

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15C0001019	X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	X3) DATE SURVEY COMPLETED 09/09/2020
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NAME OF PROVIDER OR SUPPLIER INDIANA HAND TO SHOULDER BELTWAY SURGERY CENTER	STREET ADDRESS, CITY, STATE, ZIP COD 8501 HARCOURT RD INDIANAPOLIS, IN 46260
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K 0000 Bldg. 01	<p>A Post Survey Revisit (PSR) to the Life Safety Code Recertification survey conducted on 02/13/20 was conducted by the Indiana State Department of Health in accordance with Department of Health in accordance with 42 CFR 416.44(b).</p> <p>Survey Date: 09/09/20</p> <p>Facility Number: 005400 Provider Number: 15C0001019 AIM Number: 200007580A</p> <p>At this PSR survey, Indiana Hand to Shoulder Beltway Surgery Center was found not in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 416.44(b), Life Safety from Fire and the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 21, Existing Ambulatory Health Care Occupancies.</p> <p>This facility, located on the first floor of a two story building with a partial basement, was determined to be of Type II (111) construction and was fully sprinklered. The facility has a fire alarm system with smoke detection in the corridors.</p> <p>Quality Review completed 09/09/20</p>	K 0000	<p>The Facility Manager of the Indiana Hand to Shoulder Surgery Center is responsible for ensuring that the surgery center is compliant with the Requirements for participation in Medicare/Medicaid, 42 CFR Subpart 416.4(b), Life Safety from Fire and the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 21, Existing Ambulatory Health Care Occupancies. On Friday September 11, 2012, the Facility Manager patched the 4x4 hole where the one electrical conduit was noted. Upon hearing that the repairs, involving the Great Stuff Fireblock were unsatisfactory, Midwest Firestop, Inc. was brought in to assess the areas of concern. (Please see the attached letter on their scope of work). Please see their plan below:</p> <p>Midwest Firestop, Inc. will correct and bring into compliance (to the extent field conditions allow) accessible firestop & fireproofing deficiencies discovered in the most recent facility inspection, additional life safety issues mutually agreed upon by all parties, and/or new firestop</p>	
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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 other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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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			<p>installations as directed by facility. The area needing compliance is highlighted on the attached file. The work will include repairing Top of Wall Joint (both sides), as well as all Penetrations (both sides). This will include the installation and documentation of approved UL firestop systems and/or Engineering Judgments in accordance with ASTM-E standards.</p> <p>2. Midwest Firestop, Inc. will inform IU Health Beltway Hand to Shoulder Surgery Center (BSC) personnel of any major deficiencies in building application that can be corrected, but would require coordination with other trades or facility personnel, included but not limited to the following:</p> <ul style="list-style-type: none"> a. Wall or Shaft Wall construction deficiencies b. Major Fireproofing deficiencies c. Major Cabling deficiencies (cables wrapped around sprinkler pipe, etc.) d. Open junction boxes requiring possible Electrician e. Stenciling of Rated Wall Assemblies <p>These deficiencies are not included in any budget pricing.</p> <p>3. Midwest Firestop, Inc. will create a Barrier Management Program (BMP) binder at the completion of project. BMP binder</p>	

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K 0131 Bldg. 01	<p>NFPA 101 Multiple Occupancies Multiple Occupancies - Sections of Ambulatory Health Care Facilities Multiple occupancies shall be in accordance with 6.1.14. Sections of ambulatory health care facilities shall be permitted to be classified as other occupancies, provided they meet both of the following: * The occupancy is not intended to serve ambulatory health care occupants for treatment or customary access. * They are separated from the ambulatory health care occupancy by a 1 hour fire resistance rating. Ambulatory health care facilities shall be separated from other tenants and occupancies and shall meet all of the</p>		<p>will include updated Life Safety drawings, Corrected Deficiency Report (CDR), UL Systems, Engineering Judgments (EJ's), Midwest Firestop, Inc. Installer Certifications, Product Data Information, Material Safety Data Sheets (MSDS), etc. The project will be started on Monday September 28th with the intention of completing the work according to NFPA regulations. In the future, any new construction will be inspected by the Facility Manager to ensure that all entry and exit points of conduits, cables, etc. are properly closed and sealed per the NFPA standards.</p>	

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	<p>following:</p> <ul style="list-style-type: none"> * Walls have not less than 1 hour fire resistance rating and extend from floor slab to roof slab. * Doors are constructed of not less than 1-3/4 inches thick, solid-bonded wood core or equivalent and is equipped with positive latches. * Doors are self-closing and are kept in the closed position, except when in use. * Windows in the barriers are of fixed fire window assemblies per 8.3. <p>Per regulation, ASCs are classified as Ambulatory Health Care Occupancies, regardless of the number of patients served. 20.1.3.2, 21.1.3.3, 20.3.7.1, 21.3.7.1, 42 CFR 416.44</p> <p>Based on observation and interview, the facility failed to ensure 1 of 1 fire barriers that separate other occupancies were protected to maintain the fire resistance rating of the fire barrier. NFPA 101, 2012 edition, Section 8.3.5.6.1 states membrane penetrations for cables cable trays conduits, pipes, tubes, combustion vents and exhaust vents, wires, and similar items to accommodate electrical, mechanical, plumbing, and communications systems that pass through a membrane of a wall, floor, or floor/ceiling assembly constructed as a fire barrier shall be protected by a firestop system or device. Section 8.3.5.6.2 states the firestop system or device shall be tested in accordance with ASTM E 814, Standard Test Method for Fire Test of Through Penetration Fire stops, or ANSI/UL 1479, Standard for Fire Tests of Through-Penetration Firestops. In addition, doors are self-closing and are kept in the closed position, except when in use. This deficient practice could affect all patients, staff and visitors.</p>	K 0131	The Facility Manager of the Indiana Hand to Shoulder Surgery Center is responsible for ensuring that the surgery center is compliant with the Requirements for participation in Medicare/Medicaid, 42 CFR Subpart 416.4(b), Life Safety from Fire and the 2012 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 21, Existing Ambulatory Health Care Occupancies. On Friday September 11, 2012, the Facility Manager patched the 4x4 hole where the one electrical conduit was noted. Upon hearing that the repairs, involving the Great Stuff Fireblock were unsatisfactory, Midwest Firestop, Inc. was brought in to assess the areas of	09/29/2020

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	<p>Findings include:</p> <p>Based on observations with the ASC Clinical Director of Operations at 10:30 a.m. on 09/09/20, a four inch by four inch hole for the passage of one electrical conduit was noted above the suspended ceiling above the exit door in the tenant separation wall by the Registration area. In addition, the annular space surrounding a horizontal sprinkler pipe which passed through the tenant separation wall above the suspended ceiling by the entrance door to the Information Technology Office was not firestopped. Two data cables passed through the annular space. Based on interview at the time of the observations, the ASC Clinical Director of Operations stated the exit door and wall by the Registration area were newly constructed to provide a tenant separation wall. The walls above the suspended ceiling by the Registration area were also extended to the underside of the deck above and agreed the aforementioned holes in the newly constructed walls were not firestopped.</p>		<p>concern. (Please see the attached letter on their scope of work). Please see their plan below:</p> <p>Midwest Firestop, Inc. will correct and bring into compliance (to the extent field conditions allow) accessible firestop & fireproofing deficiencies discovered in the most recent facility inspection, additional life safety issues mutually agreed upon by all parties, and/or new firestop installations as directed by facility. The area needing compliance is highlighted on the attached file. The work will include repairing Top of Wall Joint (both sides), as well as all Penetrations (both sides). This will include the installation and documentation of approved UL firestop systems and/or Engineering Judgments in accordance with ASTM-E standards.</p> <p>2. Midwest Firestop, Inc. will inform IU Health Beltway Hand to Shoulder Surgery Center (BSC) personnel of any major deficiencies in building application that can be corrected, but would require coordination with other trades or facility personnel, included but not limited to the following:</p> <p>a. Wall or Shaft Wall construction deficiencies b. Major Fireproofing deficiencies c. Major Cabling deficiencies</p>		

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			<p>(cables wrapped around sprinkler pipe, etc.)</p> <p>d. Open junction boxes requiring possible Electrician</p> <p>e. Stenciling of Rated Wall Assemblies</p> <p>These deficiencies are not included in any budget pricing.</p> <p>3. Midwest Firestop, Inc. will create a Barrier Management Program (BMP) binder at the completion of project. BMP binder will include updated Life Safety drawings, Corrected Deficiency Report (CDR), UL Systems, Engineering Judgments (EJ's), Midwest Firestop, Inc. Installer Certifications, Product Data Information, Material Safety Data Sheets (MSDS), etc.</p> <p>The project will be started on Monday September 28th with the intention of completing the work according to NFPA regulations. In the future, any new construction will be inspected by the Facility Manager to ensure that all entry and exit points of conduits, cables, etc. are properly closed and sealed per the NFPA standards.</p>	