Residential Care Facilities
with six or fewer non-ambulatory or bedridden clients

Guideline F-03
Residential Care Facilities

PURPOSE
The following guideline is intended to facilitate compliance with the appropriate requirements for residentially based care facilities. Regulations regarding residentially based care facilities are found in the California Code of Regulations (CCR), Title 19, as well as the 2019 California Fire Code (CFC) and California Building Code (CBC).

SCOPE
This guideline is intended to provide the minimum requirements necessary for review and approval of care facilities licensed by the Department of Social Services to house six or fewer non-ambulatory or bedridden clients in a single family residence located within the jurisdiction of the Orange County Fire Authority (OCFA); see Attachment 1 for areas served by OCFA. Plans for residential or commercial care facilities housing more than six clients must be submitted through the OCFA Planning and Development Services section for approval. Contact the OCFA at 714-573-6100 for more information regarding facilities housing more than six clients.

For residential care facilities housing only ambulatory occupants, see Guideline F-08.

This document does not include all regulations that may apply to residentially based care facilities—it is only intended to provide guidance on issues and questions commonly encountered during fire clearance inspections.

SUBMITTAL REQUIREMENTS
Department of Social Services (DSS) Form STD 850 must be forwarded to OCFA from DSS prior to scheduling your fire clearance inspection. Upon completion of the inspection, the 850 form will be completed and returned to DSS by OCFA. Please be aware that a fee will be charged for the fire clearance if a reinspection is necessary. Please review this guideline thoroughly and complete Attachment 3 prior to your inspection to facilitate fire clearance sign-off by OCFA.

At least two weeks before your scheduled fire clearance inspection date, you must submit site and floor plans to OCFA Prevention Field Services (PFS) for review via email at 850@ocfa.org. Your fire clearance inspection request cannot be processed and your 850 form cannot be completed if OCFA has not received the requested information in time or the plans are incomplete. If you have questions on the submittal requirements or inspection process please contact your local OCFA PFS office (see Attachment 1).

The plans must include the information listed below:
☐ **Building Address:** Street name and number, city, zip code

☐ **Occupancy Classification:** R-3.1

☐ **Site Plan:** Show the following:
   - outline of the home and any other structures on the property (detached garages, sheds, etc.)
   - exit pathways from the home to the street—note the dimensions of the narrowest point along the exit path
   - fences and walls over 3 feet tall
   - gates—note the clear opening width

☐ **Floor Plan:** Show the following:
   - all rooms in the home—label each room with its function (bedroom, kitchen, bathroom, etc.) and clearly identify which spaces are proposed for clients and their ambulatory status (ambulatory, non-ambulatory, bedridden); indicate how many clients will reside in each sleeping room.
   - attached garages—show doors, windows, or other openings between the garage and the rest of the home
   - interior and exterior doors—note the clear height/width of each door
   - width of all hallways in client areas
   - the location of all smoke alarms and carbon monoxide detectors

☐ **Sprinkler System:** Note if the home is equipped with a fire sprinkler system. A fire sprinkler system is required if more than one client is bedridden, if any non-ambulatory clients are housed on the second or higher story, or if any clients are housed on the third or higher story. *(CBC 903.2.8)*

Please be aware that a fee will be charged for the fire clearance inspection, and additional fees will be accrued if more than one reinspection is necessary. Please review this guideline thoroughly and complete Attachment 3 prior to your inspection to facilitate fire clearance sign-off by OCFA.

Fire clearance from OCFA does not constitute approval from other agencies that may have jurisdiction over this facility. Contact your local building or planning department regarding their zoning, construction, and permit requirements.

**GENERAL REQUIREMENTS**

Residentially based care facilities shall comply with the requirements listed below:

☐ **Smoke Alarms/Detectors:** Smoke alarms are required in all habitable areas of the dwelling such as bedrooms, living rooms, dining rooms, hallways, foyers, basements, and similar spaces. Alarms are not required in kitchens, bathrooms, closets, garages, and unfinished
attics or crawlspaces. Smoke alarm devices shall be installed in accordance with the manufacturer's published guidelines/instructions. *(CBC 907.2.10.2, 907.2.11.8)*

All alarm devices must be interconnected to each other, physically or wirelessly, so that when one activates they all sound an alarm simultaneously. When activated, smoke alarms shall be clearly audible throughout the home. *(CFC 907.2.10.5)*

In new construction and where existing homes are converted into residential care facilities, smoke alarms shall be hardwired to the home’s primary power supply and be equipped with a battery back-up. They shall not be on a circuit with a shut-off switch other than that required for overcurrent protection. Electrical work shall be approved by the local building department. *(CFC 907.2.10.6)*

Smoke alarms shall be UL listed and California State Fire Marshal approved and shall be tested and maintained in accordance with the manufacturer’s instructions. Smoke alarms that no longer function and/or are older than ten years shall be replaced; replace the device if a manufacturer’s date cannot be found. *(CFC 907.2.10)*

Protective social care facilities that house persons who are hearing impaired shall be provided with notification appliances for the hearing impaired installed in accordance with NFPA 72. Such devices must activate upon initiation of the smoke alarms *(CFC 907.5.2.3.4)*.

**Definition of Protective Social Care:** The housing and care of any person of any age when such person is referred to or placed within such home or facility for care and supervision services by any governmental agency.

☐ **Carbon Monoxide Detectors/Alarms:** Carbon monoxide (CO) detection is required in dwellings with gas or wood-burning fireplaces, or gas or fuel-oil forced air furnaces, or in homes with an attached garage where there is a door, duct, or other opening between the garage and the rest of the home.

Devices shall be provided in the following locations:

1. In the room or space leading to each separate bedroom/sleeping area in the home (for example, in the hallway serving one or more bedrooms)
2. On every occupiable level, including basements
3. In every bedroom or sleeping area where there is a fireplace or other fuel-burning appliance located within the space or an attached bathroom.

CO devices shall be hardwired to the home’s electrical system and shall have battery back-up. All CO devices shall be interconnected, either physically or wirelessly, so that if one activates they all sound an alarm simultaneously.
Exception: Battery operated devices are permitted in homes built prior to January 1, 2011 if any work done on the home does not result in exposure of the structure in the areas where devices are required.

Install CO devices in accordance with the manufacturer’s instructions. CO devices shall be UL listed and State Fire Marshal approved. Combination smoke and carbon monoxide detectors are permissible. Electrical work shall be approved by the local building department. (CBC 915)

☐ General Exiting: There shall be a minimum of two approved exits from the dwelling that are remotely located from each other. Exit doors serving clients shall be at least 6 feet 8 inches in height with at least 32 inches of clearance when opened at a 90-degree angle. For double doors, if the secondary door leaf requires operation of anything other than a door knob or handle to open, such as slide bolts or pins, measurements shall be taken with the secondary leaf closed and only the normally active leaf open. Sliding doors may be used as required exits as long as they meet the 32-inch unobstructed opening width. (CBC 1010.1.1, 435.8.3)

Hallways serving clients shall not be less than 36 inches wide. Exit paths both inside and outside the home shall be maintained clear with no furniture, equipment, storage, or other obstructions that could hinder immediate use. (CBC Table 1020.2, 1005.7, 1003.6)

The exit path from common spaces serving clients to an exterior exit door shall not pass through more than one intervening room, nor shall it pass through storerooms, closets, garages, or spaces used for similar purposes. The egress path shall not pass through kitchens where building construction separates the kitchen from other rooms. (CBC 435.8.3.4)

All lockable doors and gates along the paths of exit travel shall be equipped with hardware that does not require any special effort or knowledge, nor require the use of a key or other tool, to operate in the direction of exit travel. Where the total occupant load of the facility (clients, staff, caretakers, and other individuals normally working or residing at the home) is greater than 10, operation of the primary door knob shall also simultaneously unlock the dead bolt. Security chains are allowed on exterior exit doors in facilities with 10 or fewer occupants provided they do not require use of a key or tool. Manually operated flush or slide bolts are not permitted regardless of occupant load. (CBC 435.8.3, 1010.1.9)

Emergency escape and rescue openings shall be maintained free of any obstructions other than those noted below and shall be operational from the inside of the room without the use of keys, tools or special knowledge. Bars, grilles, covers, screens or similar devices are permitted to be placed over emergency escape and rescue openings provided the minimum net clear opening size is not obstructed and such devices can be released or removed from the inside without the use of a key, tool, special knowledge, or force greater than that which is required for normal operation of the emergency escape and rescue opening. The release
mechanism shall be maintained operable at all times. Such bars, grills, grates or any similar devices shall be equipped with an approved exterior release device for use by the fire department. *(CBC 1030)*

☐ **Exiting from Client Rooms in a Sprinklered Home:** Bedrooms serving bedridden or non-ambulatory clients shall be provided with an exit path that conforms to at least one of the following:

1. From the client’s bedroom directly to the exterior.
2. From the client’s bedroom into an adjacent bedroom, then directly to the exterior
3. From the client’s bedroom into a hallway, then directly to the exterior.
4. From the client’s bedroom into a hallway, then into another client’s bedroom, then directly to the exterior

Where a hallway serves as part of the exit path, as in conditions 3 and 4 above, the hallway be separated from other parts of the home such as living and dining rooms, kitchens, foyers, and other similar spaces by a solid wall consistent with the construction of other interior walls in the dwelling; the doorway through this wall shall be protected with a solid wood door that is at least 1-3/8 inches thick. The door shall be self-closing or shall close automatically upon activation of a smoke detector. See Attachment 2. *(CBC 435.8.3.2)*

Bedrooms serving bedridden clients shall be located on the first floor only. *(CBC 435.3.2)*

☐ **Exiting from Client Rooms in an Unsprinklered Home:** Where the home is not protected by a fire sprinkler system, exiting requirements are different for non-ambulatory and bedridden clients.

*Non-ambulatory clients:* Bedrooms serving non-ambulatory clients shall be provided with an exit path that conforms to at least one of the following:

1. From the client’s bedroom directly to the exterior.
2. From the client’s bedroom into an adjacent bedroom, then directly to the exterior
3. From the client’s bedroom into a hallway, then directly to the exterior.
4. From the client’s bedroom into a hallway, then into another client’s bedroom, then to the exterior

Where a hallway serves as part of the exit path, as in conditions 3 and 4 above, the hallway be separated from other parts of the home such as living and dining rooms, kitchens, foyers, and other similar spaces by solid walls consistent with the construction of other interior walls in the dwelling; the doorway through this wall shall be protected with a solid wood door that is at least 1-3/8 inches thick. The door shall be self-closing or shall close automatically upon activation of a smoke detector. See Attachment 2. *(CBC 435.8.3.2)*
**Bedridden client:** Only a single bedridden client can be housed in an unsprinklered home. That bedroom shall be provided with all of the following:

1. A direct exit to the exterior of the home.
2. Doors to the room shall be 1-3/8” thick solid wood.
3. Door openings shall be provided with a gasket along the jamb on both sides and at the top to inhibit the passage of smoke.
4. Doors to the room shall be self-closing or shall close automatically upon activation of a smoke detector.
5. Doors leading to other interior spaces such as hallways, living or dining spaces, or similar general use areas of the home shall not be provided with a night latch, dead bolt, security chain, or any similar locking device.
6. The exterior exit door in a bedridden client’s bedroom shall be operable from both the interior and exterior of the home.
7. The door shall provide at least 32 inches of clear width with the door open at 90 degrees.
8. The bedroom shall be located on the first story.

See Attachment 2. *(CBC 435.8.3.3)*

☐ **Use of floors other than the 1st story:** Where non-ambulatory clients are housed above the first floor in an unsprinklered home, construction that will prevent migration of smoke between stories is required. Construction of this floor separation shall be equivalent to 1/2-inch gypsum wallboard on at least one side of the building’s framing. Openings in this smoke separation shall be protected with solid wood doors at least 1-3/8 inches thick. Doors shall be positive latching and have a smoke gasket along the jambs at the sides and top of the opening. The door shall be self-closing or automatic-closing by smoke detection. Glazing in the door shall be limited to 1,296 square inches and no more than 54 inches in any dimension. This floor separation is not required where there is at least one exterior exit door from the floor(s) occupied by tenants. *(CBC 435.8.7)*

Use of existing stairs, except for spiral and winding stairs, is permitted provided that the stairs have a maximum rise of 8 inches with a minimum run of 9 inches. Minimum stairway width is 30 inches. *(CBC 435.8.6.2)*

Where the home has three or more stories and/or more than 3,000 square feet of area above the first story, non-ambulatory clients shall not be housed in spaces above the first floor unless the home is built of at least 1-hour fire resistive rated construction throughout. Please be aware that most homes do not meet this requirement as originally constructed. *(CBC 435.3.2)*

Bedridden client sleeping rooms shall not be located above or below the first story. *(CBC 435.3.2)*
Other Requirements:

1. Provide a minimum of (4) four-inch address numbers that contrast with their background. Address numbers are required to be attached to the structure and visible from the street.  
   (CFC 505.1)
2. Provide a fire extinguisher with a minimum classification/rating of 2A:10B:C. The extinguisher is required to be securely attached to a wall in a visible and readily accessible location with the top of the extinguisher mounted no more than 5 feet above finished floor level, with the bottom at least 4” above the floor. The extinguisher is required to be visually inspected annually and serviced every six years by a licensed fire protection company. A current annual service tag is required to be attached to the fire extinguisher or, if the extinguisher was purchased within the last year, proof of purchase date is required. Please review the manufacturer’s guidelines for additional requirements and instructions on how to use the extinguisher.  
   (CBC 906.1 item 7, 906.9)
3. Maintain combustible storage clearance around water heaters as per manufacturer's specifications.  
   (CFC 305.1)
4. All fire and smoke rated construction separating the garage and the dwelling must be maintained in good condition with no open penetrations.  
   (CFC 703.1)
5. If the garage is attached to the dwelling unit, doors between the dwelling and the garage shall be equipped with a self-closing device and be positive latching. The door shall be either solid wood or a solid- or honeycomb-core steel door that is a minimum of 1-3/8 inches thick; a 20-minute rated door equipped with a smoke gasket is also acceptable. There shall be no openings from the garage into any of the sleeping areas.  
   (CBC 406.3.2.1)
6. The garage shall not be used as living or sleeping quarters unless this conversion has been approved by the local building department.  
   (CBC 105.1)
7. Changes in elevation inside the home that are between 1/4 inch and 1/2 inch high shall be beveled at a slope not to exceed 1 unit in vertical distance for every 2 units in horizontal distance. Changes in interior elevation between 1/2 inch and 12 inches shall be accomplished by means of a ramp.  
   (CBC 435.8.5)
8. All modifications to the structure, including electrical or mechanical systems, must be reviewed, inspected, and approved by the local building department prior to scheduling a fire clearance Inspection with OCFA.  
   (CBC 105.1)
9. Post evacuation signs in locations where they will be readily visible to clients and care providers. The signs shall, at a minimum, include a floor plan showing the location of exits, how to identify a fire alarm (i.e., the sound and, if visual alarm notification devices are provided, appearance), and state “In case of emergency, dial 9-1-1.”  
   (CCR Title 19)
TEMPORARILY BEDRIDDEN CLIENTS

Clients who become temporarily bedridden may continue to be housed on any story in homes classified as Residential Care Facilities for the Elderly (RCFE). Every RCFE admitting or retaining a bedridden resident shall, within 48 hours of the resident’s admission or retention in the facility, notify the OCFA of the estimated length of time the resident will retain his or her bedridden status in the facility. (CBC 435.3.2, CBC 435.10)
Attachment 1
OCFA Prevention Field Services Contact Information

West/North Orange County
(714) 527-9475

Cities of:
Buena Park
La Palma
Placentia
Stanton
Yorba Linda

…and unincorporated areas of west and north Orange County including the communities of Midway City and Rossmoor

Central Orange County
(714) 573-6184

Cities of:
Irvine
Tustin
Villa Park

…and adjacent unincorporated areas of central Orange County including the communities of Santa Ana Heights, El Modena, Orange Park Acres, North Tustin, Lemon and Cowan Heights, and Modjeska and Silverado Canyons.

South Orange County
(949) 347-2240

Cities of:
Aliso Viejo
Laguna Hills
Lake Forest
San Clemente
Rancho Santa Margarita

…and adjacent unincorporated areas of south Orange County including the communities of Coto de Caza, Emerald Bay, Ladera Ranch, Las Flores, Talega, Rancho Mission Viejo, Ortega Highway, and Trabuco Canyon.

Santa Ana
(714) 567-3240

City of:
Santa Ana

Garden Grove
(714) 638-6353

City of:
Garden Grove

Email plans and other correspondence to 850@ocfa.org
Attachment 2
Exiting Configurations for Client Bedrooms

Condition #1
Exit from Bedroom Directly to Exterior

Condition #2
Exit Through Adjacent Bedroom, then to Exterior
Attachment 2
(continued)

Condition #3
Exit from Bedroom into Hallway, then to Exterior
NOTE: When the hallway is part of the exit path, it must be separated from the rest of the home

Condition #4
Exit from Bedroom into Hallway, then to another Bedroom, then to Exterior
NOTE: When the hallway is part of the exit path, it must be separated from the rest of the home
Attachment 3
Business Owner Pre-inspection Checklist

Use this checklist in conjunction with Guideline F-03 to prepare your home for a fire-clearance inspection by OCFA. As the design and use of individual homes can vary, this checklist is not all-inclusive and other requirements that are not included herein may apply.

GENERAL
☐ Building modifications have been approved by the building department.
☐ Garage is not used for a living space unless approved as one by the building department
☐ Home has minimum 4” high address numbers clearly visible from the street
☐ No bedridden client rooms are located above or below the first floor.
☐ Non-ambulatory clients shall not use spaces above the first floor in homes with 3+ stories or >3,000 unless the building is of 1-hour construction

DETECTORS/ALARMS
☐ Smoke alarms installed in all habitable spaces
☐ Smoke alarms are interconnected to each other
☐ Smoke alarms are hardwired with battery back-up
☐ Smoke alarms are audible throughout the home
☐ Carbon monoxide alarms installed and functional

EXITING
☐ Two exit paths from the home to the street are provided; exit paths are clear of obstructions
☐ Two exit doors from the interior of the home are remotely located from one another
☐ Each exit path serving common areas in the home goes through no more than one intervening space before reaching an exterior exit door
☐ Exit paths do not pass through or storerooms, closets, garages, or similar spaces
☐ Exit paths do not pass through the kitchen, unless the kitchen is completely open to the adjoining room
☐ Keys are not required to open exit doors/gates in the direction of exit travel
☐ If there are more than 10 occupants in the home, single action hardware is installed on all exit doors and gates
☐ All exit doors have minimum 32” clear opening width
☐ The exit path from each client room matches one of the four required configurations
☐ Basements and sleeping rooms have emergency escape/rescue openings
☐ Emergency escape/rescue openings lead to the public way and are accessible to firefighters
☐ Bars/grills over emergency escape/rescue openings are openable from the inside

HALLWAY SEPARATION
☐ If the hallway is part of the exit path from client rooms, it is separated from the rest of the home
☐ The hallway separation door is self- or auto-closing
☐ The hallway separation door is solid-core wood, minimum 1-3/8” thick

FLOOR SEPARATION FOR CLIENTS ON THE 2\textsuperscript{nd}+ FLOOR
☐ Smoke separation has been provided between stories
☐ The smoke separation door is solid wood core, minimum 1-3/8” thick
☐ The smoke separation door is positive latching and has a smoke seal
☐ The smoke separation door is automatic-closing by activation of a smoke detector
☐ Door glazing is limited to 1296 square inches and no more than 54 inches in any dimension.
☐ An exterior exit door is provided on the story with clients; if so, the above requirements do not apply

BEDRIDDEN CLIENT IN UNSPRINKLERED HOME
☐ The bedroom door is self- or auto-closing and has smoke seals
☐ The bedridden client’s room has a direct exit to the exterior; door is operable from the interior and exterior sides
☐ Doors to the room shall be 1-3/8 thick solid wood
☐ Doors from the bedroom to other interior spaces do not have night latches, dead bolts, security chains, or any other similar locking device

FIRE EXTINGUISHERS
☐ 2A:10B:C fire extinguisher has been provided
☐ Extinguisher is new or has been serviced in the last year
☐ Extinguisher is mounted to the wall in a visible and accessible location

GENERAL FIRE SAFETY
☐ No combustibles are stored near water heaters or other sources of ignition
☐ Door between the dwelling space and garage is in good condition
☐ Door between the dwelling space and garage is self-closing and latching
☐ Door between the dwelling space and garage is of proper type
☐ There are no dog-doors, windows, or openings other than an approved door and permitted ducting between the garage and dwelling space