Department of Veterans Affairs **VHA DIRECTIVE 2008-011**
Veterans Health Administration
Washington, DC 20420 **March 10, 2008**

ELECTRICAL SAFETY POLICY FOR PATIENT CARE EQUIPMENT

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes policy on electrical safety for patient care equipment.

2. BACKGROUND

a. VHA policy in the area of electrical safety for patient care equipment is defined by the industry consensus standards provided through the latest edition of the National Fire Protection Association (NFPA), NFPA-99, "Health Care Facilities," and the latest edition of The Joint Commission (TJC)'s "Comprehensive Accreditation Manual for Hospitals."

b. As the use of electromechanical and electronic medical devices began to spread in hospitals, early industry attempts were made in the 1970s to provide technical standards for the special situation provided by using electrical equipment in a health care setting (NFPA-76B-T). To ensure this evolving trend was appropriately addressed, the Department of Medicine and Surgery (DM&S) released a circular on patient electrical safety in September 1974. This document had similar technical requirements to NFPA-76B-T, with the circular emphasizing the unique VHA environment that included the emergence of the VHA Biomedical Engineering Program. As more information became known, other VHA publications were issued, including the incorporation of electrical safety requirements in the DM&S Supplement to MP-3, published in 1978.

c. The continued development of the Biomedical Engineering profession, both in the public and private sectors, has led to a better understanding of the issues related to the safe use of medical devices in hospitals. Industry consensus standards, such as those produced by NFPA, have matured and are well accepted, as evidenced by the reference to the Life Safety Code (NFPA-101) in the 2008 edition of TJC's "Comprehensive Accreditation Manual for Hospitals." Furthermore, NFPA standards are revised and published every 3 years to reflect the current state of the industry. TJC standards are similarly revised on a regular basis.

3. POLICY: It is VHA policy to ensure that electrical equipment used for patient care is managed in a safe and effective manner. ***NOTE****: The latest edition of NFPA-99, "Health Care Facilities," defines technical requirements and the latest edition of the Joint Commission's "Comprehensive Accreditation Manual for Hospitals" defines program requirements.*

4. ACTION: The facility Director is responsible for ensuring that:

a. The facility electrical safety policy for patient care equipment is updated to be consistent with the latest editions of NFPA-99 "Health Care Facilities" and the latest edition of TJC's "Comprehensive Accreditation Manual for Hospitals."

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b. Program guidance is provided through periodic training sessions, written documentation, VHA telephone contact, or any other appropriate means for those areas in which there is a perceived conflict with other VHA policy. ***NOTE:*** *Historically, operating rooms and cardiac catheterization rooms within VHA facilities were designated as wet locations for electrical safety purposes and therefore required isolated power systems; however, these rooms are no longer designated as wet locations for electrical safety purposes. Existing isolated power systems must be tested and maintained consistent with the requirements in the latest edition of NFPA-99 "Health Care Facilities" standards or be removed from service entirely. A new grounding system must be provided to comply with the current National Electrical Code at the time the isolated power system is removed.*

5. REFERENCES

a. The National Electrical Code, the latest edition.

b. The NFPA-99 "Health Care Facilities," the latest edition.

c. "Comprehensive Accreditation Manual for Hospitals," TJC.

d. "Electrical Safety Questions and Answers," ECRI Health Devices, February, 2005.

e. "Isolated Power, the Final (two) Words," 2004 AIA/ASHE International Conference, Vernon and Nash.

6. FOLLOW-UP RESPONSIBILITY: The Office of the Deputy Under Secretary for Health for Operations and Management (10N) is responsible for this Directive. Questions may be directed to the Director, VHA Biomedical Engineering at 202-461-7080.

7. RESCISSIONS: None. This VHA Directive expires March 31, 2013.

Michael J. Kussman, MD, MS, MACP
Under Secretary for Health

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