



October 29, 2007

Ms. Darcy Miner, Director  
Compliance Monitoring Division  
Minnesota Department of Health  
85 East 7<sup>th</sup> Place; Suite 300  
St. Paul, MN 55164-0900

**Subject:** Our response to your letter of September 24, 2007 regarding enforcement of Minnesota Rule part 1305.0903 F Subp. 5a regarding sprinkler protection in elevator shafts, pits and machine rooms of licensed health care facilities

Dear Ms. Miner,

As you may or may not be aware, the requirement for sprinkler protection in elevator machine rooms and hoistways of buildings has been a major source of contention between building, elevator and fire code regulators for many years. The purpose and need for such protection has also been debated at great length among those in our industries. In our most recent rulemaking the State Fire Marshal and the Construction Codes & Licensing divisions met with fire, building and elevator safety professionals to study the safety considerations and arrived at a code solution to the controversy and confusion.

Our solution is based on the general sprinkler exception language found in items 1 and 2 of section 903.3.1.1.1 of the International Building Code (IBC) and International Fire Code (IFC). We believe the resulting language contained in our new state building and fire codes finally recognizes that sprinkler protection, specifically in these three areas, is not desirable and does not provide any significant fire safety benefit to these buildings or their occupants. Therefore, we do not believe the associated costs are a justified burden to place on the building owners. In addition, installation of these devices at the top of the elevator shafts and machine rooms presents a significant risk to fire fighters conducting emergency operations. This is the same conclusion some other states and major jurisdictions have arrived at.

Elevators and their associated machine rooms contain a significant amount of sophisticated electronic equipment. When water is applied it can cause short-circuiting and failure of the device. For this reason shunt trip breakers are provided to safely disable the device in cases of an accidental release of water, however in phase one or two emergency operations, it can maroon firefighters and victims during fire fighting and rescue operations. New provisions in the national elevator standards adopted in Minnesota will require elevators not containing fire service operation control to be retrofitted because of the important role these devices play in fire service operations. Further, the 2006 IBC and IFC have added new provisions to section 101.3 to clarify that the intent of the code is to provide safety for firefighters and emergency responders during emergency operations. Buildings of the type you are licensing typically have occupants not capable of self-evacuation. These elevators may be needed for evacuation and support purposes.

We therefore, believe that there is a negative impact to the safety and well-being of the patients, residents, visitors and staff of these buildings when sprinklers are installed in these areas. We agree that NFPA 13 is a time tested nationally recognized sprinkler standard. Although the International Building Code (IBC) has not yet added this specific exception, we believe based on the recent discussions and debate occurring in the states and major jurisdictions, it is only a matter of time before these requirements will find their way into National Codes and Standards, including future versions of NFPA 101.

In the meantime however, we acknowledge that federal rules governing health care facilities do not necessarily recognize state standards that are less restrictive than those used by federal inspectors. We also recognize the importance of Medicare and Medicaid funding to the citizens of our state. Therefore, unless elevator shafts, pits, or machine rooms can qualify under the appropriate exceptions listed in NFPA 13 (99) and the 2006 IBC, our agencies will allow sprinklers to be installed in these areas for these building types. We will instruct our staffs to take this into consideration in their plan reviews and inspections. We will also communicate our position to local jurisdictions recognizing the Federal requirements in these specific occupancies.

We respectfully request your department to join with us in exploring this issue further with the Federal agencies. We believe, as I expect you do, that anything we can do to increase the safety of these buildings for the occupants and emergency responders while reducing unnecessary costs from an already overburdened health care system is worth the time invested. We understand that the State of Massachusetts has gained acceptance in their region from Federal authorities. We would like to explore the factual nature of this and if true, try to gain the same approval in our region.

FOR CONSTRUCTION CODES & LICENSING AND THE STATE FIRE MARSHAL

Sincerely,



Thomas C. Anderson,  
State Building Official



Jerry Rosendahl,  
State Fire Marshal

Cc: Thomas Joachim- Assistant Commissioner, Department of Labor and Industry  
J Schultz- Assistant Director, CCLD  
S. Hernick- Assistant Director, CCLD  
S Mclellan- Assistant Director, CCLD  
Robert Dahm- Deputy Chief State Fire Marshal, SFD  
John Nisja- Fire Safety Supervisor, SFD  
James Loveland- Program Manager, MDH