



*Casey C. Grant, P.E.
Secretary, Standards Council*

26 October 2005

To: Interested Parties

Subject:

Standards Council Decision (Final):	D#05-32
Standards Council Agenda Item:	SC #05-7-12
Date of Decision*:	29 July 2005
TIA (No. 817) on NFPA 99, <i>Standard for Health Care Facilities</i>	

Dear Interested Parties:

At its meeting of 25-29 July 2005, the Standards Council considered an appeal on the above referenced matter.

Attached is the final decision of the Standards Council on this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Casey C. Grant".

Casey C. Grant, P.E.
Secretary, NFPA Standards Council

c: D. Berry, R. Bielen, M. Brodoff, S. Desrocher, L. Nisbet
Members, TCC on Health Care Facilities (HEA-AAC)
Members, TC on Piping Systems (HEA-PIP)
Members, NFPA Standards Council (AAD-AAA)
Individuals Providing Appeal Commentary

*NOTE: Participants in NFPA's codes and standards making process should know that limited review of this decision may be sought from the NFPA Board of Directors. For the rules describing the available review and the method for petitioning the Board for review, please consult section 1-7 of the NFPA Regulations Governing Committee Projects and the NFPA Regulations Governing Petitions to the Board of Directors from Decisions of the Standards Council. Since this Council decision is not "related to the issuance of a document" as referenced in 1-7.2 of the Regulations Governing Committee Projects, notice of the intent to file such a petition must be submitted to the Clerk of the Board of Directors within a reasonable time period.



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TIA (No. 817) on NFPA 99, *Standard for Health Care Facilities*

At its meeting of 25-29 July 2005, the Standards Council considered a request from Mr. F. Mummolo, Smart Technology, Inc., that proposed TIA No. (No. 817) on the 2005 edition of NFPA 99, *Standard for Health Care Facilities*, not be issued. The proposed TIA concerns the requirements for making connections to existing in-use piping systems. Specifically, the TIA No. 817 would limit procedures for repairing or modifying medical gas systems while the system remains pressurized (the “live tap” limitation). Mr. Mummolo argues that safe technologies using live taps, including those offered by Smart Technology, Inc., exist and are currently in use without incident. He argues that the proposed TIA excludes such technologies without adequate basis.

After a review and consideration of all the information available to it, the Council has concluded that more study of this issue is required and has voted not issue TIA No. 817.

A live tap limitation was also considered in the last revision cycle of NFPA 99, and it resulted in an appeal that was considered by the Standards Council at its January 2005 meeting (see Council Agenda Item # 05-1-4-a, D #05-03). In that January 2005 appeal, the Standards Council upheld the result yielded by the codes and standards development process, namely, that the proposed live tap limitation be returned to committee for further study. Soon thereafter, the Technical Committee on Piping Systems (TC) processed proposed, TIA No. 817. It appears, however, that input from the proponents of live tap technologies who had been active in the recent January 2005 appeal had not been considered in the development of TIA No. 817.

The proposed TIA was published for public review and comment, and then balloted through the Technical Committee on Piping Systems (TC) and the Technical Correlating Committee on Health Care Facilities (TCC) in accordance with the Regulations Governing Committee Projects to determine if it had the necessary three-fourths support on technical merit and emergency nature to establish a recommendation for issuance. The ballot failed to achieve the required support from the TCC for emergency nature. Although the Council may overturn the TC/TCC recommendation if clear and substantial reasons exist to do so, it finds no such reason in this case. Moreover, the Council agrees with the TCC that the TIA lacked evidence that it was of an emergency nature requiring prompt action. Indeed the Council is of the view that the TC has not given adequate review and consideration to the hot tap issue and, given the technical review and input that, in the Council’s view, remains to be done concerning the live tap issue, the subject merits full review afforded by the regular revision process.

The Council stresses that, in any future standards development on this issue, the TC should afford Smart Technology or others with relevant technology an adequate opportunity to provide input. In addition, the Council encourages the TC, in further addressing this subject, to develop, as appropriate, performance oriented requirements that can accommodate any alternative technologies that can perform accordingly. In this regard, the TC should be guided by 3-3.6 of the Regulations Governing Committee Projects that states: “Each TC shall, as far as practicable, prepare Documents in terms of required performance, avoiding specifications of materials, devices, or methods so phrased as to preclude obtaining the desired results by other means. It shall also base its recommendations on one or more of the following factors: namely, fire experience, research data, engineering fundamental, or other such information as may be available.”

Finally, during the appeal a question was raised on the organization and balance of the membership of the Technical Committee on Piping Systems, and a request was made that the committee be discharged and reconstituted. The Council, however, has found no basis to support a conclusion that the TC should be discharged and reconstituted on account of unfairness or imbalance. The Council notes, however, that the TCC is currently developing recommendations for a reorganization of the health care facilities project, and the Council will, in that context, have further occasion to review issues of committee membership and balance. Going forward, any issues concerning the makeup or conduct of the technical committee dealing with piping systems, may, as with any committee project, be raised with the Council as appropriate.