



EL DORADO COUNTY REGIONAL FIRE PROTECTION STANDARD

Care Facilities Having 6 or Fewer Clients, R-3.1
STANDARD #F-003 EFFECTIVE 06-03-2009

PURPOSE

To provide the requirements needed for Care Facilities Having 6 or Fewer Clients. This occupancy is classified as an R-3.1.

SCOPE

This guideline is intended to provide the minimum requirements necessary for review and approval of licensed 24-hour care facilities housing six (6) or fewer clients in a single family residence located within El Dorado County. Some situations may require additional requirements that are not included in this standard. Any Care Facility with more than six (6) occupants shall be an Occupancy Classification of R-4.

AUTHORITY

California Fire Code
California Building Code
California Health and Safety Code, Sec. 1502 – 1599.89
California Code of Regulations Title 19
California Department of Social Services

DEFINITIONS

Bedridden Person- A person requiring assistance in turning and repositioning in bed or being unable to independently transfer to and from bed with the exception of facilities with appropriate and sufficient care staff. mechanical devices if necessary, and safety precautions. As determined in CCR Title 22 regulations, by the Director of Social Services or his/her designee.

REQUIREMENTS

PLANS

A. Provide the following information (this information shall be on plans):

1. Facility Name
2. Applicant Name
3. Applicant Mailing Address

4. Contact Person Telephone Number
 5. Fax Number or Email (if available)
 6. Existing Occupancy Class
 7. Total Number of Children
 8. Age Group of Children
 9. Home Rented or Owned
 10. After hours emergency contact phone number
 11. Client physical status, (ambulatory, non-ambulatory, bedridden).
- B. Provide two (2) sets of plans that are ¼ inch scale on 18 x 24-inch paper. Plans shall include:
1. Two sets of site plans showing the building, fire equipment access (show distance from home to public roadway). Show closest fire hydrant to property, indicate distance to closest side property line, walkways to the public way, stairs, ramps, fences and gates. Site plans do not have to be to scale.
 2. Two sets of floor plans shall indicate the following drawn to scale:
 - a. All doors and hallways and their measurements.
 - b. Stairs, steps, ramps, exterior doors and sliding doors.
 - c. Water heater and furnace locations.
 - d. Smoke or heat detectors, fire alarm, pull station and sounding device.
 - e. Label all rooms, note which rooms will be used for day care purposes.
 - f. Any other significant information you feel applies to fire and life safety.
- C. Plans shall be submitted to the Fire Department for review and applicable fees paid for the plan check.
- D. The Fire Department's approved stamped set of plans shall be on site at the time of the Fire Department's inspections.

Any construction will require permits from the El Dorado County Building Department. Proof of Building Department permit will be required at the time of the Fire Department final inspection.

FACILITY GUIDELINES

A. Building Height and Area Provisions.

Limitations—six or less clients. Group R-3.1 occupancies where clients are housed above the first story, having more than two stories in height or having more than 3,000 square feet (279 m²) of floor area above the first story shall not be of less than 1-hour fire-resistance-rated construction throughout.

In Group R-3.1 occupancies housing a bedridden client, the client sleeping room shall not be located above or below the first story.

EXCEPTION: Clients who become bedridden as a result of a temporary illness as defined in Health and Safety Code Sections 1566.45, 1568.0832, and 1569.72. A temporary illness is an illness that persists for 14 days or less. A bedridden client may be retained in excess of the 14 days upon approval by the Department of Social Services and may continue to be housed on any story in a Group R-3.1 occupancy classified as a licensed residential facility. Every licensee admitting or retaining a bedridden resident shall, within 48 hours of the resident's admission or retention in the facility, notify the local fire authority with jurisdiction of the estimated length of time the resident will retain his or her bedridden status in the facility.

B. Special Provisions

Restraint shall not be practiced in a residential care home.

C. Exiting

1. Exiting From the House:

Provide a minimum of two (2) exits from the home. A sliding glass door may be permitted, if the opening of the door provides a minimum of 32 inches of open width.

For exterior exit doors, standard door hardware is allowed, but inter-connected deadbolt locks, which automatically unlock with the turning of the door handle are highly recommended. If screens are installed on any doors, it is recommended that they be equipped with similar door hardware.

2. Intervening Rooms:

A means of exit shall not pass through more than one intervening room and shall not pass through kitchens, storerooms, closets, garages, or spaces used for similar purposes.

3. Doors:

Where new construction is required, every exit doorway shall be of a size so as to permit the installation of a door not less than 3 feet in width and not less 6 feet 8 inches in height. Exit doors shall be capable of opening at least 90 degrees, and shall be mounted so that the clear width of the exit way is no less than 32 inches.

4. Floor Separations:

Group R-3.1 occupancies shall be provided with a non-fire resistance constructed floor separation at stairs which will prevent smoke migration between floors. Such floor separation shall have equivalent construction of 0.5 inch (12.7 mm) gypsum wallboard on one side of wall framing. There is no exception to the Floor Separation requirement if the clients are on the first floor only.

5. Doors Within Floor Separations:

Doors within such floor separations shall be tight fitting solid wood at least 1 3/8 inches (35 mm) in thickness. Door glazing shall not exceed 1,296 square inches (32 918 sq mm) with no dimension greater than 54 inches (1372 mm). Such doors shall automatically close and latch and

have smoke gaskets at the top and sides; or can be held open with magnetic holders that are automatic closing by smoke detection.

6. Changes in Level:

In Group R-3.1 occupancies housing non-ambulatory clients, changes in level up to 0.25 inch (6mm) may be vertical and without edge treatment. Changes in level between 0.25 inch (6 mm) and 0.5 inch (12.7 mm) shall be beveled with a slope no greater than 1 unit vertical in 2 units horizontal (50 percent slope). Changes in level greater than 0.5 inch (12.7 mm) shall be accomplished by means of a ramp.

Note: The “Emergency Pre-Fire Plan” shall clarify how patients including bedridden, non-ambulatory, and walker dependent patients will be exited from the building, all the way to the public way, or designated area.

The path of travel from an exit to the public way (street) shall be by way of a continuous and unobstructed all-weather surface, a minimum of 3 feet in width. All walkways are to be maintained clear, and unobstructed at all times.

Exterior gates that are in the path of exit travel shall be provided with standard gate hardware. Padlocks not permitted.

7. Facilities Housing Non-ambulatory Clients:

Bedrooms used by non-ambulatory clients shall have access to at least one of the following:

a. Egress through a corridor/hallway or area into a bedroom in the immediate area, which has an exit directly to the exterior and the corridor/hallway is constructed consistent with the dwelling unit interior walls. The hallway shall be separated from common areas by a solid wood door not less than 1 3/8 inch (35 mm) in thickness, maintained self-closing or shall be automatic closing by actuation of a smoke detector installed in accordance with California Building Code (CBC) Section 715.4.7.

b. Egress through a hallway which has an exit directly to the exterior. The hallway shall be separated from the rest of the house by a wall constructed consistent with the dwelling unit interior walls and opening protected by a solid wood door not less than 1 3/8 inch (35 mm) in thickness, maintained self-closing or shall be automatic closing by actuation of a smoke detector installed in accordance with CBC Section 715.4.7.

Note: A hallway door is not required if either of the following two methods are utilized for non-ambulatory exiting:

c. Direct exit from the bedroom to the exterior.

d. Egress from a bedroom to a bedroom, which exits to the exterior (without going into a hallway or open area).

8. Escape or Rescue Windows:

a. Escape or rescue windows shall be maintained as required by the Building Code for the year the residence construction was permitted.

b. Bars, grilles, grates or similar devices may be installed on emergency escape or rescue windows or doors, or on any required exit door provided:

1) The devices are equipped with Fire Department approved release mechanisms that are operable from the inside without the use of a key or any special knowledge or effort.

2) The building is equipped with smoke alarms.

3) Such bars, grilles, grates, and similar devices are equipped with a Fire Department approved release device, on the exterior side, for the purpose of Fire District emergency access.

D. Interior Wall and Ceiling Finish

Wall and ceiling finishes shall be no less than Class C.

NOTE: This section will not apply if the interior walls are of wall paint on textured gypsum wallboard.

E. Fire Protection:

1. Fire Extinguishers: Provide one 2A:10B:C fire extinguisher on each floor and in the kitchen area near the path of exit. It shall be hung on the wall so that the top is 3 ½ to 5 feet above the floor. It shall be serviced annually and after each use.

2. Smoke alarms shall be installed and maintained, regardless of the number of occupants, at all of the following locations:

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

b. In each room used for sleeping purposes.

c. In each story within a dwelling unit, including basements, but not including crawl spaces and uninhabitable attics. In dwellings or dwelling units with split levels and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.

d. Smoke alarms shall be provided throughout the habitable areas of the dwelling unit except kitchens.

e. Power Source. In new construction, and in existing homes converted to care facilities after January 1, 2008, required smoke alarms shall receive their primary power from the building wiring and shall be equipped with a battery backup. Smoke alarms shall emit a signal when the batteries are low. Wiring shall be permanent and without a disconnecting switch other than as required for over-current protection, (circuit breaker in the electrical panel).

f. Interconnection. Where more than one smoke alarm is required to be installed within an individual dwelling, the smoke alarms shall be interconnected in such a manner that the activation of one alarm will activate all of the alarms in the individual unit. The alarm shall be clearly audible in all bedrooms over background noise levels with all intervening doors closed.

3. Fire Sprinklers. The installation of an automatic fire sprinkler system is required in facilities housing more than one bedridden client and/or housing non-ambulatory clients above the first floor, or having any clients above the second floor.

F. Fire Safety:

1. Living Area/Garage Separation:

The separation of the garage from the house and attic shall be by means of a minimum one-half-inch gypsum board applied on the garage side or as per the adopted edition of the Building Code in the year the building was constructed. The door from the garage to the house shall be self-closing,

and positive latching. It shall also be made of 1 3/8 inch solid wood, or have a fire-protection rating of not less than 20 minutes. Ref 406.1.4

2. Draperies, Curtains, and Decorative Materials:

With the exception of individual sleeping rooms, all drapes, curtains, hangings, drops, and all other decorative materials, including Christmas trees, shall be made from a non-flammable material or shall be treated and maintained in a flame retardant condition. Exit doors shall not be concealed or obstructed by decorative materials.

3. Extension Cords:

Extension cords shall not be used as a substitute for permanent wiring. Extension cords shall not be attached to the structure, extend through walls, ceilings, or floors; run under doors or floor covering, or be subject to environmental or physical damage. Extension cords shall only be used with portable appliances while in immediate use.

4. Housekeeping:

All portions of residential care facilities shall be maintained in a neat and orderly manner, free from anything that would create a fire or life hazard, or a condition, which would add or contribute to the rapid spread of fire. This includes the proper storage of combustible material and flammable or combustible liquids, the proper storage and disposal of waste material and rubbish, and the removal of any dry vegetation from within thirty (30) feet of the facility. Good housekeeping shall be practiced and observed at all times.

5. Open Flame Devices:

Open flame devices (candles, oil lamps, and similar items) shall not be used in residential care facilities.

6. Smoking Prohibited:

Smoking is prohibited in any patient room utilizing oxygen or air induced mattresses.

7. Emergency Pre-fire Planning:

Provide a staff-training program, insuring that all staff members are trained in the use of all fire extinguishers and methods of conducting evacuations, including the use of any equipment required to move patients.

G. Exterior:

1. Premises Identification (Address):

Address numbers shall be mounted in a way so that they are plainly visible from the street or road fronting the property. Numbers shall be illuminated at night, at least 6-inches tall, and have a contrasting background.

The 6-inch tall requirement is a minimum, if the numbers are not visible from the street, they will need to be larger and/or a sign post with the house numbers shall be posted at the public street.

2. Access Roadways:

All portions of the facility shall be located within 150 feet of an approved fire apparatus access roadway. All homes which cannot comply with this 150 foot requirement shall be provided with a 20 foot wide fire apparatus access lane, including an approved fire apparatus turn-around. (Please contact Metro Fire District for fire lane and apparatus turn-around specifications.)

3. Vehicle Gates & Barriers:

Please contact Metro Fire District **prior** to the installation of any vehicle gates or barriers for minimum gate requirements, a Knox lock application, and to obtain a required gate permit. A man gate, with approved hardware, is to be located within 10 feet of a vehicle gate. The addition of fencing and gates that obstruct emergency access to a facility, without a Fire District permit, voids the Fire Safety Clearance for that facility.

4. Spark Arrester for Chimney:

All chimneys shall be equipped with an approved spark arrester. Branches of trees and large shrubs are to be maintained a minimum of 10 feet away from a chimney.

H. Facilities Without Fire Sprinklers, Housing a Bedridden Client:

All of the following shall be provided in new and existing facilities:

1. Meet all of the requirements for a new non-ambulatory facility. SFM Interpretation 08-060

The following are from California Building Code, Section 425.8.3.3:

2. A direct exit to the exterior of the residence shall be provided from the client sleeping room.
3. Interior doors to a bedridden client's sleeping room shall be self-releasing, positive latching, 1 3/8 inch (35 mm), and be of solid wood. Such doors shall be provided with a gasket so installed as to provide a seal where the door meets the jam on both sides and across the top. Doors shall be maintained self-closing or shall be automatic closing by actuation of a smoke alarm in accordance with CBC Section 715.4.7.
4. Facilities shall not have a night latch, dead bolt, security chain, or any similar locking device installed on any interior door leading from a bedridden client's sleeping room to any interior area such as a hallway or general use area of the residence.
5. Every required exit doorway from a bedridden client's sleeping room shall be of a size as to permit the installation of a door not less than 3 feet in width and not less than 6 feet 8 inches in height. When installed in exit doorways, exit doors shall be capable of opening at least 90 degrees and shall be so mounted that the clear width of the exit way is not less than 32 inches.
6. The exterior exit door to a bedridden client's sleeping room shall be operable from both the interior and exterior of the residence. This includes the ability of the caregiver to unlock the door from the exterior, and includes sliding glass doors. If hardware is added to a sliding glass door in order for it to be unlocked with a key from the outside, the sliding glass door will not be permitted unless the finished opening is at least 32 inches in clear width.

I. Facilities Having More Than One Bedridden Client

1. Fire sprinklers are required per CBC 903.3.
2. Must meet the requirements for a non-ambulatory facility.