

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/21/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 140103	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 - NORTH BUILDING B. WING _____	(X3) DATE SURVEY COMPLETED R 04/17/2014
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NAME OF PROVIDER OR SUPPLIER ST BERNARD HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 326 W 64TH ST CHICAGO, IL 60621
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{K 000}	<p>INITIAL COMMENTS</p> <p>On April 17, 2014 a Federal Monitoring Survey was conducted at St. Bernard Hospital, Chicago, IL by Surveyor 12798 as a continuation of the monitoring survey started on 3/12/14.</p> <p>On March 12-13, 2014 a Federal Monitoring Survey was conducted at St. Bernard Hospital, Chicago, IL. The surveyors notes that: Due to time constraints, this Building was not surveyed at this time.</p> <p>This survey packet is for the North Building.</p> <p>On May 21 - 23 2013, the Life Safety portion of a Medicare Validation Survey due to Complaint was conducted at St. Bernard Hospital and Health Care Center located at 326 West 64th Street, Chicago, Illinois.</p> <p>The surveyors were accompanied during the survey walk-through by provider representatives, including but not limited to:</p> <ul style="list-style-type: none"> Senior Director of Facilities Management Director of Facilities Management Assistant Director of Facilities Vice President of Ancillary Services Maintenance Office Manager Engineering and Maintenance Personnel <p>The following buildings were included in the survey</p> <p>North Building - (Building 02), which includes the Service Building(s) also referred to as the Boiler Building and</p>	{K 000}	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p>MAY - 5 2014</p> </div>	
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Charles Holland</i>	TITLE <i>Pres/CEO</i>	(X6) DATE <i>5-2-2014</i>
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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 000}	<p>Continued From page 1</p> <p>the Old Laundry Building -</p> <p>East Building - (Building 03)</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05), also referred to as the South Building</p> <p>Note: Building 01 was not used for this survey</p> <p>The following building was surveyed as an existing mixed use Business Occupancy, with Storage and Industrial Occupancies, under Chapter 39, 40 and 42 od NFPA 101 - 2000, where applicable:</p> <p>North Building - (Building 02)</p> <p>The following buildings were surveyed as existing Health Care Occupancies under Chapter 19 or NFPA 101 - 2000, or as an existing mixed use Health Care Buildings with Business Occupancies, under Chapter 19 and 39, of NFPA 101 - 2000, where applicable:</p> <p>East Building - (Building 03)</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05)</p> <p>The following Building information was identified by the provider:</p> <p>The North Building is a five story building with no penthouse and a full Basement</p>	{K 000}		

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{K 000}	<p>Continued From page 2</p> <p>Level. It is reported as fully sprinklered. It includes all of Dietary, along with service buildings to the northeast (which includes the Boiler Plant and the "Old Laundry Building"). The North Building is reported as Type I or Type II (222) construction, as defined by NFPA 220, however, portions of the service buildings to the northeast were observed to be Type II (000) construction and the provider's plans do not identify any two hour fire separations between these buildings. There are no health care uses in this building. Inpatients are moved through the south end of the North Building between the Center Building and the West Building.</p> <p>The East Building is a three story building with a Basement Level. It is reported as fully sprinklered. It includes: the Emergency Department on the 1st Floor, Outpatient Clinical spaces on the 2nd and 3rd Floor and Mechanical spaces in the Basement. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>The Center Building is also identified on some Plans as the South Building. It is five stories in height with a Basement. It is partially sprinklered (the 1st Floor may be fully sprinklered). The 5th Floor consists of a small corridor to an exit stair and two elevator lobbies, only. The 5th Floor has access to the North Building only, through a four hour vestibule. The Center Building connects all of the buildings together and includes the Main Entrance. It is all health</p>	{K 000}		

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{K 000}	Continued From page 3 care except for the Basement Level. The Surgery Department is on the 3rd Floor and Imaging Department is on the 2nd Floor. The Basement is used for storage & mechanical systems. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012). The West Building is a three story building with a Basement Level. Floors 1 - 3 are inpatient programs with patient rooms on all three levels. The Basement is used for storage and mechanical systems. The building is partially sprinklered with no floor fully sprinklered and no one smoke compartment that is fully sprinklered. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012). Unless otherwise noted, those code sections listed herein that do not include a reference to a specific NFPA code and year of issue (such as NFPA 70 1999) are taken from the 2000 Edition of the NFPA 101 Life Safety Code. Unless otherwise indicated all deficiencies were found by direct observation, staff interview and document review. The requirements of 42 CFR Subpart 483.41 are NOT MET as evidenced by the deficiencies cited under the following K-Tags.	{K 000}		
{K 145}	NFPA 101 LIFE SAFETY CODE STANDARD The Type I EES is divided into the critical branch,	{K 145}		

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{K 145}	<p>Continued From page 4 life safety branch and the emergency system in accordance with NFPA 99. 3.4.2.2.2.</p> <p>This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through while accompanied by the senior director of facilities management, the surveyor found that the building emergency electrical system is not properly divided into Life Safety, Critical and Equipment branches in accordance with NFPA-99, and NFPA-70, Section 517. These deficiencies could affect all building occupants because emergency egress and the provision of services could be compromised by the loss of a single transfer switch.</p> <p>Findings include:</p> <p>1. Generator 147, in room N-179, serves transfer switch TS-2 which is serving a distribution panel that serves a fire alarm auxiliary panel that is a life safety load, and isolation panels that are critical loads. Transfer switch TS-4 serves a combination of equipment and critical loads. Each branch of the emergency electrical system served by this generator shall be served from its' own transfer switch to meet the requirements of NFPA-70, Section 517-30. The loads served by each transfer switch shall be in accordance with NFPA-70, Section 517-32 (life safety), 517-33 (critical), and 517-34 (equipment).</p> <p>Note: 4/17/14 equipment is installed pending final city acceptance and certification package of completion for IDPH project 10025.</p>	{K 145}	<p>A mechanical/electrical consultant will be contracted to evaluate the existing generator condition and to develop an implementation plan to properly divide the electrical system into Life Safety Critical and Equipment branches in accordance with NFPA-99 and NFPA 70, . Section 517.</p> <p>Upon completion of the evaluation, the required new equipment (i.e. Automatic Transfer Switch, new distribution panels, etc..)will be purchased and installed to assure that each branch served by the generator shall be served by its own trans switch in accordance with NFPA-99 and NFPA 70, Section 517. The plans/project will be submitted to IDPH for approval. Project Submission date to IDPH 8/31/13 Upon receiving written approval from IDPH, the project completion date</p> <p>Exhibit A This application covers three buildings, the separation of power and the addition of (8) AT's come from two sources and needs to be completed in phases. We are 75% complete with this project and will need an additional 60 days from 2/28/2014 to be complaint. We are asking to extend this completion date to</p>	<p>8/15/13</p> <p>5/30/14</p> <p>5/30/2014</p>	

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{K 160} {K 160}	Continued From page 5 NFPA 101 LIFE SAFETY CODE STANDARD All existing elevators, having a travel distance of 25 ft. or more above or below the level that best serves the needs of emergency personnel for fire fighting purposes, conform with Firefighter's Service Requirements of ASME/ANSI A17.3, Safety Code for Existing Elevators and Escalators. 19.5.3, 9.4.3.2 This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through with the Senior Director of Facilities Management and/or the Director of Facilities Management, on May 21 and May 22, 2013, and based on staff interview of the same personnel and based on random document review of monthly testing, the surveyor finds that all elevators within the facility do not conform with firefighters' recall requirements of ANSI/ASME A17.1/A17.3. Failure to test and maintain elevator functions in accordance with ANSI/ASME A17.1/A17.3 could result in failure in a fire emergency. Failure to install and maintain emergency elevator functions in accordance with ANSI/ASME A17.1/A17.3 will result in loss of use by the Fire Department during a fire emergency. Findings include: North Building - Elevator # 6 serves five floors A. The provider had no documentation that identifies monthly and annual testing and maintenance of Elevator # 6, including Phase I	{K 160} {K 160}	A. It was identified that Elevator #6 lacks/ is non compliant with Phase I and Phase II fire fighter recall. An elevator consultant will be hired to review the existing elevator condition and develop a plan to bring the elevator in compliance with Fire Fighters service requirements of ASME/ANSI A17.3, Safety Code for existing elevators 19.5.3, 9.4.3.2. Completion Date: 7/31/13 for completion of the evaluation Upon completion of the elevator evaluation, the plans/project will be submitted to IDPH for approval. Project Submission date to IDPH 8/31/13 Upon receiving written project approval from IDPH, the project completion date will be June 30, 2014. Please note this extended compliance date is due to an already existing IDPH elevator project (IDPH Project # 9797) which involves the replacement/ upgrade of six (6) existing hospital elevators. Project 9797 is scheduled as a 7-8 month project expected to be completed in February 2014. The organization will be unable to begin work on Elevator #6 until project #9797 is completed.	6/30/14

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{K 160}	Continued From page 7 A17.1-102.2.c.3.	{K 160}	A heat detector and shunt trip device to automatically disconnect the main power supply will be installed in accordance with ASME A17.1-102.2.c.3 The item will be submitted as part of the IDPH project that will be submitted for approval. (See A response above)	6/30/14

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{K 000}	<p>INITIAL COMMENTS</p> <p>On April 17, 2014 a Federal Monitoring Survey was conducted at St. Bernard Hospital, Chicago, IL by Surveyor 12798 as a continuation of the monitoring survey started on 3/12/14.</p> <p>A Federal Monitoring Survey was conducted on March 12-13, 2014, at the above mentioned facility. A revised PoC was requested.</p> <p>This survey packet is for the East Building.</p> <p>On May 21 - 23, 2013, the Life Safety portion of a Medicare Validation Survey due to Complaint was conducted at St. Bernard Hospital and Health Care Center located at 326 West 64th Street, Chicago, Illinois.</p> <p>The surveyors were accompanied during the survey walk-through by provider representatives, including but not limited to:</p> <ul style="list-style-type: none"> Senior Director of Facilities Management Director of Facilities Management Assistant Director of Facilities Vice President of Ancillary Services Maintenance Office Manager Engineering and Maintenance Personnel <p>The following buildings were included in the survey</p> <ul style="list-style-type: none"> North Building - (Building 02), which includes the Service Building(s) also referred to as the Boiler Building and the Old Laundry Building - East Building - (Building 03) 	{K 000}		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X8) DATE

Charles Holland *Pres/CEO* *5-2-2014*

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{K 012}	The requirements of 42 CFR Subpart 483.41 are NOT MET as evidenced by the deficiencies cited under the following K-Tags. NFPA 101 LIFE SAFETY CODE STANDARD Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1	{K 012}			

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{K 012}	Continued From page 4	{K 012}	An Architectural firm will be contracted to review, document and define the types of building construction based on the combustibility and the fire resistance rating of a building's structural elements. Fire walls, nonbearing exterior walls, nonbearing interior partitions, fire barrier walls, shaft enclosures, and openings in walls, partitions, floors, and roofs are not related to the types of building construction and are regulated by other standards and codes, where appropriate in accordance with NFPA 220. The Architectural review will be performed in ALL buildings. Person responsible: Director of Facilities Management	5/30/14	
{K 160}	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>All existing elevators, having a travel distance of 25 ft. or more above or below the level that best serves the needs of emergency personnel for fire fighting purposes, conform with Firefighter's Service Requirements of ASME/ANSI A17.3, Safety Code for Existing Elevators and Escalators. 19.5.3, 9.4.3.2</p> <p>This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through with the Senior Director of Facilities Management and/or the Director of Facilities Management, on May 21 and May 22, 2013, and based on staff interview of the same personnel and based on random document review of monthly testing, the surveyor finds that all</p>	{K 160}			

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NAME OF PROVIDER OR SUPPLIER ST BERNARD HOSPITAL			STREET ADDRESS, CITY, STATE, ZIP CODE 326 W 64TH ST CHICAGO, IL 60621	
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{K 160}	<p>Continued From page 5</p> <p>elevators within the facility do not conform with firefighters' recall requirements of ANSI/ASME A17.1/A17.3.</p> <p>Failure to test and maintain elevator functions in accordance with ANSI/ASME A17.1/A17.3 could result in failure in a fire emergency. Failure to install and maintain emergency elevator functions in accordance with ANSI/ASME A17.1/A17.3 will result in loss of use by the Fire Department during a fire emergency.</p> <p>Findings include:</p> <p>East Building - Elevator # 7 serves four floors</p> <p>A. Corrected 4/17/14 B. Corrected 4/17/14 C. Corrected 4/17/14</p> <p>Based on random observation during the survey walk-through while accompanied by the Senior Director of Facilities Management, the surveyor found that portions of the elevator control system are not installed in accordance with ASME A17.1. Any elevator user could be put in a dangerous situation without the proper safety devices installed.</p> <p>Findings include:</p> <p>1. Corrected 4/17/14</p> <p>2. The disconnect for the emergency lighting and controls for each elevator was not fed from the life safety panel in accordance with NFPA-70, Section 517-32(f).</p> <p>3. Corrected 4/17/14</p>	{K 160}	<p>C2: The disconnect for the emergency lighting controls for each elevator shall be fed from the life safety panel in accordance with NFPA-70 Section 517-32(f). The item will be submitted as part of the IDPH project that will be submitted for approval.</p>	6/30/14

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{K 000}	<p>INITIAL COMMENTS</p> <p>On April 17, 2014 a Federal Monitoring Survey was conducted at St. Bernard Hospital, Chicago, IL by Surveyor 12798 as a continuation of the monitoring survey started on 3/12/14.</p> <p>A Federal Monitoring Survey was conducted on March 12-13, 2014, at the above facility. A revised PoC was requested.</p> <p>This survey packet is for the West Building.</p> <p>On May 21 - 23, 2013, the Life Safety portion of a Medicare Validation Survey due to Complaint was conducted at St. Bernard Hospital and Health Care Center located at 326 West 64th Street, Chicago, Illinois.</p> <p>The surveyors were accompanied during the survey walk-through by provider representatives, including but not limited to:</p> <ul style="list-style-type: none"> Senior Director of Facilities Management Director of Facilities Management Assistant Director of Facilities Vice President of Ancillary Services Maintenance Office Manager Engineering and Maintenance Personnel <p>The following buildings were included in the survey</p> <ul style="list-style-type: none"> North Building - (Building 02), which includes the Service Building(s) also referred to as the Boiler Building and the Old Laundry Building - East Building - (Building 03) 	{K 000}		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Charles Ireland* TITLE *5-2-2014* (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 000}	<p>Continued From page 1</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05), also referred to as the South Building</p> <p>Note: Building 01 was not used for this survey</p> <p>The following building was surveyed as an existing mixed use Business Occupancy, with Storage and Industrial Occupancies, under Chapter 39, 40 and 42 od NFPA 101 - 2000, where applicable:</p> <p>North Building - (Building 02)</p> <p>The following buildings were surveyed as existing Health Care Occupancies under Chapter 19 or NFPA 101 - 2000, or as an existing mixed use Health Care Buildings with Business Occupancies, under Chapter 19 and 39, of NFPA 101 - 2000, where applicable:</p> <p>East Building - (Building 03)</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05)</p> <p>The following Building information was identified by the provider:</p> <p>The North Building is a five story building with no penthouse and a full Basement Level. It is reported as fully sprinklered. It includes all of Dietary, along with service buildings to the northeast (which includes</p>	{K 000}		

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{K 000}	<p>Continued From page 2</p> <p>the Boiler Plant and the "Old Laundry Building"). The North Building is reported as Type I or Type II (222) construction, as defined by NFPA 220, however, portions of the service buildings to the northeast were observed to be Type II (000) construction and the provider's plans do not identify any two hour fire separations between these buildings. There are no health care uses in this building. Inpatients are moved through the south end of the North Building between the Center Building and the West Building.</p> <p>The East Building is a three story building with a Basement Level. It is reported as fully sprinklered. It includes: the Emergency Department on the 1st Floor, Outpatient Clinical spaces on the 2nd and 3rd Floor and Mechanical spaces in the Basement. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>The Center Building is also identified on some Plans as the South Building. It is five stories in height with a Basement. It is partially sprinklered (the 1st Floor may be fully sprinklered). The 5th Floor consists of a small corridor to an exit stair and two elevator lobbies, only. The 5th Floor has access to the North Building only, through a four hour vestibule. The Center Building connects all of the buildings together and includes the Main Entrance. It is all health care except for the Basement Level. The Surgery Department is on the 3rd Floor and Imaging Department is on the 2nd Floor. The</p>	{K 000}		

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{K 000}	<p>Continued From page 3</p> <p>Basement is used for storage & mechanical systems. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>The West Building is a three story building with a Basement Level. Floors 1 - 3 are inpatient programs with patient rooms on all three levels. The Basement is used for storage and mechanical systems. The building is partially sprinklered with no floor fully sprinklered and no one smoke compartment that is fully sprinklered. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>Unless otherwise noted, those code sections listed herein that do not include a reference to a specific NFPA code and year of issue (such as NFPA 70 1999) are taken from the 2000 Edition of the NFPA 101 Life Safety Code.</p> <p>Unless otherwise indicated all deficiencies were found by direct observation, staff interview and document review.</p> <p>The requirements of 42 CFR Subpart 483.41 are NOT MET as evidenced by the deficiencies cited under the following K-Tags.</p>	{K 000}		
{K 012}	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1</p>	{K 012}		

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{K 012}	Continued From page 4	{K 012}	An Architectural firm will be contracted to review, document and define the types of building construction based on the combustibility and the fire resistance rating of a building's structural elements. Fire walls, nonbearing exterior walls, nonbearing interior partitions, fire barrier walls, shaft enclosures, and openings in walls, partitions, floors, and roofs are not related to the types of building construction and are regulated by other standards and codes, where appropriate in accordance with NFPA 220. The Architectural review will be performed in ALL buildings. Person responsible: Director of Facilities Management	5/30/14	
{K 145}	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>The Type I EES is divided into the critical branch, life safety branch and the emergency system in accordance with NFPA 99. 3.4.2.2.2.</p> <p>This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through while accompanied by the senior director of facilities management, the surveyor found that the building emergency electrical system is not properly divided into Life Safety, Critical and Equipment branches in accordance with NFPA-99, and NFPA-70, Section 517. These deficiencies could affect all building occupants because emergency egress and the provision of services could be compromised by the loss of a single transfer switch.</p>	{K 145}	<p>A mechanical/electrical consultant will be contracted to evaluate the existing generator condition and to develop an implementation plan to properly divide the electrical system into Life Safety Critical and Equipment branches in accordance with NFPA-99 and NFPA 70, Section 517.</p> <p>Upon completion of the evaluation, the required new equipment (i.e. Automatic Transfer Switch, new distribution panels, etc..)will be purchased and installed to assure that each branch served by the generator shall be served by its own transfer switch in accordance with NFPA-99 and NFPA 70, Section 517. The plans/project will be submitted to IDPH for approval. Project Submission date to IDPH 8/31/13 Upon receiving written approval from IDPH, the project completion date</p>	8/15/13	

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{K 145}	Continued From page 5 Findings include: 1. Distribution panel EMDP, (the life safety distribution panel), is serving isolation panels IP1, IP2, and IP3 which are required by NFPA-70, Section 517-33, to be served by the critical branch of the emergency power system. Each branch of the emergency electrical system served by this generator shall be served from its' own transfer switch to meet the requirements of NFPA-70, Section 517-30.	{K 145}	Exhibit D In conjunction with K-147 & K-145 POC for the West(02) Building, St. Bernard Hospital is voluntarily upgrading its Fire Alarm System and adding sprinklers to the entire West Building. Due to the size and logistics of this coordinated project we are asking for an extension to 8 months or 02/15/2015 to be compliant with K-147 and the subsequent upgrade of our FP and Alarm system. Plans / Projects will be submitted to IDPH No: 9420 for full review and . comments before the start of construction.	2/15/15	
{K 147}	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2 This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through while accompanied by the senior director of facilities management, the surveyor found that not all portions of the building systems are installed in accordance with NFPA 70 (1999). Findings include: 1. Normal power receptacles were not provided in the c-section rooms, and the nursery as required by NFPA-70, Section 517-19, and NFPA-99, Section 3-3.2.1.2(a)1. In the event of a transfer switch failure upon return to normal power these rooms could be left with no power. 2. Receptacles in the c-section room and nursery area need to be labeled with the circuit number	{K 147}			

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{K 147}	Continued From page 6 and panelboard supplying them in accordance with NFPA-70, Section 517-19. 3. Critical receptacles are not provided in general care rooms in accordance with NFPA-70, Section 517-18. 4. Corrected 4/17/14 5. Corrected 4/17/14	{K 147}	Exhibit E In conjunction with K-147 & K-145 POC for the West(02) Building, St. Bernard Hospital is voluntarily upgrading its Fire Alarm System and adding sprinklers to the entire West Building. Due to the size and logistics of this coordinated project we are asking for an extension to 8 months or 02/15/2015 to be compliant with K-147 and the subsequent upgrade of our FP and Alarm system. Plans / Projects will be submitted to IDPH No: 9420 for full review and . comments before the start of construction.	2/15/15	

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{K 000}	<p>INITIAL COMMENTS</p> <p>On April 17, 2014 a Federal Monitoring Survey was conducted at St. Bernard Hospital, Chicago, IL by Surveyor 12798 as a continuation of the monitoring survey started on 3/12/14.</p> <p>A Federal Monitoring Survey was conducted on March 12-13, 2014, at the above facility. A revised PoC was requested.</p> <p>This survey packet is for the Center Building, also identified as the South Building.</p> <p>On May 21 - 23, 2013, the Life Safety portion of a Medicare Validation Survey due to Complaint was conducted at St. Bernard Hospital and Health Care Center located at 326 West 64th Street, Chicago, Illinois.</p> <p>The surveyors were accompanied during the survey walk-through by provider representatives, including but not limited to:</p> <ul style="list-style-type: none"> Senior Director of Facilities Management Director of Facilities Management Assistant Director of Facilities Vice President of Ancillary Services Maintenance Office Manager Engineering and Maintenance Personnel <p>The following buildings were included in the survey</p> <ul style="list-style-type: none"> North Building - (Building 02), which includes the Service Building(s) also referred to as the Boiler Building and the Old Laundry Building - 	{K 000}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Charles Holland *Pres/CEO* *5-2-2014*

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{K 000}	<p>Continued From page 1</p> <p>East Building - (Building 03)</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05), also referred to as the South Building</p> <p>Note: Building 01 was not used for this survey</p> <p>The following building was surveyed as an existing mixed use Business Occupancy, with Storage and Industrial Occupancies, under Chapter 39, 40 and 42 of NFPA 101 - 2000, where applicable:</p> <p>North Building - (Building 02)</p> <p>The following buildings were surveyed as existing Health Care Occupancies under Chapter 19 or NFPA 101 - 2000, or as an existing mixed use Health Care Buildings with Business Occupancies, under Chapter 19 and 39, of NFPA 101 - 2000, where applicable:</p> <p>East Building - (Building 03)</p> <p>West Building- (Building 04)</p> <p>Center Building - (Building 05)</p> <p>The following Building information was identified by the provider:</p> <p>The North Building is a five story building with no penthouse and a full Basement Level. It is reported as fully sprinklered. It includes all of Dietary, along with service</p>	{K 000}		

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{K 000}	<p>Continued From page 2</p> <p>buildings to the northeast (which includes the Boiler Plant and the "Old Laundry Building"). The North Building is reported as Type I or Type II (222) construction, as defined by NFPA 220, however, portions of the service buildings to the northeast were observed to be Type II (000) construction and the provider's plans do not identify any two hour fire separations between these buildings. There are no health care uses in this building. Inpatients are moved through the south end of the North Building between the Center Building and the West Building.</p> <p>The East Building is a three story building with a Basement Level. It is reported as fully sprinklered. It includes: the Emergency Department on the 1st Floor, Outpatient Clinical spaces on the 2nd and 3rd Floor and Mechanical spaces in the Basement. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>The Center Building is also identified on some Plans as the South Building. It is five stories in height with a Basement. It is partially sprinklered (the 1st Floor may be fully sprinklered). The 5th Floor consists of a small corridor to an exit stair and two elevator lobbies, only. The 5th Floor has access to the North Building only, through a four hour vestibule. The Center Building connects all of the buildings together and includes the Main Entrance. It is all health care except for the Basement Level. The Surgery Department is on the 3rd Floor and</p>	{K 000}		

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{K 000}	<p>Continued From page 3</p> <p>Imaging Department is on the 2nd Floor. The Basement is used for storage & mechanical systems. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>The West Building is a three story building with a Basement Level. Floors 1 - 3 are inpatient programs with patient rooms on all three levels. The Basement is used for storage and mechanical systems. The building is partially sprinklered with no floor fully sprinklered and no one smoke compartment that is fully sprinklered. The building structure appears to be reinforced concrete. The provider has no information identifying the construction type of this building (see K012).</p> <p>Unless otherwise noted, those code sections listed herein that do not include a reference to a specific NFPA code and year of issue (such as NFPA 70 1999) are taken from the 2000 Edition of the NFPA 101 Life Safety Code.</p> <p>Unless otherwise indicated all deficiencies were found by direct observation, staff interview and document review.</p> <p>The requirements of 42 CFR Subpart 483.41 are NOT MET as evidenced by the deficiencies cited under the following K-Tags.</p>	{K 000}		
{K 012}	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1</p>	{K 012}		

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{K 012}	Continued From page 4 This STANDARD is not met as evidenced by: A. Based upon random observation, document review (and the lack of documentation) and based upon interview of the Director of Facilities on May 21, 2013 and May 22, 2013, the surveyor finds that the East Building, the Center Building and the West Building are constructed with reinforced concrete structural systems. However, the provider lacks historical data, U L Design Numbers, and or other information which identifies the Construction Type of each Building as defined by NFPA 220. The provider is not able to demonstrate that each of the three buildings is at least Type II (222) construction, if not Type I (332) construction in accordance with 19.1.6.2.	{K 012}	A. An Architectural firm will be contracted to review, document and define the types of building construction based on the combustibility and the fire resistance rating of a building's structural elements. Fire walls, nonbearing exterior walls, nonbearing interior partitions, fire barrier walls, shaft enclosures, and openings in walls, partitions, floors, and roofs are not related to the types of building construction and are regulated by other standards and codes, where appropriate in accordance with NFPA 220. The Architectural review will be performed in ALL buildings. Person responsible: Director of Facilities Management	5/30/14
{K 025}	NFPA 101 LIFE SAFETY CODE STANDARD Smoke barriers are constructed to provide at least a one half hour fire resistance rating in accordance with 8.3. Smoke barriers may terminate at an atrium wall. Windows are protected by fire-rated glazing or by wired glass panels and steel frames. A minimum of two separate compartments are provided on each floor. Dampers are not required in duct	{K 025}	B The voids in the plaster ceiling in the Basement level bed storage room will be repaired. In accordance the appropriate UL design. The current UL standard too meet the appropriate floor construction requirements is being investigated. Once confirmed the floor assembly will be repaired to meet at least a two hour rating. During follow up survey, one void was identified to be non-compliant. A contractor will be hired to fix void.	5/30/14

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{K 025}	Continued From page 5 penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems. 19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4 This STANDARD is not met as evidenced by: Based on observation during the survey walk-through, with the the Director of Facilities Management, on May 22, 2013, the surveyors find that required smoke barriers are not installed and maintained in accordance with 19.3.7.3 of NFPA 101 - 2000. These condition could allow fire and smoke to spread beyond designated fire/smoke barriers during a fire emergency. Findings include: 1. Corrected 03/12/14. 2. Corrected 03/12/14. 3. Corrected 4/17/14 4. (Bsmt - Center Building) The designated one hour smoke barrier at the Basement Level of the Center Building has a penetration above the ceiling, above a pair of smoke doors, which was not sealed for fire rated construction. The drywall barrier above the ceiling has joints that are not sealed/taped in accordance with a U L Design Number for a one hour barrier.	{K 025}			
{K 048}	NFPA 101 LIFE SAFETY CODE STANDARD There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. 19.7.1.1	{K 048}	4.The penetration above the pair of smoke doors will be sealed and the drywall barrier above the ceiling will be sealed/taped in accordance with UL designs for a one hour barrier.	4/18/14	

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{K 048}	Continued From page 6 This STANDARD is not met as evidenced by: A. The provider furnished Life Safety Plans as information to be used for the survey. The small scale plans dated 2007 were used for 90% of the survey. There is no indication that these small scale plans match completely a large set of plans dated 2010. Based on direct observation and document review the surveyors find the plans provided are not accurate for portions of the building. Findings include; 1. 3rd Floor Center Building - the west end of the building is not shown accurately. The back elevator foyer (north foyer is used as storage or holding area and is not identified on plans as a hazardous area with a one hour enclosure. Update 03/12/14: Designated hazardous rooms, boundary and sizes of suites are not identified on the updated Life Safety drawings. 2. Corrected 03/12/14 3. Corrected 03/12/14 4. Corrected 03/12/14	{K 048}	1. An architectural firm will be contracted to review and update the Life Safety plans to accurately reflect the building locations including the hazardous storage area in the 3rd floor elevator foyer. This area was not shown on LS prints the Architectural firm has been contacted to correctly identify this on the LS prints.	5/30/14
{K 145}	NFPA 101 LIFE SAFETY CODE STANDARD The Type I EES is divided into the critical branch, life safety branch and the emergency system in accordance with NFPA 99. 3.4.2.2.2. This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through while accompanied by the senior	{K 145}	A mechanical/electrical consultant will be contracted to evaluate the existing condition and to develop an implementation plan to properly divide the electrical system into Life Safety Critical and Equipment branches in accordance with NFPA-99 and NFPA 70, Section 517.	8/31/13

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{K 145}	Continued From page 7 director of facilities management, the surveyor found that the building emergency electrical system is not properly divided into Life Safety, Critical and Equipment branches in accordance with NFPA-99, and NFPA-70, Section 517. These deficiencies could affect all building occupants because emergency egress and the provision of services could be compromised by the loss of a single transfer switch. Findings include: 1. The mechanical room accessed from the stairwell off of the OR corridor had seven isolation panels that were labeled as being served from the life safety panel. NFPA-70, Section 517-33 requires isolation panels served from emergency power to be on the critical branch, and Section 517-32 does not allow these panels to be served from the life safety branch of emergency power.	{K 145}	Upon completion of the evaluation, the required new equipment will be purchased and installed to assure that each branch served by the generator shall be served by its own trans switch in accordance with NFPA-99 and NFPA 70, Section 517. The plans/project will be submitted to IDPH for approval. Project Submission date to IDPH 8/31/13 Upon receiving written approval from IDPH, the project completion date Exhibit C This application covers three buildings, the separation of power and the addition of (8) AT's come from two sources and needs to be completed in phases. We are 75% complete with this project and will need an additional 60 days from 2/28/2014 to be complaint. We are asking to extend this completion date to	2/28/14	
{K 147}	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2 This STANDARD is not met as evidenced by: Based on random observation during the survey walk-through, with the Senior Director of Facilities Management and/or the Director of Facilities Management, on May 21 and May 22, 2013, the surveyors find that portions of the building electrical systems and materials are not installed and maintained in accordance with NFPA 70 1999. Findings include:	{K 147}		4/28/2014	

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{K 147}	Continued From page 8 A. Corrected 4/17/14 2. a. Corrected 03/12/14 b. Corrected 03/12/14 3. Corrected 03/12/14 4. Corrected 03/12/14 5. Corrected 03/12/14 B. 1. Corrected 03/12/14 2. Corrected 03/12/14 3. Corrected 03/12/14 C. Corrected 03/12/14 B. Based on random observation during the survey walk-through while accompanied by the senior director of facilities management, the surveyor found that not all portions of the building systems are installed in accordance with NFPA 70 (1999). Findings include: 1. Corrected 4/17/14 2. Corrected 4/17/14 3. Deleted 03/13/14. 4. The mechanical room accessed from the stairwell off of the OR corridor had an unmarked electrical panel that did not have a panel schedule and did not meet the requirements of NFPA-70, Section 110-22. This same mechanical room had seven isolation panels that did not have proper working clearance in accordance with	{K 147}	D4. The electrical panel off of the Operating Room corridor will be properly labeled and identified as required by NFPA-70, Section 110-22.	5/30/14	

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{K 147}	Continued From page 9 NFPA-70, Section 110-26.	{K 147}	The seven electrical isolation panels that did not have the proper working clearance will be relocated to assure proper clearance in accordance with NFPA-70, Section 110-26. An electrical contractor will evaluate an alternate location and develop an implementation plan. Exhibit F POC involves an evaluation of the sited deficiency which is still in progress. We are requesting an extension to 2/15/2015 to further investigate the means to accomplish the correction. Plans / Projects will be submitted to IDPH No: 9420 for full review and . comments before the start of construction.	2/15/15	