

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  7002777	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  08/12/2011
NAME OF PROVIDER OR SUPPLIER  MICHIGAN AVENUE CENTER FOR HEALTH LT		STREET ADDRESS, CITY, STATE, ZIP CODE 2415 MICHIGAN AVENUE CHICAGO, IL 60616		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
L 000	Initial Comments  The Illinois Department of Public Health (IDPH) conducted an onsite Life Safety Code inspection on 8/12/11. Michigan Ave. Center for Health, Ltd. is a Pregnancy Termination Center (PTC) located at 2415 Michigan Ave., Chicago, IL. Surveyor #12798 met with the facility representative to identify the purpose of the visit prior to touring the facility.  The building is a one story facility, sprinklered building which appears to be Type V (000) construction. The PTC is the only occupant in the building, and was inspected under the Illinois Ambulatory Surgical Treatment Center (ASTC) Licensing Requirements and the Life Safety Code (2000).  The following deficiencies were identified by document review, staff interview or direct observation. The findings listed below include the code section(s) of the deficiency for your convenience.	L 000		
L 050	21.7.1.2 FIRE DRILLS  Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift, using the fire alarm system, except at night. The staff is familiar with procedures and is aware that drills are part of established routine. 21.7.1.2  <del>This Regulation is not met as evidenced by: Based on record review it was determined that the facility failed to maintain provide fire drills as required. Fire drills are to be held at unexpected times under varying conditions, at least quarterly on each shift per NFPA 101, Section 21.7.1.2.</del>	L 050	1. A memo has been sent out reminding managers that fire drills are to be performed at varying times. (See enclosure) The administrator will be responsible in ensuring that the drills are performed correctly (Fire Drill Evaluation Forms to be reviewed at Quarterly Consulting Meeting)	9/1/11

Illinois Department of Public Health

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

STATE FORM

6899

N11T11

(X8) DATE

Administrator 9/31/11

If continuation sheet 1 of

Illinois Department of Public Health

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L 050	Continued From page 1  This deficient practice could affect staff, visitors as well as patients.  1. The facility was conducting fire drills quarterly as required, however all tests are being conducted between 1-2:00 pm. The times need to vary more then what is currently being done based on NFPA 101, 2000, 21-7.1.2.	L 050			
L 051	20.3.4/21.3.2 FIRE ALARM SYSTEM  A manual fire alarm system, not a pre-signal type, is provided to automatically warn the building occupants. The fire alarm system is arranged to automatically transmit an alarm to summon the fire department. 20.3.4 and 21.3.4 This Regulation is not met as evidenced by: A. fire alarm system with approved components, devices or equipment is installed and maintained according to NFPA 101, and NFPA 72. Non-functioning equipment may not provide staff proper notification to direct patients and visitors to a means of egress without crossing or entering the area of fire origin. This deficient practice could affect all patients as well as an indeterminable number of staff and visitors.  1. The following documentation was unavailable at the time of this inspection of the fire alarm system as required by NFPA 101, 21.3.4.1:  a. The sensitivity calibration testing, NFPA 72, 1999, 7-3.2.1. Detector sensitivity shall be checked within 1 year after installation and every alternate year thereafter. The facility did not provide any documentation that this test has ever been conducted on the detecting units.	L 051	a.  Sensitivity Test will be completed with the annual fire alarm system inspection by LaMarCo Systems. In the future, sensitivity testing will be completed during alternate year annual inspections.	10/31/11	

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L 051	Continued From page 2  b. Documentation on visual inspections of the control equipment, batteries, heat / smoke detectors, etc. as specified in NFPA 72, 1999 Table 7-3.1 and required weekly, monthly, semi-annually and/or yearly.  B. Based on the record review and staff interview, the facility failed to install and maintain the sprinkler system in accordance with NFPA 25, Chapter 2-1. This deficient practice could affect all patients, staff and visitors if the sprinkler system failed to function.  2. Observations determined that the facility failed to maintain the sprinkler system. Per C.L. Doucette, Inc. annual inspection on 8/30/10, the testing agent reported the following:  a. The devices and locations were listed as "Horns - all" and "Strobes - all". The number and location for each device was not specified.  2. In review of the documentation provided to the surveyor, testing of all of the devices as specified in NFPA 25, 1995, Table 2-1 and Chapter 9, could not be determined The following documentation was not available at the time of this inspection:  a. Logs for weekly, monthly, quarterly as well as annual inspections, testing and maintenance requirements for guages, valves, alarm devices, hangers, piping, sprinklers and/or drains as required by NFPA 25,1995, 1-8.	L 051	b. Per NFPA 72, 1999, 7-3.1, Exception No. 2, because automatic inspections are performed via a remotely monitored fire alarm control unit by LaMarCo Systems, visual inspection frequency is permitted to be annually. The annual visual inspection is also completed by LaMarCo Systems.  a. The annual inspection cited in L051 B.2.a., done by C.L. Doucette, Inc. on August 30, 2010, does not include any reference to "Horns-all" or "Strobes-all". A reference to horns and strobes would be found in a fire alarm inspection not on a sprinkler system inspection. Perhaps this was an oversight by the surveyor. No corrections needed.	9/1/11	9/1/11
L 147	Electrical wiring 9.1.2, 20.5.1  Electrical wiring and equipment are in accordance with NFPA 70, National Electrical Code 9.1.2, 20.5.1	L 147	a. The Maintenance Manager will work with SimplexGrinnell, our sprinkler company, to create a weekly/monthly/quarterly checklist and teach the center manager how to perform these inspections. SimplexGrinnell will continue to conduct annual inspections.	10/31/20	

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L 147	Continued From page 3  This Regulation is not met as evidenced by: A. Based on the observation and staff interview, the facility failed to install electrical wiring in accordance with NFPA 101, 2000 Edition, Section 9.1.2 and NFPA 70, 1999 Edition, National Electrical Code. This deficient practice could affect staff that would not be able to access the panels in an emergency.  1. The electrical panels are located in a closet. The closet also contained a ladder and other stored items. The clear working space and access to the panels was not being maintained as required by the NEC 110-26.	L 147	1. A memo has been sent out advising all staff of this requirement. A brightly colored notice has been created and posted on the electrical panel to remind staff to keep the area clear. (See enclosure)  Also, this requirement has been added to the monthly preventative maintenance checklist. (See enclosure) The manager of the center will be responsible for compliance.	9/1/2011	

# Memo

L 147

**To:** Center Managers

**From:** Administration 7(1)(b)

**Date:** August 23, 2011

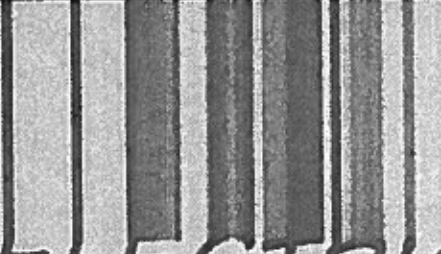
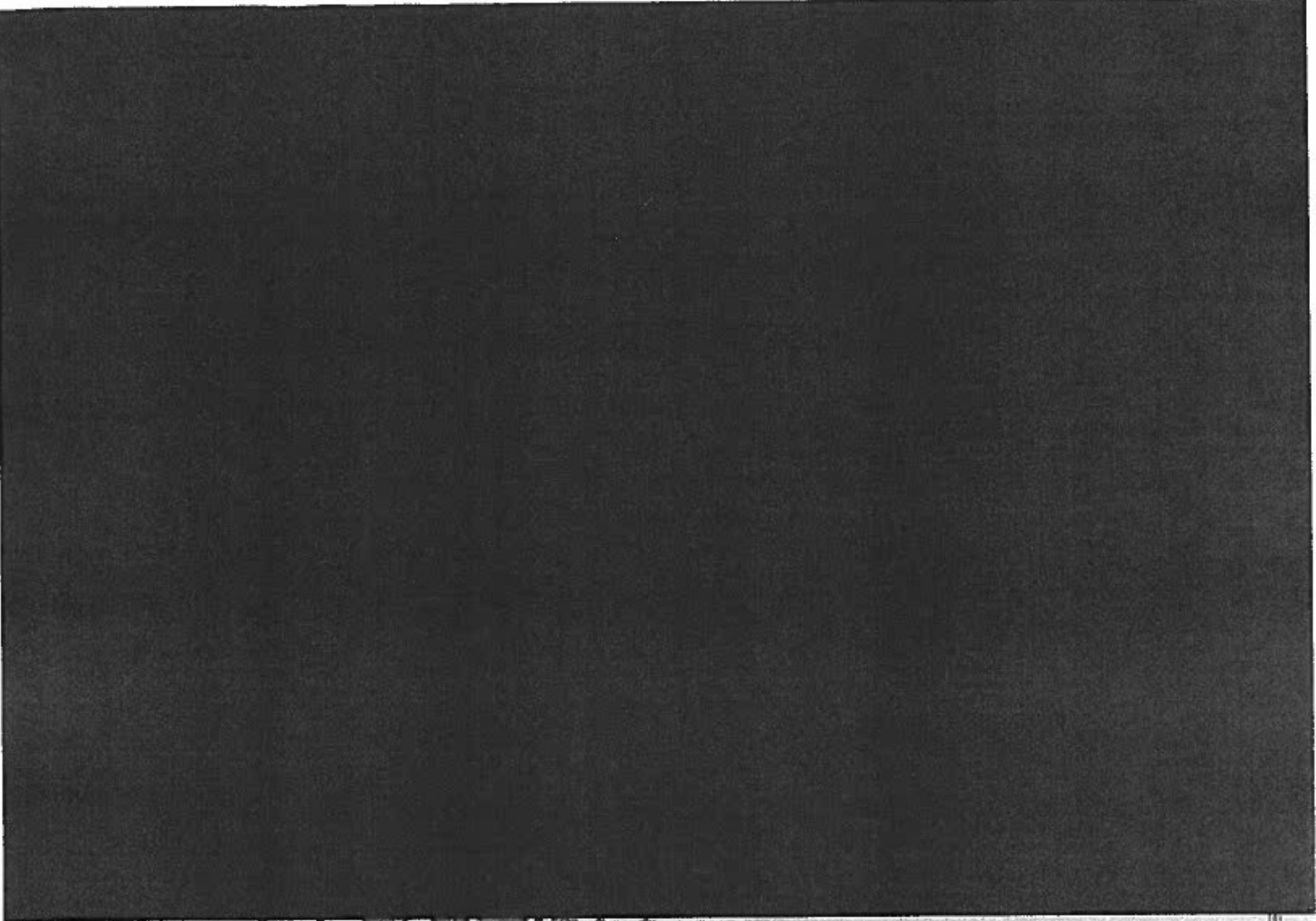
**Re:** Electrical Panels

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Please advise all staff there needs to be at least 3 square feet of clear working space in front of electrical panels. Do not store items in this space. Enclosed, is a bright colored notice to be posted on the panel to remind staff of this requirement.

Also enclosed is a revised monthly Preventative Maintenance Checklist with the Electrical Panel requirements added to it.

L 147



## ELECTRICAL PANEL

Keep 3 square feet of clear  
working space in front of panel.

# Memo

L 050

**To:** Center Managers  
**From:** Administrative 7(1)(b)  
**Date:** August 23, 2011  
**Re:** Fire Drills

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When performing fire drills, please remember to stage them at different times of the day (early morning, mid day, late afternoon). Drills must be held under unexpected times and under varying conditions.

Also, make sure to mark the time of day of the drill as well as all of the participants on the Fire Drill Evaluation Form.

# MONTHLY PREVENTIVE MAINTENANCE AND INSPECTION CHECKLIST

L 147

MONTH: \_\_\_\_\_

CENTER: \_\_\_\_\_

	Checked By	Date Checked	Comments / Repair Needs
Lighting - General	_____	_____	_____
Outlet & Covers / Switch Plates	_____	_____	_____
Electrical Cords	_____	_____	_____
Electrical Panel (Clear)	_____	_____	_____
Walls	_____	_____	_____
Ceilings	_____	_____	_____
Floors/Baseboards	_____	_____	_____
Exit Signs/Emergency Lights	_____	_____	_____
Fire Extinguishers (Tags)	_____	_____	_____
All Doors	_____	_____	_____
Self Closing Devices	_____	_____	_____
Bathroom	_____	_____	_____
Panic Hardware	_____	_____	_____
Intercom System	_____	_____	_____
Surgical Tables	_____	_____	_____
Mayo Stands	_____	_____	_____
Surgical Cabinets	_____	_____	_____
Carts	_____	_____	_____
O <sub>2</sub> Carts	_____	_____	_____
Refrigerators	_____	_____	_____
Plumbing	_____	_____	_____
Wheel Chairs	_____	_____	_____
Sewer Drains	_____	_____	_____
Entrances/Exits/Hallways	_____	_____	_____
Parking Lot	_____	_____	_____
*Manometer	_____	_____	_____
*Transfer Switch testing	_____	_____	_____
*Emergency Generator (Load Test)	_____	_____	_____
*If Applicable	_____	_____	_____