How To Prepare For An FMS

• Prepared by:
  Patrick Sheehan, Fire Safety Supervisor
  Minnesota State Fire Marshal Division
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Definitions

- **CMS** – Centers for Medicare & Medicaid Services
- **DSFM** – Deputy State Fire Marshal
- **FMS** – Federal Monitoring Survey
- **LSC Contract Surveyors** – Non-Federal Surveyors
Definitions

• **POC** – Plan of Correction

• **PCR** – Post Certification Revisit

• **Safety Engineers** – Federal LSC Surveyors

• **SFMD** – MN State Fire Marshal Division

• **2567 Form** – Statement of Deficiencies Form
Frequency of FMS’s

• CMS requires that at least 5% of all Long Term Care facilities have an FMS each year.

  – In Minnesota that equals about 20 facilities.

  – To date, approximately 1/3 of long term care facilities in Minnesota have had an FMS.
Frequency cont.

• FMS’s are usually scheduled by CMS within 30 days of the SFM inspection.
  • That can vary.

• FMS’s will be unannounced.

• You will be expected to be there for the entire FMS.
The Intent of the FMS

• FMS’s are a CMS validation of the inspections conducted by the State Fire Marshal Division.

• You will be expected to correct all deficiencies found by the CMS surveyor.

The CMS surveyor will normally not ask to see the SFM inspection report.
What To Expect

• You will be expected to provide whatever is asked for on the spot.

• Have documentation in order and ready for review.
  – Searching for documentation may result in a deficiency.

• Have keys to all areas.

• Have back up personnel ready to cover for you.
  – More than 1 person must know where documentation is.
REMEMBER!

• Know your building

• This is the first time, and maybe the only time the FMS surveyor has been, in your building.

• Be confident in your knowledge.
So Be Ready To....

• Describe the building(s) including:
  – Year(s) of construction
  – Construction Types
  – Number of stories
  – Fire Separations to non-health care buildings

• Remain Calm
  – Don’t be hesitant
  – Do your homework now
Be Ready To....

• Describe/locate fire and/or smoke barrier locations.
  – Know which smoke barriers are required.
    • Fire/smoke barriers don’t always follow a straight line.
  – Have current building floor plans with plainly identified barrier locations.
    • CMS has been known to incorrectly assess fire and smoke barriers.
Be Ready To....

• Provide all required documentation.
  – Having to search for documentation may result in a deficiency.

• Make sure documentation is current and correct.

• Life Safety Code Documentation Project.
  – Available on the SFM web-site [www.fire.state.mn.us](http://www.fire.state.mn.us),
  – Health Care Inspection Program
Be Ready To ....

• Know your required exits.
  – Key word is “required”.
  – Any door marked as an exit will be treated as an exit.
    • Not all doors that are labeled as exits may be required exits.
  – Any door that can be easily mistaken for an exit, but is not an exit, must be labeled as “Not An Exit”.
Be Ready To ....

• Discuss locks on doors preventing egress.
  – Why is an area locked against egress?
  – What exit doors need to be locked in that area?
  – Know what type of lock is installed, and
  – How does it work, i.e., unlock.
    • Be ready to demonstrate the unlocking.
Locked Door Notes

• Doors that are not required exits, or are not part of an exit path, can be locked.

• Locks on doors must fail in the open position.
  – **THIS IS AN ABSOLUTE!**

• Locks on doors must be manually reset from within the secured area or at the door.

• Make sure you test all locked doors on a regular basis (at least monthly) to assure they function properly.
Plan of Correction

• Your POC must be presented directly to CMS for their approval.
  – This includes requesting temporary waivers (time extensions) and annual waivers.
• Date stamp when you receive the CMS 2567 at your facility
• Your contact for questions is the Safety Engineer or the Contract surveyor.
  – Insure you get their contact information before they leave

• The State Fire Marshal Division cannot be involved in the POC.
PCR/Revisit/Follow Up

• The SFMD will conduct the FMS PCR.
• The SFMD cannot conduct a PCR until we receive written permission from CMS that the SFM should conduct a PCR and that they have approved your POC.

When we conduct the FMS PCR we will also be doing the PCR for our survey.