



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@dhw.idaho.gov

July 17, 2015

Jennie Rawlings, Administrator
PCS Endoscopy Suite
110 Vista Drive
Pocatello, ID 83201-5824

RE: PCS Endoscopy Suite, Provider #13C0001041

Dear Ms. Rawlings:

This is to advise you of the findings of the Medicare Fire Life Safety Survey conducted at PCS Endoscopy Suite on July 9, 2015.

Based on the results of this survey, Pcs Endoscopy Suite was found to be in substantial compliance with the fire/life safety requirements set forth in the Life Safety Code, 2000 Edition, for Ambulatory Surgery Centers.

Thank you for the courtesies extended to us during our visit. If we can be of help to you, please call our office at (208)334-6626.

Sincerely,

MARK P. GRIMES
Supervisor
Facility Fire Safety and Construction Program

MPG/lj

Enclosures

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

Printed: 07/15/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13C0001041	(X2) MULTIPLE CONSTRUCTION A. BUILDING 03 - PCS ENDOSCOPY SUITE B. WING _____	(X3) DATE SURVEY COMPLETED 07/09/2015
--	---	--	---

NAME OF PROVIDER OR SUPPLIER PCS ENDOSCOPY SUITE	STREET ADDRESS, CITY, STATE, ZIP CODE 110 VISTA DRIVE POCATELLO, ID 83201
--	---

(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) COMPLETION DATE
--------------------	--	---------------	---	----------------------

K 000	<p>INITIAL COMMENTS</p> <p>PCS Ambulatory Surgical Center (ASC) is located in an 8,553 Square foot wood frame type V (000) building that was constructed in July 2012. The building contains a Primary Care Doctor ' s clinic and the one hour separated PCS ASC is approximately 790 square feet in size located on the East side of the building. There is a basement under the Primary Care clinic that is approximately 2,110 square feet in size. The building is protected with a manual fire alarm system that was installed in June 2012. The ASC has smoke detection in the corridor with a manual pull station located at the main entrance to the ASC. The ASC has two exits, one direct, one through the clinic. There is a remote Fire Alarm annunciator located at the reception desk of the Primary care clinic. Exit signs, emergency lighting and specified receptacles are provided power by an on-site natural gas powered 10 KW generator.</p> <p>The facility was found to be in substantial compliance during the fire/life safety survey conducted on July 10, 2015. The survey was conducted under applicable provisions set forth in the Life Safety Code, 2000 Edition, Chapter 20, New Ambulatory Health Care Occupancy and 42 CFR 416.44(b).</p> <p>The surveyor conducting the survey was:</p> <p>Sam Burbank Health Facility Surveyor Facility Fire Safety & Construction</p>	K 000		
-------	--	-------	--	--

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 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.