



NEW CLASS-C CBRF: MINIMUM CORRIDOR WIDTH REQUIREMENTS

State of Wisconsin / Department of Health Services / Division of Quality Assurance

P-00287 (01/2024)

This position is issued to assist effective plan review outcomes for designers, facilities, and DQA regulators in Wisconsin. Individual situations may be considered, so contact the assigned DQA regulator. DQA reserves the right to revise a position since the applicable codes, standards, and conditions are subject to change. Nothing in this response can be construed as a waiver or variance. This response does not supersede or waive plan review authority.

1. Question

What is the minimum corridor width for a new C-class CBRF of 9 or more beds?

2. Code Quotations

| | |
|-----------------|---|
| DQA Memo 23-003 | Memo 23-003 clarifies the Departments position that a new C-Class CBRF of 9 or more beds, when seeking DHS 83 licensure, shall be classified as a Group I-2 occupancy. This position was first made public July 21, 2004. Details are available at: https://www.dhs.wisconsin.gov/dqa/memos/23-003.pdf . |
| DHS § 83.64(5) | Smoke barriers shall be provided in all new CBRF's of 9 or more beds. This applies to all new structures, existing structures seeking a new license, and remodeling as defined in DHS § 83.63(5). |
| IBC § 407.5 | Group I-2 shall have smoke barriers to divide every story used by residents into a minimum of two smoke compartments. |
| IBC § 407.2 | Means of egress corridors in Group I-2 shall be continuous to exits and serve a public way. |
| IBC § 710.5 | Smoke barriers shall have a pair of opposite-swinging doors. |

3. Response

C-class CBRF's, by definition, admit and provide staff assisted care on a 24-hour basis to residents who are not capable of self preservation and require physical and/or verbal prompting to seek safe refuge during an emergency.

Group I-2 structures, by definition, serve occupants who are not capable of self-preservation and are required to have at minimum two smoke compartments.

Residents are annually assessed in their ability to evacuate per DHS § 83.35 (5). CBRF staff are routinely trained and assessed in their abilities to properly evacuate residents, use smoke compartments, and follow facility procedures per DHS § 83.47.

During an emergency, residents seeking safe refuge, have as a primary means of safety the opportunity to evacuate with staff assistance to the neighboring smoke compartment. Similarly, during an emergency, facility staff located in neighboring smoke compartments may enter the smoke compartment of concern and provide assistance to additional residents. Lastly, emergency responders also enter the smoke compartment of emergent action and address any lasting concerns.

This bi-directional resident, staff, and emergency responder traffic flow is inherent to a Group I-2 occupancy.

Residents departing a smoke compartment commonly require equipment to ambulate and evacuate the zone of emergent incidence. The minimal corridor width needs to accommodate the resident, their anticipated ambulation equipment, and any staff required to assist movement to the neighboring/adjacent smoke compartment. Typical forms of resident ambulation equipment are canes, walkers, wheelchairs, mattresses, gurney, or beds.

Smoke barriers require a **pair** of opposite swing doors and can-not be safely provided within a 48-inch width corridor.

To achieve bi-directional egress without bed movement, a 72-inch width egress corridor or aisle is acceptable per IBC § 1020.

Position: New C-class CBRFs of 9 or more beds, shall have at minimum 72-inch clear width corridors or aisles, when serving required exits. Aisles within intervening spaces, not leading to a required exit, are permitted to have a minimum width per IBC § 1020.

4. DQA Final Action

DQA Approval: David R. Soens **Date:** February 21, 2022