

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15C0001146	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>01</u> B. WING _____	X3) DATE SURVEY COMPLETED 03/29/2016
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NAME OF PROVIDER OR SUPPLIER SURGERY CENTER OF CARMEL THE	STREET ADDRESS, CITY, STATE, ZIP CODE 12188 N MERIDIAN ST BLDG A STE 150 CARMEL, IN 46032
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K 0000 Bldg. 01	<p>A Life Safety Code Recertification Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 416.44(b).</p> <p>Survey Date: 03/29/16</p> <p>Facility Number: 004746 Provider Number: 15C0001146 AIM Number: 200268580B</p> <p>At this Life Safety Code survey, The Surgery Center of Carmel was found not in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 416.44(b), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 20, New Ambulatory Health Care Occupancies</p> <p>The facility located on the first floor of a three story building was determined to be of Type II (000) construction and was fully sprinklered. The facility has a fire alarm system with a smoke detector in the corridors and ductwork.</p> <p>The facility has elected to utilize the Categorical Waiver pertaining to relative</p>	K 0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 0070 Bldg. 01	<p>humidity levels in anesthetizing locatons.</p> <p>Quality Review completed 04/01/16 - DA</p> <p>416.44(b)(1) LIFE SAFETY CODE STANDARD Portable space heating devices are prohibited except portable space heating devices shall be permitted to be used in non-sleeping staff and employee areas where the heating elements of such devices do not exceed 212oF (100oC). 20.7.8, 21.7.8</p> <p>Based on observation, interview and record review, the facility failed to regulate the use of 2 of 2 portable space heaters observed in the facility. This deficient practice could affect all clients as well as visitors and staff.</p> <p>Findings include:</p> <p>Based on observations on 03/29/16 at 1:15 p.m. with the Facility Director, inside the front Reception area and the PACU office there were portable space heaters plugged in and being used to provide additional heat to the room.</p> <p>Based on interview on 03/29/16 concurrent with the observations, it was acknowledged by the Facility Director space heaters were not allowed in the facility and the portable space heater policy was not available for review.</p>	K 0070	<p>1 The standard will be corrected by developing a space heater policy for the business office area, when the temp is difficult to regulate due to the windows and location of the vents. The Center Administrator developed a policy 134 to address the use of space heaters in the business office away from patient care. Guidelines for space heaters will be monitored by the safety RN and Administrator with Monthly safety walks See attached policy for the guidelines 2 Space heater Policy 134 has been developed, approved by the safety committee. Recommendations will be made to the MAC (5-2-16) and they will be presented to the Board for approval on 5/12/16 Safety committee will report monthly on the usage and guidelines. Biomed will examine space heaters before they are used and Biannually 3 Safety RN</p>	05/12/2016			

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K 0130 Bldg. 01	<p>416.44(b)(1) MISCELLANEOUS OTHER LSC DEFICIENCY NOT ON 2786</p> <p>Based on observation and interview, the facility failed to provide a complete supply of spare sprinklers in 1 of 1 riser rooms in accordance with NFPA 25, 1998 Edition, the Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, Section 2-4.1.4 which requires supply of at least six spare sprinklers shall be stored in a cabinet on the premises for replacement purposes. The stock of spare sprinklers shall be proportionally representative of the types and temperature ratings of the system sprinklers. A minimum of two sprinklers of each type and temperature rating installed shall be provided. This deficient practice could affect all clients throughout the facility as well as staff and visitors if the sprinkler system had to be shut down because a proper sprinkler head wasn't available as a replacement.</p> <p>Findings include:</p> <p>Based on observation on 03/29/16 at 2:45 p.m. with the Facility Director, the Riser room at the east end of the building which contained the sprinkler box with extra sprinkler heads was not equipped</p>			K 0130	<p>4 5/12/16</p> <p>1 The Administrator met with Jen Sheeley -HCREIT Property manager om 4/22/16 to inform them that the RISER ROOM is missing extra side mounting sprinklers heads which are used in the gas rooms. Property Manager stated that she would call Koorsen and make sure the side mounting heads will be placed in the sprinkler box. She will notify the administrator when Koorsen will be out 2 4/26/16 Jen Sheeley notified Administrator to inform her that Koorsen will be out Monday, May 2 to add side mounting sprinkler heads to the sprinkler box in the Riser room . Administrator will confirm placement and check qrtly with safety walks. 3 Administrator 4 5/2/16</p>		05/02/2016

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K 0144 Bldg. 01	<p>with sidemount sprinkler heads which were observed being used in the Medical gas room. Based on interview on 03/29/16 at 2:46 p.m. with the Facility Director it was acknowledged the spare sprinkler cabinet located in the Riser room did not have two of each type of sprinkler heads in the sprinkler box.</p> <p>416.44(b)(1) LIFE SAFETY CODE STANDARD Generators are inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>1. Based on observation and interview, the facility failed to provide emergency task lighting in and around 1 of 1 generator sets in accordance with NFPA 101, 2000 Edition, Life Safety Code. LSC Section 7.9.2.3 requires emergency generators providing power to emergency lighting systems shall be installed, tested, and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. NFPA 110 Section 5-3.1 requires the EPS (Emergency Power Supply) equipment location shall be provided with battery powered emergency lighting. This deficient practice could affect all clients as well as staff and visitors.</p> <p>Findings include:</p>	K 0144	<p>K 144(1) 1 Administrator met with HCRIET Building Maintenance to inform them that Emergency task lighting needsto be placed in and around the generators in accordance with LSC NFPA 2000 The lighting will be tested monthly along with the existing emergency lighting . The Lighting will be completed by Friday, May 6. 2. Adminsitator will review lighting and will monitor monthly with safety walks and accordingly with LSC guidelines</p> <p>3 Administrator 4 5-6-16 K144 (2) 1 The Remote stop for the generator is located on the front of the generator behind hinged doors The Administrator called McCallister Engine to see what measures could be taken to move the remote stop on outside of the generator McCallister Engine</p>	05/13/2016

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	<p>Based on observation on 03/29/16 at 2:15 p.m. with the Facility Director, the generator set location outside the Northeast exit lacked battery powered emergency lighting in or around the generator. Based on interview 03/29/16 at 2:19 p.m., it was acknowledged by the Facility Director there was no battery powered emergency light available for the generator.</p> <p>2. Based on observation and interview; the facility failed to ensure 1 of 1 emergency generators was equipped with a working remote manual stop. LSC 7.9.2.3 requires emergency generators providing power to emergency lighting systems shall be installed, tested and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. NFPA 110, 1999 edition, 3-5.5.6 requires Level II installations shall have a remote manual stop station of a type similar to a break-glass station located elsewhere on the premises where the prime mover is located outside the building. NFPA 37, Standard for the Installation and Use of Stationary Combustion Engines and Gas Turbines, 1998 Edition, at 8-2.2(c) requires engines of 100 horsepower or more have provision for the shutting down the engine at the engine and from a</p>		<p>(Randy Blanchard) came out to inspect the generator and stated that he would have to have a Repair leader out to quote for the change The Remote stop will be placed on the outside with some kind of plastic glass cover to accommodate the LSC 3-5 5.6 2 A. Randy Blanchard was out 4/23/16 to inspect the generator and states there is a remote shut off behind the hinged doors B MacCallisters Engine will be out on 5-6-16 to quote the Center to move the Remote stop on outside from hinged doors C. Randy will schedule the repair by 5-12-16 once quote has been approved by safety committee and Governing Board.</p> <p>3. Administrator 4. 5-13-16</p>	

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	<p>remote location. This deficient practice could affect all occupants.</p> <p>Findings include:</p> <p>Based on observation of generator equipment on 03/29/16 at 2:25 p.m. with the Facility Director, a remote shut off device was not availalbe for the generator. The generator was installed after 2003 and over 100 horsepower and was required to have a working means to shut the generator off. Based on interview on 03/29/16 at 2:28 p.m. it was acknowledged by the Facility Director the facility was unaware the remote shut off for the generator needed to be installed.</p>				