the duration of a particular occupancy but rather a function of the hazard inherent in the occupancy itself.

308.2 Use Group I-1: This use group shall include buildings and structures which house six or more individuals who, because of age, mental disability or other reasons, must live in a supervised environment but who are physically capable of responding to an emergency situation without personal assistance. Where accommodating persons of the above description, the following types of facilities shall be classified as I-1 facilities: board and care facilities, half-way houses, group homes, social rehabilitation facilities, alcohol and drug centers and convalescent facilities. A facility such as the above with five or less occupants shall be classified as a residential use group.

Code Interpretation No. 46/207/81
First Issued: 4/2/81, 1978 Edition

Q: Is the Use Group I-1 classification appropriately applied to a building resembling a multiple-family dwelling, but wherein:

- The building occupants are aged but not infirm; and
- Special emergency call switches monitored by health center staff are located in each dwelling unit?

A: No. Age, by itself, is not sufficient criterion for an I-1 Use Group classification. Use Group I-1 is only appropriate when occupants have a diminished mental capacity and must live in a supervised environment. The Use Group I-1 classification is intended to apply to conditions where such occupants are physically capable of responding to an emergency situation without personal assistance but may not be mentally capable of an independent response. The presence of emergency call switches in each dwelling unit is a convenience item and does not necessarily indicate infirmity of the occupants.

Code Interpretation No. 11/306/84
First Issued: 4/11/84, 1981 Edition

Q#1: If a building which is classified and approved for occupancy as Use Group I-1 begins to house more than five occupants with physical or mental ailments of the type rendering them physically incapable of responding to an emergency situation without personal assistance, would this building have to be reclassified as Use Group I-2?

A: Yes. According to Section 308.2, Use Group I-1 is intended to reflect the safety requirements appropriate for occupants that are physically capable of responding to an emergency situation without assistance. A building with more than five occupants not possessing such capability represents a significantly different hazard, which is reflected in the code requirements that are applicable to Use Group I-2.

The introduction of more than five occupants, without the described response capability, into a building of Use Group I-1 would represent a change in occupancy and would then be regulated in accordance with Section 3405.1. In both cases, the building would either have to be reclassified as Use Group I-2 or be restricted to individuals possessing the described response capability.

Q #2: If so, is Use Group I-2 the appropriate classification? The description of Use Group I-2 states physical limitations but not mental limitations.

A: Yes. Use Group I-2 would be appropriate because it is intended to include occupancy with six or more individuals having physical limitations. Use Group I-1 refers to the occupant's ability to respond physically to an emergency. Occupants with a mental instability resulting in their inability to respond physically without assistance would be included in the scope of the Use Group I-2 description. Section 308.3 includes psychiatric care and mental hospitals within the scope of Use Group I-2.

308.3.1 Child care facility: A child care facility which accommodates more than five children 2½ years of age or less for any length of time shall be classified as Use Group I-2.

Code Interpretation No. 21/307/85
First Issued: 10/16/85, 1984 Edition

Q: Can a child-care facility accommodating not more than five children 2½ years old or younger and additional children over 2½ years old be classified as Use Group E, Educational Uses?

A: Yes. Section 308.3.1 indicates that a facility accommodating *more* than five children of 2½ years old or younger is to be classified as Use Group I-2. A day care facility falling under the classification as described in Section 305.1.1 can include children of 2½ years old or younger and would not be reclassified as Use Group I-2 until the number of children exceeds five.

Code Interpretation No. 10/201/81
(See Section 305.1.1)

VIRGINIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF BUILDING AND FIRE REGULATION

Code Change Form for the 2009 Code Change Cycle

Code Change Number: _____

Proponent Information (Check one): ☐ Individual ☐ Government Entity ☐ Company

Name: DRAFT _____ Representing: _____

Mailing Address: _____

Email Address: _____ Telephone Number: _____

Proposal Information

Code(s) and Section(s): 308.2, 310.2

Proposed Change (including all relevant section numbers, if multiple sections):

R308.2 Group I-1. This occupancy shall include buildings, structures or parts thereof housing more than 16 persons, on a 24-hour basis, who because of age, mental disability or other reasons, live in a supervised residential environment that provides personal care services. With the exception of up to five occupants, all other ~~The~~ occupants are, at any time, capable of responding to an emergency situation without physical assistance from staff. This group shall include, but not to be limited to, the following:

R310.2 Definitions.

RESIDENTIAL CARE/ASSISTED LIVING FACILITIES.
A building or part thereof housing persons, on a 24-hour basis, who because of age, mental disability or other reasons, live in a supervised residential environment which provides personal care services. With the exception of up to five occupants, all other ~~The~~ occupants are, at any time, capable of responding to an emergency situation without physical assistance from staff.. This classification shall include, but not be limited to, the following: residential board and care facilities, assisted living facilities, halfway houses, group homes, congregate care facilities, social rehabilitation facilities, alcohol and drug abuse centers and convalescent facilities.

Supporting Statement (including intent, need, and impact of the proposal):

This proposal corrects a problem created when the 2009 IBC removed the provision in the Group I-2 provisions that classified a I-2 facility with five or fewer persons as Group R-3. It also clarifies a long standing BOCA interpretation which explained that you can have up to 5 persons in any facility other than I-2 facility who are not capable of responding to an emergency situation without physical assistance from staff.

Submittal Information

Date Submitted: _____

VIRGINIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF BUILDING AND FIRE REGULATION

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Mailing Address: _____

Email Address: _____ Telephone Number: _____

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R310.2 Definitions.

RESIDENTIAL CARE/ASSISTED LIVING FACILITIES.
A building or part thereof housing persons, on a 24-hour basis, who because of age, mental disability or other reasons, live in a supervised residential environment which provides personal care services. With the exception of up to five occupants with sleeping accommodations on grade level, all other ~~The~~ occupants are, at any time, capable of responding to an emergency situation without physical assistance from staff.. This classification shall include, but not be limited to, the following: residential board and care facilities, assisted living facilities, halfway houses, group homes, congregate care facilities, social rehabilitation facilities, alcohol and drug abuse centers and convalescent facilities.

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VIRGINIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF BUILDING AND FIRE REGULATION

Code Change Form for the 2009 Code Change Cycle

Code Change Number:_____

Proponent Information (Check one): ☒Individual ☒Government Entity ☐Company

Name: Chief James A. Gray Representing: Virginia Fire Chiefs Association, Inc

Mailing Address: Hampton Division of Fire & Rescue 22 Lincoln Street Hampton, VA 23669

Email Address: jgray@hampton.gov Telephone Number: 757-727-6580

Proposal Information

Code(s) and Section(s): USBC 908.1

Proposed Change (including all relevant section numbers, if multiple sections):

Add New USBC

SECTION 908 CARBON MONOXIDE ALARMS

908.1 Carbon monoxide alarms. Group I or R occupancies in a building containing fuel burning appliances or a building which has an attached garage shall be provided with single station carbon monoxide alarms. The carbon monoxide alarms shall be lsingle or multiple station carbon monoxide alarms complying with UL 2034 and be installed and maintained in accordance with NFPA 720 and manufacturer's instructions. An open parking structure, as defined in the International Building Code, shall not be deemed to be an attached garage. shall be provided in accordance with this section.

> **Exception:** Guestrooms or dwelling units which do not themselves contain a fuel-burning appliance or have an attached garage, but which are located in a building with a fuel-burning appliance or an attached garage, need not be provided with single station carbon monoxide alarms, provided that:
>
> 1. The guestroom or dwelling unit is located more than one story above or below any story which contains a fuel-burning appliance or an attached garage;
> 2. The guestroom or dwelling unit is not connected by duct work or ventilation shafts to any room containing a fuel-burning appliance or to an attached garage; and
> 3. The building is provided with a common area carbon monoxide alarm system.

908.2 Group R-1 and R-2. Single or multiple station carbon monoxide alarms shall be installed in all sleeping units in Group R-1 and R-2 equipped with fuel fired appliance(s) in the following locations:

1. In each story within a *dwelling unit.*
2. On the ceiling or wall outside of each separate *sleeping area* in the immediate vicinity of the bedrooms.

908.3 Groups R-3 and R-4. Single or multiple station carbon monoxide alarms shall be installed in Groups R-3 and R-4 dwelling units equipped with fuel fired appliance(s) in the following locations:

1. In each story within a *dwelling unit.*

2. On the ceiling or wall outside of each separate *sleeping area* in the immediate vicinity of the bedrooms.

908.4 Maintenance. Required carbon monoxide alarms shall be maintained in accordance with the Statewide Fire Prevention Code.

(Renumber subsequent sections)

Add New SFPC

908.7 Carbon monoxide alarms. Carbon monoxide alarms shall be maintained as approved when required by the USBC.

Supporting Statement (including intent, need, and impact of the proposal):

Carbon monoxide detectors available in today's market meet the updated requirements which have eliminated the false positives that are an issue with those opposed previously to carbon monoxide detectors installation requirements.

Prior to the strong support of the fire service and others, 21 individuals were treated and 5 hospitalized because of carbon monoxide fumes in a student apartment in Blacksburg. In Salem the year before, there was a fatality resulting from carbon monoxide fumes at Roanoke College. Now, according to the Journal of the American Medical Association (JAMA), those who sustained heart muscle injury due to their exposure to carbon monoxide had an increased risk of death during a mid-point follow-up period of 7.6 years compared to those without injury to the heart. Despite a decline in the annual death rate from carbon monoxide (CO) poisoning, CO remains the most common type of accidental poisoning in the United Sates, contributing to 40,000 or more emergency department visits each year, according to background information. The only way to protect citizens from an odorless, tasteless and colorless gas, which are products of combustion, is to install carbon monoxide detectors around sleeping quarters, in basements and other areas where the gas may settle. Carbon monoxide poisoning mimics many common illnesses such as the flu and food poisoning.

In 2008, the Virginia Department of Fire Programs implemented a grant program where carbon monoxide detectors were given to families in the Martinsville / Henry County area who met certain requirements relating to heating assistance. Within three days of installation, a family of 4 evacuated their house because the alarm sounded. It was found that piping in the heating system had numerous holes thus causing the accumulation of gas in the home they were renting. Four people are alive today because of a carbon monoxide detector. In 2005, there were six deaths attributed to carbon monoxide poisoning and in 2006 there were 635 incidents in which fire departments responded. In April 2009, two children were overcome by carbon monoxide in an apartment, but survived. The 5 condo building in Fairfax County, all received the gas from a generator being used inside a utility room.

Carbon monoxide detectors undeniably save lives and need to be installed where there are fossil fuel appliances in close proximity, i.e. attached garages or fireplaces. As stated previously, carbon monoxide is an odorless, tasteless and colorless gas, which is product of combustion and can make an individual extremely ill or can be fatal.

This is for new construction only.

Submittal Information

Date Submitted: 5/19/09

The proposal may be submitted by email as an attachment, by fax, by mail, or by hand delivery.

Please submit the proposal to:

DHCD DBFR TASO (Technical Assistance and Services Office)
The Jackson Center
501 N. 2nd Street
Richmond, VA 23219-1321

Email Address: taso@dhcd.virginia.gov
Fax Number: (804) 371-7092
Phone Numbers: (804) 371-7140 or (804) 371-7150

VIRGINIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF BUILDING AND FIRE REGULATION

Code Change Form for the 2009 Code Change Cycle

Code Change Number:_____

Proponent Information (Check one): ☐Individual X Government Entity ☐Company

Name: Guy Tomberlin

Representing: VA Plumbing and Mechanical Inspectors Association and VA Building and Code Officials Association Plumbing/Mechanical/Fuel Gas Committees

Mailing Address: 12055 Government Center Parkway, Suite 630
Fairfax, VA 22035

Email Address: guy.tomberlin@fairfaxcounty.gov Telephone Number: 703–324–1611

Proposal Information Clarify Carbon Monoxide requirements

Code(s) and Section(s): IRC **R315.2 Where required in existing dwellings.**

Proposed Change (including all relevant section numbers, if multiple sections):

Delete Section R315.2 in its entirety.

Note to staff– renumber R315.3 to R315.2.

Supporting Statement (including intent, need, and impact of the proposal): The submitting code committees viewed this as a retroactive action and felt the USBC should not endorse this type activity. It would be extremely difficult to enforce and may even cause folks to not obtain permits. For example if someone wanted to build a deck and they happen to have an attached garage they would need to equip the dwelling unit with CO alarms, that's just not reasonable.

Submittal Information

Date Submitted: July 2, 2009

The proposal may be submitted by email as an attachment, by fax, by mail, or by hand delivery.

Please submit the proposal to:

DHCD DBFR TASO (Technical Assistance and Services Office)
The Jackson Center
501 N. 2nd Street
Richmond, VA 23219-1321

Email Address: tsu@dhcd.virginia.gov
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VIRGINIA DHCD

VIRGINIA DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
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Mailing Address: 12055 Government Center Parkway, Suite 630
Fairfax, VA 22035

Email Address: guy.tomberlin@fairfaxcounty.gov Telephone Number: 703–324–1611

Proposal Information Clarify Carbon Monoxide requirements

Code(s) and Section(s): IRC **R315.3 Alarms requirements.**.

Proposed Change (including all relevant section numbers, if multiple sections):
R315.3 Alarms requirements. Single station carbon monoxide alarms shall be hard wired, plug–in or battery type, listed as complying with UL 2034 and shall be installed in accordance with this code and the manufacturer's installation instructions.

Supporting Statement (including intent, need, and impact of the proposal): The submitting code committees felt that this section needed further clarity to provide the user the information that clearly reflects the information contained in the UL Standard 2034 which includes the 3 different type s of CO alarms the added text references.

Submittal Information

Date Submitted: July 2, 2009

The proposal may be submitted by email as an attachment, by fax, by mail, or by hand delivery.

Please submit the proposal to:

DHCD DBFR TASO (Technical Assistance and Services Office)
The Jackson Center
501 N. 2nd Street
Richmond, VA 23219-1321

Email Address: tsu@dhcd.virginia.gov
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Mailing Address: 12055 Government Center Parkway, Suite 630
Fairfax, VA 22035

Email Address: guy.tomberlin@fairfaxcounty.gov Telephone Number: 703–324–1611

Proposal Information Clarify Carbon Monoxide requirements

Code(s) and Section(s): IRC **R315.1 Carbon monoxide alarms.**.

Proposed Change (including all relevant section numbers, if multiple sections):
R315.1 Carbon monoxide alarms.. For new construction an approved carbon monoxide alarm shall be installed outside of each separate sleeping area in the immediate vicinity of the bedrooms in a dwelling units within which fuel–fired appliances are installed. ~~and in~~ In dwelling units that have attached garages, a carbon monoxide alarm shall be installed at each entrance to the dwelling unit from the garage.

Supporting Statement (including intent, need, and impact of the proposal): The submitting code committees felt that the requirement to install CO alarms near bedrooms when a dwelling contains no fuel fired equipment is excessive. It was agreed that the concept of installing an alarm near the potential source of a problem should be acceptable for the garage scenario. Garage incidents are quite different than faulty appliances. The threat from a garage typically involves human intervention, whereas with appliances problems occur with no other type warning or indication.

Submittal Information

Date Submitted: July 2, 2009

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