When are ILSM required during hospital construction?

THE DIRECT ANSWER

ILSM is required whenever hospital construction affects life safety features — egress paths, fire and smoke barriers, fire alarm, detection, or suppression systems — or whenever a Life Safety Code deficiency exists that can't be corrected immediately. The trigger isn't the project's size or budget; it's whether the building's normal fire and life safety protections are degraded , even temporarily.

CONSTRUCTION TRIGGERS

- Blocking or rerouting an approved exit or egress path
- Opening, penetrating, or modifying fire or smoke barriers
- Taking a fire alarm, detection, or suppression system (or part of one) out of service
- Work that impairs compartmentation — corridor walls, smoke doors held open, unsealed penetrations
- Major renovation of an occupied floor or unit
- Excavation or exterior work affecting emergency vehicle access
- Hot work in or adjacent to occupied areas

DEFICIENCY TRIGGERS

- When a Life Safety Code deficiency is identified — through EOC rounds, the building assessment, or a survey — and it can't be fixed on the spot, ILSM covers the gap until correction.

FIELD QUESTION

Who decides whether ILSM is required for a project?

The facility's ILSM assessment process — typically the safety officer with facilities and project management — evaluates each project or deficiency case by case and documents the determination.

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Caution: codes, editions, and targets vary by facility and authority having jurisdiction (AHJ). Figures marked as common practice are facility targets, not code requirements. Confirm against your AHJ and the current code text before acting.