

Health Care Facility: **Maintaining Operational Continuity**

In early 2013, ACR was dispatched to inspect a fire/smoke damage loss (compounded by water damage due to firefighting efforts) at a health care facility in Cook County, IL. The facility is a Medicare/Medicaid residential community and had suffered a fire associated with its laundry room as a result of work being done on the roof. There was certainly significant damage as a result of the fire and smoke, but during the process of fire damage inspection, the damage revealed a significant mold problem that otherwise had not been brought to light.



Since the nature of this 300+ bed property involves the residential care of people who could be exposed to the additional health risks of mold exposure, an immediate and comprehensive plan of remediation was agreed to be the best practice solution, *as well as to limit the legal liability of the property's ownership and management.*

The Special Challenges of Health Care Properties

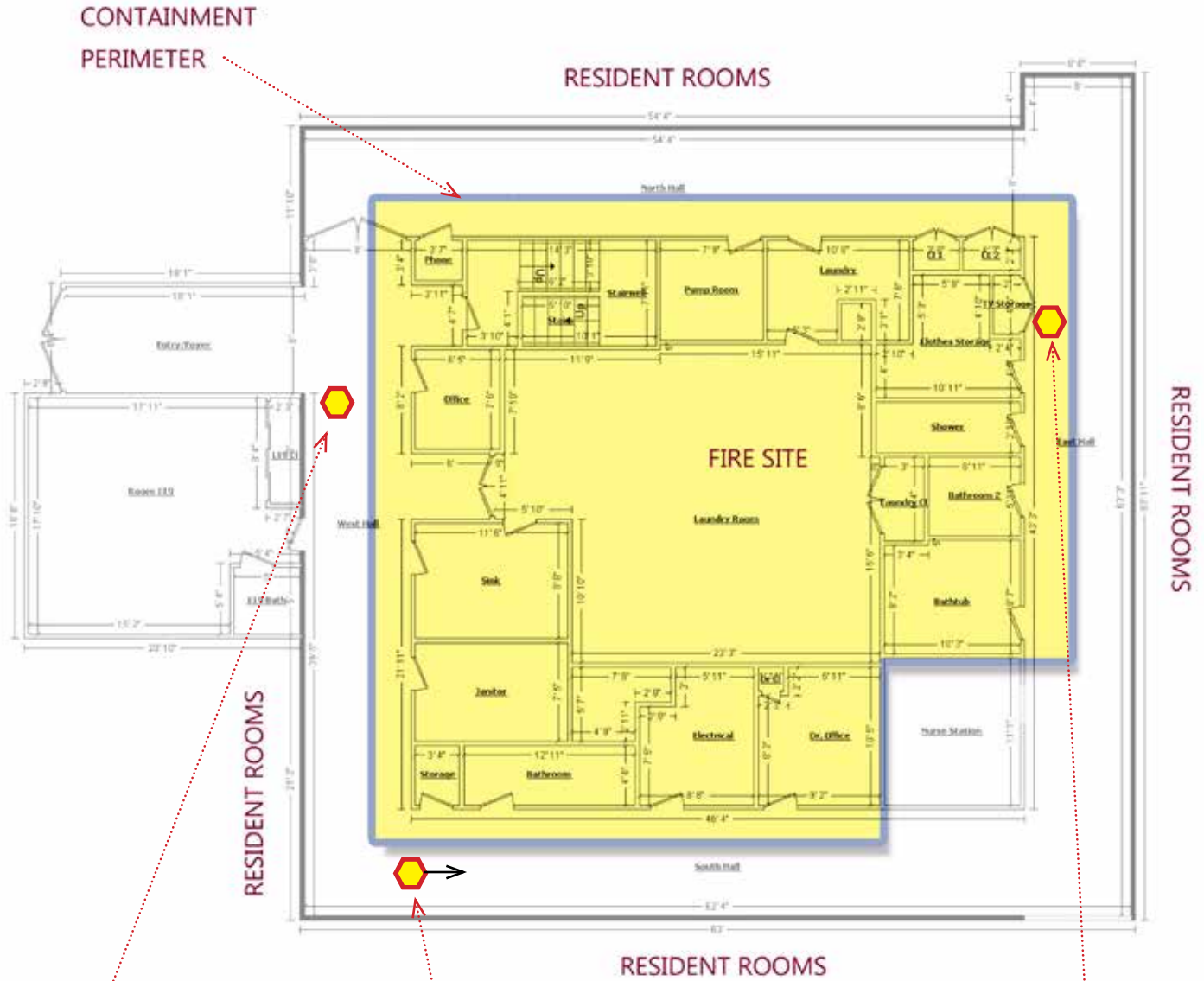
In a property designed for residential health care, regardless of occupancy, loss of use or resident relocation would be extremely unfortunate. Revenue loss for the time span of the remediation could adversely affect operations. The inconvenience and disruption to residents and staff poses potentially damaging challenges. So the project must be fast, thorough, and minimally disruptive to ongoing operation.

There is also an important component of being discreet. Mold presence can be the subject of negative PR, even at the level of residents' families and staff.

The Unique Solution

The IICRC S520 guidelines require that the mold-affected area should be placed under negative pressure to avoid any cross contamination during the remediation, and whereas normally, transparent plastic sheeting is used, ACR devised a unique custom containment to be built at our facility and brought on-site for rapid set up. This custom enclosure was made of wood panels with sealed seams, and allowed sufficient space in the surrounding hallway beyond the containment for normal movement of residents, staff, carts, wheelchairs and more, maintaining all ADA requirements for such common area movement.

The effective result of this custom containment is 100% salvage of daily operations, with minimal disruption and a completely discreet work zone for both the fire damage cleanup and the mold remediation. **No residents required temporary relocation and no revenue was lost as a result of the needed work.**





About ACR's Perspective on Approaching Mold Remediation:

ACR has been dedicated from its inception to delivering top level protocol mold remediation, based entirely on the **S-520 Guidelines** set forth by the IICRC (Institute for Inspection, Cleaning and Restoration Certification), the restoration industry's primary governing body for standards. This adherence to best practices performance yields the best possible results, including total removal of the mold presence.

ACR strongly encourages the use of **independent third party testing**, both before work to confirm the presence of mold and after the work to confirm the complete removal of the mold and spores. This third-party testing is what guarantees the need for the remediation work and associated expense, and the mold-free result. Remediation companies that test their own work bear strong temptation to bend the truth for more work and/or more profit.



The site sustained serious fire and smoke damage and was in a state of disaster, with structural materials charred, sooty or displaced entirely. The disengagement of the materials is what revealed the presence of mold, as well as an obvious repeated contact with water in the past.

The fire started on the roof and appeared to have infiltrated the laundry room via a duct opening.

Initial response called for air scrubbers and temporary power and lighting. The correct procedure for fire clean up is methodical and planned recovery moved forward.



Very quickly, the mold was revealed to be substantial throughout the area originally identified as suspect. It is common to see vast colonies of mold growth behind dry-wall that frontally appears minimal or mold free.

We also noticed the metal studs have localized rust in patterns associated with repeated past water exposure.

Patterns of mold growth often follow the path of organic compounds left on the surface when installed.



In some areas, potential mold growth was visible, although not suggesting any major or non-localized colonization. Even though this seems very obvious, we still defer to independent third party testing to confirm.

In areas near plumbing, mold growth such as this patch is often overlooked as "normal" and can be allowed months and years to accumulate behind the wall where conditions are favorable...temperature, moisture and the lack of light.



In this area where a sink was removed, it is definitely in need of cleaning. However, when the material was inspected closely, it became clear that mold had taken hold here.

The removed wall material, below, shows that mold is deeply embedded and is consuming the available organic compounds.





Proper procedure indicates the cutting of wall material a minimum of two feet above the common height of the mold growth, then the complete removal of the board below.

In this image, the wall's removal shows a profuse mold presence behind the wall of the neighboring room.

It takes significant experience and knowledge of building science to properly remove the wall materials that cover important infrastructure such as electrical, plumbing and more. And to execute this in full protective gear is not for the faint of heart.

The cuts and removal proceeded throughout the affected area, behind the custom containment with minimal noise and disturbance to the facility's operation.



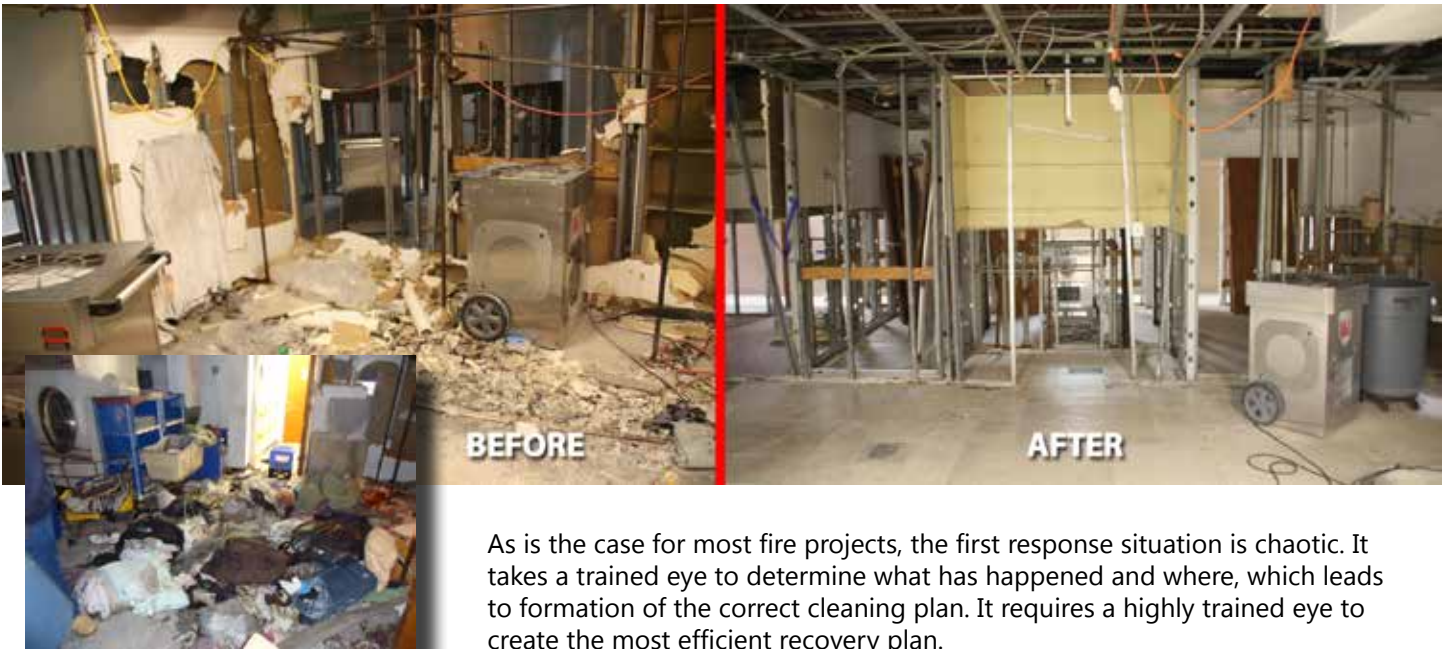
The work is carried out by ACR's certified technicians and supervised by our experienced project managers for consistently top quality results. There is no room for error when adhering to S-520 standards.



ACR's "No Conflict of Interest" Service Policy states that we do not do reconstruction. The reason is that if a restoration company profits from the construction portion of projects ("put-back"), there is a temptation of tear out more than is genuinely necessary. Therefore, ACR's performance of remediation services leads to conclusion at the point where there mold has been removed, and is confirmed to be done completely by an independent third party industrial hygienist.

This project passed I.H. testing on the first attempt, which while common for ACR, is quite rare in the remediation industry overall. The reason is simple: ACR's experience, education and certifications, strictly following the IICRC S-520 standards, and a relentless pursuit of "spotless."

At this time, ACR's portion of the project concludes, followed by the facility's choice of contractor doing "put-back" of wallboard and flooring, the privacy containment is removed and the facility is back to normal operations.



ACR brings the high level of experience and attention to detail that renders the chaos manageable and top results are achieved. The level of "clean" is startling, especially knowing that this "clean" applies on the microscopic level, as confirmed by independent third-party testing by the industrial hygienist.





Conclusion of the Project: *A Clearly Positive Outcome*

ACR's successful restoration of this residential health care community comes as a result of extraordinary performance. This performance owes its high level to top education and certification, decades of experience, adaptability to a changing diagnosis, and relentless pursuit of excellence.

However, the latent highlight of this project was that the facility was able to operate with **no residency interruption** and minimal disruption to residents and staff, while still following top level protocol as dictated in the IICRC S-520 guidelines, EPA safety recommendations...*and to the complete satisfaction of the facility's management and ownership.*

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- ❖ Mold Remediation
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<http://www.restorationindustry.org/content/phoenix-award>

