

April 22, 2014

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I am writing to notify you that Disability Rights Ohio is initiating activities to monitor the rights of individuals with disabilities in Ohio's intermediate care facilities, including Home. This monitoring is intended to ensure that individuals with disabilities receive necessary services, do not experience abuse or neglect, and are aware of their rights. My colleague Sharne Hairston and I plan to conduct on-site monitoring activities at Home on May 5, 2014 around 3 P.M.

Disability Rights Ohio is the agency designated under state and federal law to protect and advocate for the rights of individuals with disabilities in Ohio. See R.C. 5123.60-.601 and 42 U.S.C. § 15043. Under this statutory authority, we have access to facilities that provide care and treatment for individuals with disabilities. Our authority includes access to all areas of the facility that are used by residents, for the purpose of providing information and training to residents about their rights, monitoring compliance with respect to the rights and safety of residents, and inspecting all areas of the facility that are used by or accessible to residents.

For our visit, R.C. 5123.601(A)(4) and 42 U.S.C. § 15043(a)(2)(H) do not require HIPAA releases (see also http://www.hhs.gov/hipaafaq/permitted/require/909.html) or consent of a guardian for those that have one. However, although guardian consent is not required, we certainly don't mind if you want to provide notice to guardians prior to our visit, and invite them to ask us questions about the monitoring if they have any.

On May 5, 2014, around 3 P.M., my colleague Sharne Hairston and I would like to meet with you or one of your staff to discuss the services provided at the facility, tour the facility, and meet with residents at the facility. If you have any questions prior to our visit, please call me at (614) 466-7264, ext. 104.

Sincerely,

Andy Breman Attorney at Law Other ANCOR Sites:

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CMS Proposes Adopting Updated Life Safety Code

April 16, 2014

On April 14, the Centers for Medicare & Medicaid Services (CMS) announced a proposed rule on the adoption of an updated life safety code. ANCOR will submit comments, and would appreciate member input on the proposed rule. CMS intends to adopt the National Fire Protection Association's (NFPA) 2012 edition of the life safety code (LSC) and the Health Care Facilities Code (HCFC). CMS says this will reduce the burden on health care providers, as this edition is aligned with international building codes and will make compliance across codes simpler for Medicare and Medicaid-participating facilities. Currently, CMS has applied standards set forth in the 2000 edition of the life safety code. The HCFC contains more detailed provisions specific to health care and ambulatory care facilities. Adoption of this code would provide minimum requirements for the installation, inspection, testing, maintenance, performance, and safe practices of health care facility materials, equipment and appliances.

The new edition of the LSC applies to: hospitals, long term care facilities (LTC), critical access hospitals (CAHs), Programs for All Inclusive Care for the Elderly (PACE), religious non-medical healthcare institutions (RNHCIs), hospice inpatient facilities, ambulatory surgical centers (ASCs), and intermediate care facilities for individuals with intellectual disabilities (ICE-IIDs).

The major changes for Intermediate Care Facilities for individuals with Intellectual Disabilities (ICF-IIDs) are:

- Expanded sprinkler requirements to include habitable areas, closets, roofed porches, balconies and decks in new facilities:
- Requires all attics to be sprinklered if they are used for living purposes, storage or housing of fuel fired equipment- if
 they are not used for these purposes, attics may have heat detection systems instead;
- · Requires all designated means of escape be free from obstruction;
- · New facilities are required to have smoke alarms installed on all levels;
- Allows access-controlled egress doors to be equipped with electrical lock hardware to prevent residents from wandering away;
- · Requires hazardous areas to be separated from other parts of the building by smoke partitions; and
- · Requires existing facilities to include certain fire alarm features when they choose to update their fire alarm systems.

The proposed rule was published in the Federal Register on April 16, 2014. It is available here. Public comments are due by June 16, 2014. Please send any comments or input you think should be reflected in ANCOR's comments to kberland@ancor.org.

Tagged in: Emergency Preparedness, Tagged in: Health Care

SUPPORT FOR NEW CONSTRUCTION / EGRESS DOORS

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