DEPARTMENT OF HEALTH ANI CENTERS FOR MEDICARE & M		-						2000 COD	E	Form Approved OMB No. 0938-0242
			HORT FORM	1.	(A) F	PROVIDER NUM	IBER	1. (B) MEDICA	AID I.D	
		re – Medicaid		К1				К2		
Identifying information as	shown in applic	cable records. Ent	er changes, if any, a	longside each	n iter	n, giving date	e of chang			
2. NAME OF FACILITY		A. BUILDIN B. WING	NSTRUCTION (BLDGS)	2. (B) ADDRES	S OF	FACILITY (STF	REET, CITY,	STATE, ZIP CC	,	A. Fully Sprinklered (All required areas are sprinklered) B. Partially Sprinklered (Not all required areas are sprinklered
		C. FLOOR								C. None (No sprinkler system) K0180
3. SURVEY FOR		4. DATE OF SURVEY	/	SHORT FORM			SURVEY L	INDER		
MEDICARE M	EDICAID	K4		CHECK HERE			5. 2	000 EXISTING		2000 NEW
5. SURVEY FOR CERTIFICATIO		N4		K9						
1. HOSPITAL		2. 🗌 SKIL	LED/NURSING FACILITY							
IF "2" OR "3" ABOVE IS MARKE	D, CHECK APPR	OPRIATE ITEM(S) BE	LOW					OF HOSPITAL,	IS HO	SPITAL ACCREDITED
1. ENTIRE FACILITY	2. DIST	TINCT PART OF (SPE	CIFY)			BY JCA	HO/AOA?	a. YES	b.	NO
6. BED COMPOSITION										
a. TOTAL NO. OF BEDS IN THE FACILITY	b. NUMBER OF I CERTIFIED FC		C. NUMBER OF SKILLEI CERTIFIED FOR MED	-		UMBER OF SK ERTIFIED FOR				R OF ICF BEDS ED FOR MEDICAID
	ts all of the items	on the form. e items on the form.	RT FORM:		-	2. 🗌 Ac 3. 🗌 Re	IEETS base mpliance wi ceptance of commended	ed upon: th all provisions a Plan of Corre	ection	D.
SURVEYOR (Signature)		TITLE		OFFICI	Ē			D	ATE	
8. SURVEYOR I.D. NO K10 REVIEW AUTHORITY OFFICIAL	L (Signature)									
According to the Paperwork Re	duction Act of 100		nuired to respond to a co	llection of inform	ation	unlass it displa	ve a valid (mber	The valid OMB control number

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0242. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, Attn: PRA Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

	of Facility				2000 CO
ID PREFIX		MET	NOT MET	N/A	REMARKS
	CORRIDOR WALLS AND DOORS		1		
K18	2000 EXISTING				1
	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas shall be substantial doors, such as those constructed of 1 ³ / ₄ inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Doors shall be provided with a means suitable for keeping the door closed. Dutch doors meeting 19.3.6.3.6 are permitted. 19.3.6.3 Roller latches are prohibited by CMS regulations in all health care facilities.				
	Show in REMARKS, details of doors, such as fire protection ratings, automatic closing devices, etc.				
	2000 New				
	Doors protecting corridor openings shall be constructed to resist the passage of smoke. Doors shall be provided with positive latching hardware. Dutch doors meeting 18.3.6.3.6 are permitted. Roller latches shall be prohibited. 18.3.6.3				
	Show in REMARKS, details of doors, such as fire protection ratings, automatic closing devices, etc.				
K22	Access to exits shall be marked by approved, readily visible signs in all cases where the exit or way to reach exit is not readily apparent to the occupants. 7.10.1.4				
	VERTICAL OPENINGS		1		
K20	2000 EXISTING				
	Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least one hour. An atrium may be used in accordance with 8.2.5.6, 19.3.1.1.				
	If all vertical openings are properly enclosed with construction providing at least a two hour fire resistance rating, also check this box.				

Name ID	e of Facility	1	NOT	1
ID PREFIX		MET	NOT MET	N/A
	If enclosures are less than required, give a brief description and specific location in REMARKS.			
	2000 NEW			
	Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least two hours connecting four stories or more. (One hour for single story building and sprinklered buildings up to three stories in height.) 18.3.1.1. An atrium may be used in accordance with 8.2.2.3.5.			
	If enclosures are less than required, give a brief description and specific location in REMARKS.			
	SMOKE COMPARTMENTATION AND CONTROL			
K23	2000 EXISTING			
	Smoke barriers shall be provided to form at least two smoke compartments on every sleeping room floor for more than 30 patients. 19.3.7.1, 19.3.7.2			
	2000 NEW			
	Smoke barriers shall be provided to form at least two smoke compartments on every floor used by inpatients for sleeping or treatment, and on every floor with an occupant load of 50 or more persons, regardless of use. Smoke barriers shall also be provided on floors that are usable, but unoccupied. 18.3.7.1, 18.3.7.2			
K28	2000 EXISTING			
	Door openings in smoke barriers shall provide a minimum clear width of 32 inches (81 cm) for swinging or horizontal doors. Vision panels are of fire-rated glazing or wired glass panels and steel frames. 19.3.7.5, 19.3.7.7			

ID PREFIX				MET	NO MET	N/A	REMARKS
	2000 NEW						
	Door openings in smoke barriers are installed as swinging or horizontal doors shall provide a minimum clear width as follows:						
	Provider Type	Swinging Doors	Horizontal Sliding Doors				
	Hospitals and Nursing Facilities	41.5 inches (105 cm)	83 inches (211 cm)				
	Psychiatric Hospitals and Limited Care Facilities	32 inches (81 cm)	64 inches (163 cm)				
	Vision panels of fire-rate frames are provided for						
		HAZARDOUS	AREA				
K29	2000 EXISTING One hour fire rated cons an approved automatic f with 8.4.1 and/or 19.3.5. approved automatic fire areas shall be separated partitions and doors. Doo field-applied protective p the bottom of the door a	ire extinguishing 4 protects hazar extinguishing sy d from other space ors shall be self- lates that do not re permitted. 19.	system in accordance dous areas. When the stem option is used, the ces by smoke resisting closing and non-rated o exceed 48 inches from 3.2.1	r			
	Area a. Boiler and Fuel-Fired Heater Roor c. Laundries (greater than 100 sq fee d. Repair Shops and Paint Shops e. Laboratories (if classified a Severe 1 f. Combustible Storage Rooms/Space g. Trash Collection Rooms i. Soiled Linen Rooms Describe the floor and zon are deficient in REMARKS	ns	atic Sprinkler Separation N/A				

					1		T
ID				MET	NO	N/A	REMARKS
PREFIX					MET		
	2000 NEW						
	Hazardous areas are protected in accordance with 8.4. The						
	areas shall be enclosed with a one						
	³ / ₄ hour fire-rated door, without wind			·			
	Doors shall be self-closing or auton	natic closing in	accordance				
	with 7.2.1.8. 18.3.2.1						
	Area	Automatic Sprinkler	Separation N/A				
	a. Boiler and Fuel-Fired Heater Rooms						
	c. Laundries (greater than 100 sq feet)						
	d. Repair, Maintenance and Paint Shops						
	e. Laboratories (if classified a Severe Hazard - see K31)						
	f. Combustible Storage Rooms/Spaces						
	(over 50 and less than 100 sq feet) g. Trash Collection Rooms						
	i. Soiled Linen Rooms						
	m.Combustible Storage Rooms/Spaces (over 100 sq feet)						
	Describe the floor and zone location	ns of hazardol	us areas that				
	are deficient in REMARKS.						
K30	Gift shops shall be protected as ha	zardaus aroas	when used for				
N30							
	storage or display of combustibles i						
	hazardous. Non-rated walls may se						
	considered hazardous, have separate protected storage and that						
	are completely sprinkled. Gift shops may be open to the corridor						
	if they are not considered hazardou	is, have separa	ate protected				
		storage, are completely sprinklered and do not exceed 500					
	square ^o feet. 18.3.2.5, 19.3.2.5						
	Area	Automatic Sprinkler	Separation N/A				
	L. Gift Shop storing hazardous quantities of combustibles						
	18.2.6, 19.2.6						
K211	2000 EXISTING						
1\211	Where Alcohol Based Hand Rub (A	RUP) disponse	ore are				
		DITC) uspense	ers are				
	installed:	•					
	The corridor is at least 6 feet wid						
	The maximum individual fluid dis		y shall be				
	1.2 liters (2 liters in suites of room						
	The dispensers shall have a minimum spacing of 4 ft from						
	each other						
	□ Not more than 10 gallons are used in a single smoke						
	compartment outside a storage cabinet.						
	Dispensers are not installed over or adjacent to an ignition						
	source.	5					
	□ If the floor is carpeted, the buildin	a is fully sprink	dered 19327				
	CFR 482.41, 483.70, 483.623	S io iony opinin					
	0111402.41,403.70,403.023						

ID PREFIX		MET	NO MET	N/A	REMARKS
K211	 2000 NEW Where Alcohol Based Hand Rub (ABHR) dispensers are installed: The corridor is at least 6 feet wide The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms) The dispensers shall have a minimum spacing of 4 ft from each other Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet. Dispensers are not installed over or adjacent to an ignition source. If the floor is carpeted, the building is fully sprinklered. 18.3.2.7, CFR 482.41, 483.70, 483.623 				
	EXISTS AND EGRESS			1	
K38	Exit access is so arranged that exits are readily accessible at all times in accordance with 7.1. 18.2.1, 19.2.1				
K39	2000 EXISTING				
	Width of aisles or corridors (clear and unobstructed) serving as exit access shall be at least 4 feet. 19.2.3.3				
	2000 NEW				
	Width of aisles or corridors (clear and unobstructed) serving as exit access in hospitals and nursing homes shall be at least 8 feet. In limited care facility and psychiatric hospitals, width of aisles or corridors shall be at least 6 feet. 18.2.3.3, 18.2.3.4				
K40	2000 EXISTING				
	Exit access doors and exit doors used by health care occupants are of the swinging type and are at least 32 inches in clear width. 19.2.3.5				
	2000 NEW				
	Exit access doors and exit doors used by health care occupants are of the swinging type, with openings of at least 41.5 inches wide. Doors in exit stairway enclosures shall be no less than 32 inches in clear width. In ICFs/MR, doors are at least 32 inches wide. 18.2.3.5				

ID		MET	NO	N/A	
PREFIX	Detions room doors are arranged such that the notions are area		MET		ł
K43	Patient room doors are arranged such that the patients can open the door from inside without using a key.				
	Special door locking arrangements are permitted in health facilities. 18.2.2.2.4, 18.2.2.2.5				
	If door locking arrangement without delay egress is used indicate in REMARKS				
	18.2.2.2.2, 19.2.2.2.2				
	ILLUMINATION AND EMERGENCY POWER				1
K45	Illumination of means of egress, including exit discharge, is arranged so that failure of any single lighting fixture (bulb) will not leave the area in darkness. 18.2.8, 19.2.8, 7.8				
K47	2000 EXISTING				1
	Exit and directional signs are displayed in accordance with 7.10 with continuous illumination also served by the emergency lighting system. 19.2.10.1				
	(Indicate N/A in one story buildings with less than 30 occupants where the line of exit travel is obvious.)				
	2000 NEW				
	Exit and directional signs are displayed with continuous illumination also served by the emergency lighting, system in accordance with 7.10. 18.2.10.1				
K105	2000 NEW (INDICATE N/A FOR EXISTING)				
	Buildings equipped with or requiring the use of life support systems (electro-mechanical or inhalation anesthetics) have illumination of means of egress, emergency lighting equipment, exit, and directional signs supplied by the Life Safety Branch of the electrical system described in NFPA 99. 18.2.9.2., 18.2.10.2, 18.5.1.1, 18.5.1.2 (Indicate N/A if life support equipment is for emergency purposes only).				

ID PREFIX		MET	NO MET	N/A	REMARKS
	EMERGENCY PLAN AND FIRE DRILLS				
K48	There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. 18.7.1.1, 19.7.1.1				
K50	Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2				
	FIRE ALARM SYSTEMS				
K51	2000 EXISTING				
	A fire alarm system with approved component, devices or equipment installed according to NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system shall be by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations in patient sleeping areas, may be omitted provided that manual pull stations are within 200 ft of nurse's stations. Pull stations are located in the path of egress. Electronic or written records of tests shall be available. A reliable second source of power must be provided. Fire alarm systems shall be in accordance with NFPA 72, and records of maintenance kept readily available. There shall be annunciation of the fire alarm system to an approved central station. 19.3.4, 9.6				
	2000 NEW				
	A fire alarm system with approved component, devices or equipment installed according to NFPA 72, to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system shall be by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations are located in the path of egress. Electronic or written records of tests shall be available. A reliable second source of power must be provided. Fire alarm systems shall be maintained in accordance with NFPA72, and records of maintenance kept readily available. There shall be remote annunciation of the fire alarm system to an approved central station. 18.3.4, 9.6				

ID PREFIX		MET	NO MET	N/A	REMARKS
K52	A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system shall have an approved maintenance and testing program complying with applicable requirement of NFPA 70 and 72. 9.6.1.4				
K155	Where a required fires alarm system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service. 9.6.1.8				
K53	2000 EXISTING (INDICATE N/A FOR HOSPITALS AND FULLY SPRINKLERED NURSING HOMES) In an existing nursing home, not fully sprinklered, the resident sleeping rooms and public areas (dining rooms, activity rooms, resident meeting rooms, etc) are to be equipped with single station battery-operated smoke detectors. There will be a testing, maintenance and battery replacement program to ensure proper operation. CFR 483.70				
	2000 NEW (NURSING HOME AND EXISTING LIMITED CARE FACILITIES) An automatic smoke detection system is installed in all corridors. (As an alternative to the corridor smoke detection system on patient sleeping room floors, smoke detectors may be installed in each patient sleeping room and at smoke barrier or horizontal exit doors in the corridor.) Such detectors are electrically interconnected to the fire alarm system. 18.3.4.5.3				

			NO	
ID PREFIX		MET	NO MET	N/A
K109	2000 EXISTING LIMITED CARE FACILITIES (INDICATE N/A FOR HOSPITALS OR NURSING HOMES)			
	An automatic smoke detection system is installed in all corridors, with detector spacing no further apart than 30 ft on center in accordance with NFPA 72. (As an alternative to the corridor smoke detection system on patient sleeping room floors, smoke detectors may be installed in each patient sleeping room and at smoke barrier or horizontal exit doors in the corridors.) Such detectors are electrically interconnected to the fire alarm system. 19.3.4.5.1			
	Smoke Detection System Corridors Rooms Bath			
	AUTOMATIC SPRINKLER SYSTEMS			
K56	2000 EXISTING Where required by section 19.1.6, Health care facilities shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with section 9.7. Required sprinkler systems are equipped with water flow and tamper switches which are electrically interconnected to the building fire alarm. 19.3.5, NPFA 13			
	2000 NEW When required by construction type, there is an automatic sprinkler system installed in accordance with NFPA13, Standard for the Installation of Sprinkler Systems, with approved components, device and equipment, to provide complete coverage of all portions of the facility. Systems are equipped with waterflow and tamper switches, which are connected to the fire alarm system. 18.3.5.			
	 A. Date sprinkler system last checked and necessary maintenance provided. B. Show who provided the service. 			

ID		MET	NO	N/A	T	REMARKS	DEMARKS
PREFIX			MET	IN/A	+	KEIWANNO	
K154	Where a required automatic sprinkler system is out of service for more than 4 hours in a 24-hour period, the authority having						
	jurisdiction shall be notified, and the building shall be evacuated						
	or an approved fire watch system be provided for all parties left unprotected by the shutdown until the sprinkler system has been						
	returned to service. 9.7.6.1						
K62	Automatic sprinkler systems are continuously maintained						
	in reliable operating condition and are inspected and tested						
	periodically. 18.7.6, 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5						
K64	Portable fire extinguishers shall be provided in all health care						
	occupancies in accordance with 9.7.4.1, NFPA 10. 18.3.5.6, 19.3.5.6						
	SMOKING REGULATIONS						
K66	Smoking regulations shall be adopted and shall include not less than the following provisions: 18.7.4, 19.7.4						
	\Box (1) Smoking shall be prohibited in any room, ward, or						
	compartment where flammable liquids, combustible gases, or oxygen is used or stored in any other hazardous location,						
	and such area shall be posted with signs that read NO						
	SMOKING or shall be posted with the international symbol for no smoking.						
	\Box (2) Smoking by patients classified as not responsible shall be						
	prohibited, except when under direct supervision.						
	\Box (3) Ashtrays of noncombustible material and safe design shall						
	be provided in all areas where smoking is permitted.						
	\Box (4) Metal containers with self-closing cover devices into which						
	ashtrays can be emptied shall be readily available to all areas where smoking is permitted.						
					T		

			1	1	1
ID PREFIX		MET	NO MET	N/A	REMARKS
	BUILDING SERVICE EQUIPMENT			1	
K70	Portable space heating devices shall be prohibited in all health care occupancies. Except it shall be permitted to be used in non-sleeping staff and employee areas where the heating elements of such devices do not exceed 212°F (100°C). 18.7.8, 19.7.8				
	FURNISHINGS AND DECORATIONS				-
K72	Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency. No furnishings, decorations, or other objects shall obstruct exits, access thereto, egress there from, or visibility thereof shall be in accordance with 7.1.10				
K74	Draperies, curtains, including cubicle curtains, and other loosely hanging fabrics and films serving as furnishings or decorations in health care occupancies shall be in accordance with provisions of 10.3.1 and NFPA 13 Standard for the Installation of Sprinkler Systems. Except shower curtains shall be in accordance with NFPA 701.				
	Newly introduced upholstered furniture shall meet the criteria specified when tested in accordance with the methods cited in 10.3.2 (2) and 10.3.1. 18.3.5.3 and NFPA 13				
	LABORATORIES				
K31	Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard shall be protected in accordance with NFPA 99. (Laboratories that are not considered to be severe hazard shall meet the provision of K29.) Laboratories in Health Care occupancies and medical and dental offices shall be in accordance with NFPA 99, Standard for Health Care Facilities 10.5.1.				

		1	1	1	г	
ID PREFIX		MET	NO MET	N/A		REMARKS
K134	Emergency Shower: Where the eyes or body of any person can be exposed to injurious corrosive materials, suitable fixed facilities for quick					
	drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use. Fixed eye					
	baths designed and installed to avoid injurious water pressure shall be in accordance with NFPA 99, 10.6.					
K135	Flammable and combustible liquids shall be used from and stored in approved containers in accordance with NFPA 30,				ĺ	
	Flammable and Combustible Liquids Code, and NFPA 45,					
	Standard on Fire Protection for Laboratories Using Chemicals. Storage cabinets for flammable and combustible liquids shall be					
	constructed in accordance with NFPA 30, Flammable and Combustible liquids Code NFPA 99, 4.3, 10.7.2.1.				ĺ	
	MEDICAL GASES AND ANESTHETIZING AREAS	<u> </u>	<u> </u>			
K76	Medical gas storage and administration areas shall be protected					
	in accordance with NFPA 99, Standard for Health Care Facilities.				l	
	(a) Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation.				ĺ	
	(b) Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99, 4.3.1.1.2, 18.3.2.4, 19.3.2.4					
K141	Non-smoking and no smoking signs in areas where oxygen is					
	used or stored shall be in accordance with 18.3.2.4, 19.3.2.4, NFPA 99, 8.6.4.2					
K143	Transferring of oxygen shall be:					
	(a) separated from any portion of a facility wherein patients are housed, examined, or treated by a separation of a fire					
	barrier of 1-hour fire-resistive construction; and				l	
	(b) the area that is mechanically ventilated, sprinklered, and has ceramic or concrete flooring; and					
	(c) in an area that is posted with signs indicating that				I	
	transferring is occurring, and that smoking in the immediate area is not permitted in accordance with				I	
	NFPA 99 and Compressed Gas Association. 8.6.2.5.2					

			NO		
ID PREFIX		MET	NO MET	N/A	REMARKS
	ELECTRICAL	•			
K144	Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99, 3.4.4.1, NFPA 110, 8.4.2.				
K146	The nursing home/hospice with no life support equipment shall have an alternate source of power separate and independent from the normal source that will be effective for minimum of $1^{1/2}$ hour after loss of the normal source NFPA 99, 3.6				
K130	Miscellaneous				
	List in the REMARKS sections, any items that are not listed previously, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567.				

Form CMS-2786S (xx/xx)

Page 14