

ANNUAL REPORT 2016

OFFICE OF PLAN REVIEW AND INSPECTION



**STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES**
Division of Quality Assurance

P-01449 (04/2017)

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EXECUTIVE SUMMARY

The State of Wisconsin Department of Health Services (DHS), Division of Quality Assurance (DQA), Office of Plan Review and Inspection (OPRI) serves the health care building and infrastructure industry. The OPRI team, comprised of seven licensed architects, six professional engineers, and two administrative staff, conducts all federal health care facility surveys, as well as regulatory construction services from predesign through occupancy for the state.

To support economic prosperity and quality of life, DHS exercises multiple roles in the protection and promotion of the health and safety of the citizens of Wisconsin. The mission of DQA is to:

- Protect the health, safety, and welfare of Wisconsin citizens through the survey, certification, and licensure of health care organizations.
- Promote quality health care.
- Provide education, resources, and guidance to regulated facilities.
- Assist in eliminating health disparities in Wisconsin through effective communication, technical assistance, and compliance.

Based on the DQA mission, OPRI follows the DQA guiding principles to:

- Encourage quality health care delivery and protect the rights of citizens receiving services from all regulated health care settings by enforcing regulations and recognizing nationally accepted standards.
- Encourage and support initiatives to improve the quality of care delivered to Wisconsin citizens by engaging stakeholders.

In 2016, OPRI conducted reviews of 1,095 construction documents representing \$726,741,429 of health care construction throughout the State of Wisconsin. OPRI staff conducted 810 federal surveys in hospitals, nursing homes, and surgery centers. Based on long-term care national data provided by The Centers for Medicare and Medicaid Services, the average number of life safety code citations in Wisconsin per recertification survey was 4.42. Wisconsin's top 10 nursing home citations were aligned with both the national and regional metrics.

The Office of Plan Review and Inspection continues to streamline the delivery model across all services. In 2016, OPRI began promoting predesign meetings encouraging all stakeholders to meet prior to construction. Through predesign meetings, OPRI serves as the facilitator bringing all stakeholders together early in the planning phase with the focus on project success all the way through the construction phase. OPRI has maintained an average review time for construction documents below 30 days. Onsite review during construction remains timely based on predesign meetings, project schedules, and expectations.

Henry Kosarzycki, Director
Office of Plan Review and Inspection

WISCONSIN SURVEY COUNTS BY PROVIDER AND SURVEY TYPE
January 1 – December 31, 2016

Surveyor 13596			
Hospital	Surveys: 5 Facilities: 4	Regular Surveys: 3 Follow-up Surveys: 2	
Long-Term Care	Surveys: 134 Facilities: 77	Regular Surveys: 78 Follow-up Surveys: 56	
All Facility Types	Total Surveys: 139 Total Facilities: 81	Total Regular Surveys: 81 Total Follow-up Facilities: 58	
Surveyor 18107			
Ambulatory Surgery Center	Surveys: 6 Facilities: 3	Regular Surveys: 3 Follow-up Surveys: 3	
Hospital	Surveys: 9 Facilities: 2	Regular Surveys: 4 Follow-up Surveys: 5	
Long-Term Care	Surveys: 0 Facilities: 0	Regular Surveys: 0 Follow-up Surveys: 0	
All Facility Types	Total Surveys: 15 Total Facilities: 5	Total Regular Surveys: 7 Total Follow-up Facilities: 8	
Surveyor 21981			
Long-Term Care	Surveys: 137 Facilities: 71	Regular Surveys: 68 Follow-up Surveys: 69	
All Facility Types	Total Surveys: 137 Total Facilities: 71	Total Regular Surveys: 68 Total Follow-up Facilities: 69	
Surveyor 28040			
Long-Term Care	Surveys: 156 Facilities: 83	Regular Surveys: 80 Follow-up Surveys: 76	
All Facility Types	Total Surveys: 156 Total Facilities: 83	Total Regular Surveys: 80 Total Follow-up Facilities: 76	
Surveyor 29942			
Ambulatory Surgery Center	Surveys: 2 Facilities: 1	Regular Surveys: 1 Follow-up Surveys: 1	
Hospital	Surveys: 6 Facilities: 4	Regular Surveys: 4 Follow-up Surveys: 2	
Long-Term Care	Surveys: 57 Facilities: 32	Regular Surveys: 30 Follow-up Surveys: 27	
All Facility Types	Total Surveys: 65 Total Facilities: 37	Total Regular Surveys: 35 Total Follow-up Facilities: 30	
Surveyor 32724			
Ambulatory Surgery Center	Surveys: 9 Facilities: 4	Regular Surveys: 5 Follow-up Surveys: 4	
Hospital	Surveys: 3 Facilities: 2	Regular Surveys: 1 Follow-up Surveys: 2	
Long-Term Care	Surveys: 40 Facilities: 22	Regular Surveys: 19 Follow-up Surveys: 21	
All Facility Types	Total Surveys: 52 Total Facilities: 28	Total Regular Surveys: 25 Total Follow-up Facilities: 27	

Surveyor 22947			
Ambulatory Surgery Center	Surveys: 2 Facilities: 1	Regular Surveys: 2 Follow-up Surveys: 0	
Hospital	Surveys: 10 Facilities: 4	Regular Surveys: 7 Follow-up Surveys: 3	
Long-Term Care	Surveys: 45 Facilities: 29	Regular Surveys: 28 Follow-up Surveys: 17	
All Facility Types	Total Surveys: 57 Total Facilities: 34	Total Regular Surveys: 37 Total Follow-up Surveys: 20	
Surveyor 12316			
Ambulatory Surgery Center	Surveys: 5 Facilities: 2	Regular Surveys: 3 Follow-up Surveys: 2	
Hospital	Surveys: 1 Facilities: 1	Regular Surveys: 1 Follow-up Surveys: 0	
Long-Term Care	Surveys: 2 Facilities: 1	Regular Surveys: 1 Follow-up Surveys: 1	
All Facility Types	Total Surveys: 8 Total Facilities: 4	Total Regular Surveys: 5 Total Follow-up Surveys: 3	
Surveyor 12187			
Ambulatory Surgery Center	Surveys: 2 Facilities: 1	Regular Surveys: 1 Follow-up Surveys: 1	
End-State Renal Dialysis	Surveys: 4 Facilities: 2	Regular Surveys: 3 Follow-up Surveys: 1	
Hospital	Surveys: 12 Facilities: 5	Regular Surveys: 6 Follow-up Surveys: 6	
All Facility Types	Total Surveys: 18 Total Facilities: 8	Total Regular Surveys: 10 Total Follow-up Surveys: 8	
Surveyor 33398			
Ambulatory Surgery Center	Surveys: 0 Facilities: 0	Regular Surveys: 0 Follow-up Surveys: 0	
Long-Term Care	Surveys: 117 Facilities: 59	Regular Surveys: 54 Follow-up Surveys: 52	
All Facility Types	Total Surveys: 108 Total Facilities: 65	Total Regular Surveys: 58 Total Follow-up Surveys: 59	

NATIONAL TOP TEN LIFE SAFETY CODE DEFICIENCIES – 2016

This data is provided by The Centers for Medicare & Medicaid Services.

1	K0353	<p>Sprinkler System Maintenance & Testing</p> <p>Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, <i>Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems</i>. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available.</p>
2	K0511	<p>Utilities – Gas & Electric</p> <p>Equipment using gas or related gas piping complies with NFPA 54, <i>National Fuel Gas Code</i>, electrical wiring and equipment complies with NFPA 70, <i>National Electric Code</i>. Existing installations can continue in service.</p>
3	K0363	<p>Corridor Doors</p> <p>2012 EXISTING Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas shall be 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 fully sprinklered smoke compartments are only required to resist the passage of smoke. Doors shall be provided with a means suitable for keeping the door closed. There is no impediment to the closing of the doors. Clearance between bottom of door and floor covering is not exceeding 1 inch. Roller latches are prohibited by CMS regulations on corridor doors and rooms containing flammable or combustible materials. Powered doors complying with 7.2.1.9 are permissible. Hold open devices that release when the door is pushed or pulled are permitted. Nonrated protective plates of unlimited height are permitted. Dutch doors meeting 19.3.6.3.6 are permitted. Door frames shall be labeled and made of steel or other materials in compliance with 8.3, unless the smoke compartment is sprinklered. Fixed fire window assemblies are allowed per 8.3. In sprinklered compartments there are no restrictions in area or fire resistance.</p>
4	K0321	<p>Hazardous Areas – Enclosure</p> <p>2012 EXISTING Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with ¾ hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. <i>Describe the floor and zone locations of hazardous areas that are deficient</i></p>
5	K0372	<p>Subdivision of Building Spaces – Smoke Barrier</p> <p>2012 EXISTING Smoke barriers shall be constructed to a ½ hour fire resistance rating per 8.5. Smoke barriers shall be permitted to terminate at an atrium wall. Smoke dampers are not required in duct penetrations in fully ducted HVAC systems where an approved sprinkler system is installed for smoke compartments adjacent to the smoke barrier. 19.3.7.3, 8.6.7.1(1) <i>Describe any mechanical smoke control system in REMARKS.</i></p>
6	K0379	<p>Smoke Barrier Door Glazing</p> <p>2012 EXISTING Openings in smoke barrier doors shall be fire-rated glazing or wired glass panels in steel frames. 19.3.7.6, 19.3.7.6.2, 8.5</p>

7	K0914	<p>Electrical Systems – Maintenance & Testing</p> <p>Hospital-grade receptacles at patient bed locations and where deep sedation or general anesthesia is administered are tested after initial installation, replacement or servicing. Additional testing is performed at intervals defined by documented performance data. Receptacles not listed as hospital-grade at these locations are tested at intervals not exceeding 12 months. Line isolation monitors (LIM), if installed, are tested at intervals of ≤ 1 month by actuating the LIM test switch per 6.3.2.6.3.6, which activates both visual and audible alarm. For LIM circuits with automated self-testing, this manual test is performed at intervals ≤ 12 months. LIM circuits are tested per 6.3.3.3.2 after any repair or renovation to the electric distribution system. Records are maintained of required tests and associated repairs or modifications, containing date, room or area tested, and results. 6.3.4 (NFPA 99)</p>
8	K0271	<p>Discharge from Exits</p> <p>Exit discharge is arranged in accordance with 7.7, provides a level walking surface meeting the provisions of 7.1.7 with respect to changes in elevation and shall be maintained free of obstructions. Additionally, the exit discharge shall be a hard packed all-weather travel surface in accordance with CMS Survey and Certification Letter 05-38. 18.2.7, 19.2.7, S&C 05-38</p>
9	K0712	<p>Fire Drills</p> <p>Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 18.7.1.4 through 18.7.1.7, 19.7.1.4 through 19.7.1.7</p>
10	K0345	<p>Fire Alarm System – Testing & Maintenance</p> <p>A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, <i>National Electric Code</i>, and NFPA 72, <i>National Fire Alarm and Signaling Code</i>. Records of system acceptance, maintenance and testing are readily available. 9.7.5, 9.7.7, 9.7.8,</p>

WISCONSIN TOP TEN FEDERAL LIFE SAFETY CODE CITATIONS – 2016

This data is provided by The Centers for Medicare & Medicaid Services.

State Ranking 2016	Tag	Description of Regulation
1	K0353	Maintenance / Inspection / Testing of sprinkler system
2	K0511	Utilities – Gas & Electric
3	K0712	Fire Drills
4	K0363	Corridor Doors
5	K0321	Hazardous Areas – Enclosure
6	K0345	Fire Alarm System – Testing & Maintenance
7	K0914	Electrical Systems – Maintenance & Testing
8	K0372	Subdivision of Building Spaces – Smoke Barrier
9	K0271	Discharge from Exits
10	K0379	Smoke Barrier Door Glazing

NATIONAL AVERAGE LSC CITATIONS PER RECERTIFICATION SURVEY – 2016

This data is provided by The Centers for Medicare & Medicaid Services.

Illinois	9.13
Kansas	6.21
Pennsylvania	6.13
Montana	6.08
Colorado	6.07
Alaska	5.87
Indiana	5.11
California	5.10
Nebraska	5.02
Nevada	4.78
Georgia	4.70
Wyoming	4.69
Maine	4.31
North Carolina	4.17
Utah	4.10
Texas	4.04
Michigan	4.03
National Average	3.93
Tennessee	3.91
Missouri	3.83
Wisconsin	3.83
Alabama	3.78
Iowa	3.77
Minnesota	3.71
Oklahoma	3.69
Idaho	3.67
New York	3.55
Maryland	3.47
Ohio	3.46
District of Columbia	2.94
Arizona	2.92
Oregon	2.92
Washington	2.92
West Virginia	2.89
New Mexico	2.88
Delaware	2.69
Virginia	2.63
North Dakota	2.62
Florida	2.61
Massachusetts	1.98
Louisiana	1.65
Mississippi	1.65
Connecticut	1.62
South Carolina	1.59
South Dakota	1.54
New Jersey	1.46
Kentucky	1.36
New Hampshire	.67
Arkansas	.65
Hawaii	.47
Rhode Island	.40
Vermont	.29

WISCONSIN PLAN REVIEW TOTALS BY FACILITY TYPE
January 1 – December 31, 2016

Month	Provider Type	No. of Projects	Estimated Project Cost
January	CBRF	4	\$ 48,000
	ESRD, ASC, MOB, Hospice – Attached	3	\$ 190,000
	Hospital	68	\$ 35,324,339
	LTC Facility (nursing home)	6	\$ 243,500
	Monthly Totals	81	\$ 35,805,839
February	CBRF	5	\$ 1,821,128
	ESRD, ASC, MOB, Hospice – Attached	3	\$ 70,000
	Hospital	84	\$ 25,992,126
	LTC Facility (nursing home)	13	\$ 6,284,912
	Monthly Totals	105	\$ 34,168,166
March	CBRF	5	\$ 67,000
	Hospital	77	\$ 30,297,989
	LTC Facility (nursing home)	8	\$ 7,721,631
	Monthly Totals	90	\$ 38,086,621
April	CBRF	3	\$ 1,047,250
	ESRD, ASC, MOB, Hospice – Attached	2	
	ESRD, ASC, MOB, Hospice – Satellite	2	\$4,000
	Hospital	76	\$ 21,751,999
	LTC Facility (nursing home)	4	\$ 474,500
	Monthly Totals	87	\$ 23,277,749
May	CBRF	4	\$ 199,200
	ESRD, ASC, MOB, Hospice – Attached	3	
	Hospital	80	\$ 61,991,774
	LTC Facility (nursing home)	8	\$ 1,830,151
	Monthly Totals	95	\$ 64,021,125
June	CBRF	4	\$ 73,500
	ESRD, ASC, MOB, Hospice – Attached	2	\$165,472
	ESRD, ASC, MOB, Hospice – Satellite	2	
	Hospital	103	\$ 42,279,653
	LTC Facility (nursing home)	11	\$ 896,270
	Monthly Totals	122	\$ 43,414,895
July	CBRF	4	\$ 12,500
	ESRD, ASC, MOB, Hospice – Attached	1	\$15,000
	Hospital	73	\$ 83,159,349
	LTC Facility (nursing home)	8	\$ 1,819,986
	Monthly Totals	86	\$ 85,006,835

Month	Provider Type	No. of Projects	Estimated Project Cost
August	CBRF	3	\$490,000
	ESRD, ASC, MOB, Hospice – Attached	2	
	Hospital	85	\$ 73,210,931
	LTC Facility (nursing home)	12	\$ 6,673,573
	Monthly Totals	102	\$ 80,374,504
September	CBRF	3	\$ 5,464
	ESRD, ASC, MOB, Hospice – Attached	2	
	ESRD, ASC, MOB, Hospice – Satellite	1	
	Hospital	72	\$ 113,123,321
	LTC Facility (nursing home)	14	\$ 16,498,068
	Monthly Totals	92	\$ 129,626,853
October	CBRF	3	\$ 1,247,000
	ESRD, ASC, MOB, Hospice – Satellite	2	
	Hospital	86	\$ 171,123,329
	LTC Facility (nursing home)	4	\$ 14,900
	Monthly Totals	95	\$ 172,385,229
November	CBRF	4	\$ 423,898
	ESRD, ASC, MOB, Hospice – Attached	1	\$ 5,000,000
	Hospital	80	\$ 10,846,063
	LTC Facility (nursing home)	11	\$ 224,099
	Monthly Totals	96	\$ 16,494,060
December	CBRF	4	\$ 471,645
	ESRD, ASC, MOB, Hospice – Attached	1	
	Hospital	54	\$ 3,438,709
	LTC Facility (nursing home)	7	\$ 169,200
	Monthly Totals	66	\$ 4,079,554
TOTALS FOR THE PERIOD		1,117	\$ 726,741,429