

Department of Health Services				
Division of Quality Assurance				
<b>Hospital Citation Report for July 1, 2010 - September 30, 2010</b>				
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Tag	Regulation	# Fed Cites	# State Cites	Special Purpose Regulation Sets
<b>Discharge Planning</b>				
		0	2	
R 0233			1	
R 0481			1	
<b>EMTALA</b>				
		2	0	
C 2400		1		
C 2406		1		
<b>Governing Body</b>				
		3	2	
A 0083		1		
C 0240		1		
C 0241		1		
R 0200	The hospital shall have an effective governing body or a designated person who functions as the governing body or a designated person who functions as the governing body which is legally responsible for the operation and maintenance of the hospital.		1	
			1	
<b>Swing Bed: Hospital and CAH</b>				
		1	0	
C 0151		1		
<b>Infection Control</b>				
		6	5	

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A 0749	The infection control officer or officers must develop a system for identifying, reporting, investigating, and controlling infections and communicable diseases of patients and personnel.	1		
		1		
		1		
C 0278	[The policies include the following:] a system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	1		
		1		
		1		
R 0294	The hospital shall provide a sanitary environment to avoid sources and transmission of infections and communicable diseases. There shall be an active program for the prevention, control and investigation of infections and communicable diseases.		1	
			1	
			1	
R 0298			1	
R 0313			1	
<b>Medical Record Services</b>		<b>19</b>	<b>13</b>	
A 0450		1		
A 0454		1		

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A 0457	All verbal orders must be authenticated based upon Federal and State law. If there is no State law that designates a specific timeframe for the authentication of verbal orders, verbal orders must be authenticated within 48 hours.	1		
		1		
C 0302		1		
C 0304	For each patient receiving health care services, the CAH maintains a record that includes, as applicable, identification and social data, evidence of properly executed informed consent forms, pertinent medical history, assessment of the health status and health care needs of the patient, and a brief summary of the episode, disposition, and instructions to the patient.	1		
		1		
		1		
C 0305		1		
C 0306	[For each patient receiving health care services, the CAH maintains a record that includes, as applicable-] all orders of doctors of medicine or osteopathy or other practitioners, reports of treatments and medications, nursing notes and documentation of complications, and other pertinent information necessary to monitor the patient's progress, such as temperature graphics and progress notes describing the patient's response to treatments; [and]	1		
		1		
		1		

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C 0307	[For each patient receiving health care services, the CAH maintains a record that includes, as applicable-] dated signatures of the doctor of medicine or osteopathy or other health care professional.	1		
		1		
		1		
		1		
		1		
C 0308	The CAH maintains the confidentiality of record information and provides safeguards against loss, destruction, or unauthorized use.	1		
		1		
R 0378	Content. Medical staff bylaws and rules shall include a statement specifying categories of personnel duly authorized to accept and implement medical staff orders. All orders shall be recorded and authenticated. All verbal and telephone orders shall be authenticated by the prescribing member of the medical staff in writing within 24 hours of receipt.		1	
			1	
R 0442			1	
R 0443			1	
R 0445			1	
R 0446			1	
R 0471			1	

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R 0496	AUTHENTICATION OF ALL ENTRIES. Documentation. All entries in medical records by medical staff or other hospital staff shall be legible, permanently recorded, dated and authenticated with the name and title of the person making the entry.		1	
			1	
			1	
			1	
R 0810			1	
<b>Medical Staff</b>		<b>1</b>	<b>0</b>	
C 0261		1		
<b>Nursing Services</b>		<b>6</b>	<b>6</b>	
A 0396		1		
A 0398		1		
C 0295		1		
C 0296		1		
C 0297		1		
C 0298		1		
R 0417			1	
R 0430	There shall be a written nursing care plan for each patient which shall include the elements of assessment, planning, intervention and evaluation.		1	

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			1	
R 0431	Documentation of nursing care shall be pertinent and concise and shall describe patient needs, problems, capabilities and limitations Nursing interventions and patient responses shall be noted.		1	
			1	
R 0439			1	
<b>Services: Anesthesia, Emrgcy, Food &amp; Dietetic, Nucl Mec</b>		<b>14</b>	<b>8</b>	
C 0274		1		
C 0276	rules for the storage, handling, dispensation, and administration of drugs and biologicals. These rules must provide that there is a drug storage area that is administered in accordance with accepted professional principles, that current and accurate records are kept of the receipt and disposition of all scheduled drugs, and that outdated, mislabeled, or otherwise unusable drugs are not available for patient use.	1		
		1		
		1		
		1		
C 0279	[The policies include the following:] If the CAH furnishes inpatient services, procedures that ensure that the nutritional needs of inpatients are met in accordance with recognized dietary practices and the orders of the practitioner responsible for the care of the patients, and that the requirement of §485.25(i) is met with respect to inpatients receiving posthospital SNF care.	1		
		1		

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C 0320		1		
C 0322	(1) A qualified practitioner, as specified in paragraph (a) of this section, must examine the patient immediately before surgery to evaluate the risk of the procedure to be performed. (2) A qualified practitioner, as specified in paragraph (c) of this section, must examine each patient before surgery to evaluate the risk of anesthesia. (3) Before discharge from the CAH, each patient must be evaluated for proper anesthesia recovery by a qualified practitioner, as specified in paragraph (c) of this section.	1		
		1		
		1		
		1		

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C 0385	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Patient activities (§483.15(f) of this chapter), except that the services may be directed either by a qualified professional meeting the requirements of §485.15(f)(2), or by an individual on the facility staff who is designated as the activities director and who serves in consultation with a therapeutic recreation specialist, occupational therapist, or other professional with experience or education in recreational therapy. Quality of Life - activities (§483.15(f)) "(1) The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident. (2) The activities program must be directed by a qualified professional who-(i) Is a qualified therapeutic recreation specialist or an activities professional who- A) Is licensed or registered, if applicable, by the State in which practicing; and	1		
		1		
R 0552	Sanitary conditions shall be maintained in the storage, preparation and distribution of food.		1	
			1	
R 0658			1	
R 0673	Every surgical patient shall have a preanesthetic evaluation by a person qualified to administer anesthesia, with findings recorded within 48 hours before surgery, a preanesthetic visit by the person administering the anesthesia, and an anesthetic record and post-anesthetic follow-up examination, with findings re-corded within 48 hours after surgery by the individual who administers the anesthesia.		1	

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			1	
Y 3122	(2) A hospital that provides emergency services to a victim shall do all of the following: (b) Orally inform the victim of all of the following: 1. Her option to receive emergency contraception at the hospital. 2. Her option to report the sexual assault to a law enforcement agency. 3. Any available options for her to receive an examination to gather evidence regarding the sexual assault.		1	
			1	
			1	
<b>Pharmaceutical Services</b>		<b>6</b>	<b>3</b>	
A 0404		1		
A 0406		1		
A 0490		1		
A 0494		1		
A 0505		1		
A 0508		1		
R 0517			1	
R 0528			1	
R 0530			1	
<b>Organ Tissue, Eye Procurement</b>		<b>0</b>	<b>0</b>	

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<b>Patient Rights</b>		<b>1</b>	<b>3</b>	
A 0147		1		
R 0244	Patient rights and responsibilities. Every hospital shall have written policies established by the governing board on patient rights and responsibilities which shall provide that: Except in emergencies, the consent of the patient or the patient's legally authorized representative shall be obtained before treatment is administered;		1	
			1	
R 0247			1	
<b>Physical Environment (all K tags are counted as federal c</b>		<b>81</b>	<b>2</b>	
A 0700	The hospital must be constructed, arranged, and maintained to ensure the safety of the patient, and to provide facilities for diagnosis and treatment and for special hospital services appropriate to the needs of the community.	1		
		1		
A 0701	The condition of the physical plant and the overall hospital environment must be developed and maintained in such a manner that the safety and well-being of patients are assured.	1		
		1		
A 0709	Life Safety from Fire: The hospital must ensure that the life safety from fire requirements are met.	1		
		1		

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A 0726	There must be proper ventilation, light, and temperature controls in pharmaceutical, food preparation, and other appropriate areas.	1		
		1		
		1		
C 0220	Physical Plant and Environment. This CoP applies to all locations of the CAH, all campuses, all satellites, all provider-based activities, and all inpatient and outpatient locations. The CAH's departments or services responsible for the CAH's building and equipment maintenance (both facility equipment and patient care equipment) must be incorporated into the CAH's QA program and be in compliance with the QA requirements.	1		
		1		
		1		
		1		
C 0226	[The CAH has housekeeping and preventive programs to ensure that- there is proper ventilation, lighting, and temperature control in all pharmaceutical, patient care, and food preparation areas.	1		
		1		

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C 0231	Except as otherwise provided in this section-- (i) the CAH must meet the applicable provisions of the 2000 edition of the Life Safety Code of the National Fire Protection Association. The Director of the Office of the Federal Register has approved the NFPA 101 2000 edition of the Life Safety Code, issued January 14, 2000, for incorporation by reference in accordance with 5 U.S.C. 552(a) and 1 CFR Part 51. A copy of the Code is available for inspection at the CMS Information Resource Center, 7500 Security Boulevard, Baltimore, MD, or at the National Archives and Records Administration (NARA). For information on the availability of this material at NARA, call 202-741-6030, or go to: <a href="http://www.archives.gov/federal_register/code_of_federal-regulations/ibr_locations.html">http://www.archives.gov/federal_register/code_of_federal-regulations/ibr_locations.html</a> . Copies may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02269. If any changes in this edition of the Code are incorporated by reference, CMS will publish notice in the Federal Register to announce the changes. ii) Chapter 19.3.6.3.2, exception number 2 of the adopted edition	1		
		1		
		1		
		1		
K 0011		1		Regs for New Structures
K 0012	Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1	1		Regs for Existing Structures
		1		Regs for Existing Structures

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		1		Regs for Existing Structures
K 0012	Building construction type and height meets one of the following: 18.1.6.2, 18.1.6.3, 18.2.5.1	1		Regs for New Structures
		1		Regs for New Structures
K 0017	Corridors are separated from use areas by walls constructed with at least ½ hour fire resistance rating. In sprinklered buildings, partitions are only required to resist the passage of smoke. In non-sprinklered buildings, walls properly extend above the ceiling. (Corridor walls may terminate at the underside of ceilings where specifically permitted by Code. Charting and clerical stations, waiting areas, dining rooms, and activity spaces may be open to the corridor under certain conditions specified in the Code. Gift shops may be separated from corridors by non-fire rated walls if the gift shop is fully sprinklered.) 19.3.6.1, 19.3.6.2.1, 19.3.6.5	1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0017		1		Regs for New Structures
K 0018	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas are substantial doors, such as those constructed of 1¾ inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in sprinklered buildings are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Doors are provided with a means suitable for keeping the door closed. Dutch doors meeting 19.3.6.3.6 are permitted. 19.3.6.3 Roller latches are prohibited by CMS regulations in all health care facilities.	1		Regs for Existing Structures

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		1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0018	Doors protecting corridor openings are constructed to resist the passage of smoke. Doors are provided with positive latching hardware. Dutch doors meeting 18.3.6.3.6 are permitted. Roller latches are prohibited. 18.3.6.3	1		Regs for New Structures
		1		Regs for New Structures
K 0021	Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure is held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of: a) the required manual fire alarm system; b) local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system; and c) the automatic sprinkler system, if installed. 19.2.2.2.6, 7.2.1.8.2	1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0025	Smoke barriers are constructed to provide at least a one half hour fire resistance rating in accordance with 8.3. Smoke barriers may terminate at an atrium wall. Windows are protected by fire-rated glazing or by wired glass panels and steel frames. A minimum of two separate compartments are provided on each floor. Dampers are not required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems. 19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4	1		Regs for Existing Structures
		1		Regs for Existing Structures

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K 0027	Door openings in smoke barriers have at least a 20-minute fire protection rating or are at least 1¾-inch thick solid bonded wood core. Non-rated protective plates that do not exceed 48 inches from the bottom of the door are permitted. Horizontal sliding doors comply with 7.2.1.14. Doors are self-closing or automatic closing in accordance with 19.2.2.2.6. Swinging doors are not required to swing with egress and positive latching is not required. 19.3.7.5, 19.3.7.6, 19.3.7.7	1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0029	One hour fire rated construction (with ¾ hour fire-rated doors) or an approved automatic fire extinguishing system in accordance with 8.4.1 and/or 19.3.5.4 protects hazardous areas. When the approved automatic fire extinguishing system option is used, the areas are separated from other spaces by smoke resisting partitions and doors. Doors are self-closing and non-rated or field-applied protective plates that do not exceed 48 inches from the bottom of the door are permitted.	1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0029	Hazardous areas are protected in accordance with 8.4. The areas are enclosed with a one hour fire-rated barrier, with a ¾ hour fire-rated door, without windows (in accordance with 8.4). Doors are self-closing or automatic closing in accordance with 7.2.1.8. 18.3.2.1	1		Regs for New Structures
		1		Regs for New Structures
		1		Regs for New Structures

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K 0038	Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1	1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0039		1		Regs for New Structures
K 0045	Illumination of means of egress, including exit discharge, is arranged so that failure of any single lighting fixture (bulb) will not leave the area in darkness. (This does not refer to emergency lighting in accordance with section 7.8.) 19.2.8	1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0047		1		Regs for Existing Structures
K 0048		1		Regs for Existing Structures
K 0051		1		Regs for Existing Structures
K 0056	If there is an automatic sprinkler system, it is installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, to provide complete coverage for all portions of the building. The system is properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. It is fully supervised. There is a reliable, adequate water supply for the system. Required sprinkler systems are equipped with water flow and tamper switches, which are electrically connected to the building fire alarm system. 19.3.5	1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures
		1		Regs for Existing Structures

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		1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0062	Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5	1		Regs for Existing Structures
		1		Regs for Existing Structures
K 0067		1		Regs for Existing Structures
K 0067		1		Regs for New Structures
K 0072		1		Regs for New Structures
K 0075	Soiled linen or trash collection receptacles do not exceed 32 gal (121 L) in capacity. The average density of container capacity in a room or space does not exceed .5 gal/sq. ft (20.4 L/sq m). A capacity of 32 gal (121 L) is not exceeded within any 64 sq ft (5.9 sq. m) area. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gal (121 L) are located in a room protected as a hazardous area when not attended. 18.7.5.5	1		Regs for New Structures
		1		Regs for New Structures
K 0076		1		Regs for New Structures
K 0078		1		Regs for Existing Structures
K 0130		1		Regs for Existing Structures
K 0140		1		Regs for Existing Structures
K 0147	Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2	1		Regs for New Structures
		1		Regs for New Structures
		1		Regs for New Structures

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R 0865	GENERAL. The buildings of the hospital shall be constructed and maintained so that they are functional for diagnosis and treatment and for the delivery of hospital services appropriate to the needs of the community and with due regard for protecting the health and safety of the patients. The provisions of this section apply to all new, remodeled and existing construction unless otherwise noted.		1	
			1	
QAPI		1	1	
C 0336		1		
R 0324			1	
Chief of Service		0	0	
Psychiatric Services		0	0	
Other		0	1	
Z 0022			1	
	Total Federal/State Cites	141	46	
	Total Cites	187		