



Ohio Administrative Code

Rule 3701-16-13 Building, plumbing, fire and carbon monoxide safety requirements.

Effective: July 12, 2024

(A) The building or buildings in which a residential care facility is located are obligated to be approved by and have a certificate of occupancy for the appropriate use group designation issued by the local certified building department with jurisdiction over the area in which the building or buildings are located, or by the department of commerce if there is no local certified building department. In the case of a license renewal, if any alterations to the buildings have been made since the original license was issued or the license was last renewed, whichever is later, the residential care facility is obligated to have a certificate of occupancy for the residential care facility issued by the department of commerce or a local certified building department.

(B) The plumbing fixtures in a residential care facility are obligated to conform to the applicable provisions of the Ohio plumbing code.

(C) All plumbing is to be installed in accordance with the Ohio plumbing code and maintained free of leakage and odors and have adequate water pressure to reasonably ensure resident health and safety protection. This includes, but is not limited to, plumbing in:

- (1) Water closets;
- (2) Service sinks;
- (3) Kitchens;
- (4) Utility closets;
- (5) Public and resident bathrooms;
- (6) Shower and bathing areas; and



(7) Drinking fountains.

(D) Lavatories, bathing facilities, and shower facilities are to be provided with pressure balancing thermostatic mixing devices in accordance with the Ohio plumbing code to prevent unanticipated changes in hot water temperatures.

(E) The water supply for a residential care facility is to be taken from a public supply, if available. Each residential care facility using a water source other than a public water system is obligated to comply with all applicable local and state regulations regarding the construction, development, installation, alteration, and use of private water systems.

(F) Each residential care facility not using a public sewage disposal system is obligated to comply with all applicable local and state regulations regarding the construction, development, installation, alteration, and use of household sewage disposal systems.

(G) Each residential care facility is obligated to comply with all the applicable state fire code standards of Chapter 1301:7-7 of the Administrative Code.

(H) Each residential care facility is obligated to be inspected for fire safety in accordance with paragraph (A) of rule 3701-16-04 of the Administrative Code.

(I) Each residential care facility is obligated to provide paths of clear and unobstructed access to egress exits. Additionally, the propping open of a door through the use of door stops, wedges, or other devices is only permitted with approved hold-open devices that release with the loss of facility power and/or with the engagement of the fire alarm or sprinkler system.

(J) Each residential care facility is obligated to develop and maintain a written disaster preparedness plan to be followed in case of emergency or disaster. A copy of the plan is obligated to be readily available at all times within the residential care facility and a copy of the disaster preparedness plan is to be maintained electronically to ensure off-site access in the event of emergency. The plan is obligated to include the following:

(1) Procedures for evacuating all individuals in the residential care facility, which include the



following:

- (a) Provisions for evacuating residents with impaired mobility; and
 - (b) Provisions for transporting all of the residents of the residential care facility to a predetermined appropriate facility or facilities that will accommodate all the residents of the residential care facility in case of a disaster requiring evacuation of the residential care facility.
- (2) A plan for protection of all persons in the event of fire and procedures for fire control and evacuation, including a fire watch and the prompt notification of the local fire authority and state fire marshal's office when a fire detection, fire alarm, or sprinkler system is impaired or inoperable. For purposes of this rule, "fire watch" means the process set forth in the Ohio fire code for detecting and immediately alerting residents, staff, and the responding fire department of a fire or other emergency while the building's fire alarm or sprinkler system is impaired, inoperable or undergoing testing;
- (3) Procedures for locating missing residents, including notification of local law enforcement;
- (4) Procedures for ensuring the health and safety of residents during severe weather situations, such as tornadoes and floods, and designation of tornado shelter areas in the facility; and
- (5) Procedures, as appropriate, for ensuring the health and safety of residents in residential care facilities located in close proximity to areas known to have specific disaster potential, such as airports, chemical processing plants, and railroad tracks.
- (6) Each residential care facility will notify the director by electronic mail or telephone when there is an interruption of normal business services due to an emergency or a disaster involving the facility.
- (K) Each residential care facility is obligated to conduct the following drills unless the state fire marshal allows a home to vary from this obligation and the residential care facility has written documentation to this effect from the state fire marshal:
- (1) Twelve fire exit drills, one conducted on each shift at least every three months to familiarize staff members and residents with signals, evacuation procedures and emergency actions that may be



necessary under varied times and conditions. Fire exit drills will include the transmission of a fire alarm signal to the appropriate fire department or monitoring station, verification of receipt of that signal, and simulation of emergency fire conditions except that the movement of infirm and bedridden residents to safe areas or to the exterior of the structure is not necessary for these drills. Drills conducted between nine p.m. and six a.m. may use a coded announcement instead of an audible alarm. Residential care facilities that have an alarm system that is not capable of sending a fire alarm signal if an audible alarm is not used are obligated to transmit a fire alarm signal and verify receipt of that signal no more than twelve hours after the coded announcement. Fire drills will meet the following standards.

- (a) Each staff member is obligated to participate in at least one fire drill annually.
- (b) One staff member with knowledge of the disaster preparedness plan and the fire evacuation routes is obligated to be designated to observe and evaluate each drill and not participate in that drill.
- (c) Residents capable of self-evacuation are to be actually evacuated to safe areas or to the exterior of the residential care facility in at least two fire drills a year on each shift. Movement of non-ambulatory residents to safe areas or to the exterior of the facility is not necessary for these drills.
- (2) At least two disaster preparedness drills per year, one of which is a tornado drill which is conducted during the months of March through July.
- (3) The residential care facility will reset the alarms after each drill.
- (L) Each residential care facility is obligated to investigate and take corrective action for all problems encountered in the drills obligated under paragraph (K) of this rule.
- (M) Each residential care facility is obligated to keep a written record and evaluation of each fire drill which includes the date, time, staff member attendance, method of activation, effectiveness of the drill procedures, number of individuals evacuated, total time for evacuation, and the weather conditions during the evacuation, and of each tornado drill. Any problems encountered and the corrective actions taken are to be included in the written record. This record is to be maintained in the facility for three years.



(N) Each residential care facility is obligated to post in a conspicuous place in each section or floor of the residential care facility a correctly oriented wall-specific floor plan designating room use, locations of alarm sending stations, evacuation routes and exits, fire alarms and fire extinguishers, and flow of resident evacuation.

(O) The buildings in which a residential care facility is housed are obligated to be equipped with both an automatic fire extinguishing system and fire alarm system that conform to standards set forth in rules 4101:1-1 to 4101:1-35 and rules 1301:7-7-01 to 1301:1-7-47 of the Administrative Code. Records of the installation, testing and maintenance of both systems are to be maintained at the facility and produced for inspection upon request.

(P) All staff members in each residential care facility are to be trained in fire control and evacuation procedures within three working days of beginning employment. A staff member is not allowed to stay alone in the residential care facility with residents until the staff member has received the training in fire control and evacuation procedures established by this rule.

(Q) Each residential care facility is obligated to provide for annual training in fire prevention for regularly scheduled staff members on all shifts to be conducted by the state fire marshal or township, municipal or local legally constituted fire department. Records of this training are to be maintained at the facility.

(R) Each residential care facility is obligated to train all residents in the proper actions to take in the event of fire, tornado, disaster, or other emergency.

(S) Each residential care facility is obligated to conduct at least monthly a fire safety inspection which is recorded on forms provided by the department and kept on file in the facility for three years.

(T) Each residential care facility is obligated to install carbon monoxide detectors in accordance with section 915. of the Ohio Fire Code.

(U) Smoking, as defined in rule 3701-52-01 of the Administrative Code, which includes the use of an electronic smoking device and a vapor product, are permitted only in properly designated areas



which may include resident units with the approval of the administrator. No staff member, resident of a residential care facility or other persons in the facility is permitted to smoke, carry a lighted cigarette, cigar, or pipe or use any spark or flame producing device in any room or area in the facility where oxygen is stored or in use. Approved terminals of a piped oxygen supply does not constitute storage. "No smoking" signs are to be posted in areas and on doors of rooms where oxygen is stored or in use. Each residential care facility is obligated to take reasonable precautions to ensure the safety of all residents when permitting residents to smoke. Ash trays, wastebaskets or containers into which burnable materials are placed cannot be made of materials which are flammable, combustible, or capable of generating quantities of smoke or toxic gases and shall be used solely for that purpose. Such containers are to be made readily available in all areas where smoking is permitted. Residential care facilities that allow outdoor resident smoking are obligated to make accommodations for residents during adverse weather conditions.

(V) Each residential care facility is obligated to maintain all electrical systems including, but not limited to, cords, switches, lighting fixtures, and lamps in good, safe operating condition and ensure that appliances are in good, safe operating condition;

(W) Each residential care facility is obligated to report any incident of fire, damage due to fire and any incidence of illness, injury or death due to fire or smoke inhalation of a resident within twenty-four hours to the office of the state fire marshal and the department on forms provided by these entities.

(X) Each residential care facility is obligated to maintain written transfer agreements with other facilities that can meet the needs of residents who are in need of transfer because their health and safety is or potentially is adversely affected by conditions in the facility.