Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	55C0001062	04/30/2018
Name of Provider or Supplier	**Street Address, City, State**	
Sacramento Eye Surgicenter	3150 J Street, Sacramento, CA	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
K0211	Means of Egress - General CFR(s): NFPA 101 Means of Egress - General Aisles, passageways, corridors, exit discharges, exit locations, and accesses are in accordance with Chapter 7, and the means of egress is continuously maintained free of all obstructions to full instant use in case of emergency, unless modified by 20/21.2.2 through 20/21.2.11. 20.2.1, 21.2.1, 7.1.10.1 This STANDARD is not met as evidenced by: Based on document review, observation, and interview, the facility failed to maintain the door openings and means of egress. This was evidenced by the absence of an annual inspection and test for door assemblies and a fire rated door that was obstructed. This affected all patients and could result in the malfunction of the egress doors during an emergency situation. NFPA 101. Life Safety Code, 2012 Edition 21.2.1 General. Every aisle, passageway, corridor, exit discharge, exit location, and access shall be in accordance with Chapter 7, unless otherwise modified by 21.2.2 through 21.2.11. 7.1.10 Means of Egress Reliability. 7.1.10.1* 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.

7.1.10.2 Furnishings and Decorations in Means of Egress.

7.1.10.2.1 No furnishings, decorations, or other objects shall obstruct exits, access thereto, egress therefrom, or visibility thereof.

7.2.1.15 Inspection of Door Openings.

7.2.1.15.1* Where required by Chapters 11 through 43, the following door assemblies shall be inspected and tested not less than annually in accordance with 7.2.1.15.2 through 7.2.1.15.8:

(1) Door leaves equipped with panic hardware or fire exit hardware in accordance with 7.2.1.7

(2) Door assemblies in exit enclosures

(3) Electrically controlled egress doors

(4) Door assemblies with special locking arrangements subject to 7.2.1.6

7.2.1.15.2 Fire-rated door assemblies shall be inspected and tested in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. Smoke door assemblies shall be inspected and tested in accordance with NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives.

7.2.1.15.3 The inspection and testing interval for fire-rated and nonrated door assemblies shall be permitted to exceed 12 months under a written performance-based program in accordance with 5.2.2 of NFPA 80, Standard for Fire Doors and Other Opening Protectives.

7.2.1.15.4 A written record of the inspections and testing shall be signed and kept for inspection by the authority having jurisdiction.

7.2.1.15.5 Functional testing of door assemblies shall be performed by individuals who can demonstrate knowledge and understanding of the operating components of the type of door being subjected to testing. 7.2.1.15.6 Door assemblies shall be visually inspected from both sides of the opening to assess the overall condition of the assembly.

7.2.1.15.7 As a minimum, the following items shall be verified:

(1) Floor space on both sides of the openings is clear of obstructions, and door leaves open fully and close freely.

(2) Forces required to set door leaves in motion and move to the fully open position do not exceed the requirements in 7.2.1.4.5.

(3) Latching and locking devices comply with 7.2.1.5.

(4) Releasing hardware devices are installed in accordance with 7.2.1.5.10.1.

(5) Door leaves of paired openings are installed in accordance with 7.2.1.5.11.

(6) Door closers are adjusted properly to control the closing speed of door leaves in accordance with accessibility requirements.

(7) Projection of door leaves into the path of egress does not exceed the encroachment permitted by 7.2.1.4.3.

(8) Powered door openings operate in accordance with 7.2.1.9.

(9) Signage required by 7.2.1.4.1(3), 7.2.1.5.5, 7.2.1.6, and 7.2.1.9 is intact and legible.

(10) Door openings with special locking arrangements function in accordance with 7.2.1.6

(11) Security devices that impede egress are not installed on openings, as required by 7.2.1.5.12. 7.2.1.15.8 Door openings not in proper operating condition shall be repaired or replaced without delay.

Findings:

During document review, a tour of the facility, and interview with the Administrator on 4/30/18, the annual inspection and testing records for fire doors were requested.

1. At 11:05 a.m., the facility was observed with 60 minutes doors. No annual door assemblies inspection and/or testing had been completed. Upon interview, the Administrator confirmed the finding.

2. At 11:25 a.m., the 60 minute fire doors near Operating Room 2 was observed. The right leaf had two metal tray tables stationed directly in front of the door. Upon interview, the Administrator confirmed the finding.