



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

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April 20, 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 your letter of appeal and request for reconsideration to the Centers for Medicare & Medicaid Services (CMS), related to the deficiency citation as a result of your reaccreditation survey with The Joint Commission (TJC). Our Division of Continuing and Acute Care Providers, in the Quality, Safety and Oversight Group, has reviewed the information within the appeal and the request from St. Francis Health System for a waiver. Our team has also communicated with TJC and the CMS Survey Operations Group on this matter.

While CMS appreciates St. Francis Health System's additional information, CMS agrees with TJC's deficiency citation because a hospital must ensure that the life safety from fire requirements are met in accordance with 42 CFR §482.41(b). Furthermore, TJC's deficiency citation is consistent with CMS's policy memorandum for nursing homes at [S&C-07-07](#). Specifically, answer #14 addresses the use of lighted candles and states that such candles must be "placed in a substantial candle holder and supervised at all times they are lighted." According to the information gathered by TJC and the survey finding, "there was a lit candle with open flame burning unattended 24/7." The National Fire Protection Association (NFPA) Health Care Facilities Code (NFPA 99) also contains associated "Elimination of Sources of Ignition" requirements under sections 11.5.1.1.2 & 11.5.1.1.2, which require no open flame within one foot of a nasal cannula and 15 feet of any other oxygen delivery equipment. For hospitals that use TJC accreditation for deemed status purposes, the hospital must comply with the 2012 edition of NFPA 99: Health Care Facilities Code.

We recommend that your facility engage with TJC on the plan of correction (evidence of standard compliance) process to address this deficiency. Accrediting organizations (AOs), such as TJC, must meet or exceed CMS' Conditions of Participation. Since AOs may exceed CMS standards, TJC may consider additional requirements as to what may be acceptable as part of the plan of correction process and may also advise on next steps if an acceptable plan of correction is not received.

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Thank you for your continued efforts to ensure the health and safety of patients.

Sincerely,

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