DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop C2-21-16 Baltimore, Maryland 21244-1850



## Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

May 4, 2023

Michael J. Lissau Senior Vice President and General Counsel Saint Francis Health System 6161 South Yale Avenue Tulsa, OK 74136

Dear Mr. Lissau:

Thank you for meeting with us today and for the productive conversations related to a recent finding by The Joint Commission (TJC) during your recent reaccreditation survey. We believe today's discussion and agreed upon solution enables St. Francis South Hospital to maintain a living flame in the hospital chapel while mitigating fire risks.

As we discussed, TJC issued a deficiency citation based on the National Fire Protection Association (NFPA) Health Care Facilities Code (NFPA 99), which contains associated "Elimination of Sources of Ignition" requirements under sections 11.5.1.1.2 & 11.5.1.1.3, and which require no open flame within one foot of a nasal cannula and 15 feet of any other oxygen delivery equipment.

As per our discussion earlier today, and after CMS's further discussion with TJC, CMS is providing St. Francis South Hospital a waiver for the living flame of the sanctuary candle in the chapel of this hospital. This waiver is contingent upon the hospital providing a plan of correction to TJC that includes taking some simple, appropriate steps to mitigate fire risks (e.g., signage posted outside or in the chapel warning patients, visitors, and staff of keeping oxygen equipment and their delivery devices sufficiently far from any flame in the chapel to serve as the primary action by the hospital to mitigate the fire risks, and, if possible, the use of a rope or other barrier to serve as a secondary mitigation measure). We recommend continuing to engage with TJC on implementing these solutions and addressing this deficiency citation in a way that mitigates fire risks while still ensuring you can maintain this feature of your chapel.

Once these agreed upon actions have been implemented, CMS will consider this particular matter closed.

Again, thank you for your continued efforts to provide vital health care services to your patients and your community, while also promoting their safety.

Sincerely,

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Scott J. Cooper, MMSc, PA-C CAPT, USPHS Director Division of Continuing & Acute Care Providers