

	Department of Health Services, State of Wisconsin	
Federal Tags Cited	Regulation Language	Number of Cites
484.18(a) Plan of Care ( G0159)	The plan of care developed in consultation with the agency staff covers all pertinent diagnoses, including mental status, types of services and equipment required, frequency of visits, prognosis, rehabilitation potential, functional limitations, activities permitted, nutritional requirements, medications and treatments, any safety measures to protect against injury, instructions for timely discharge or referral, and any other appropriate items.	5
484.12(c) Compliance w/Accepted Professional Standards (G0121)	The HHA and its staff must comply with accepted professional standards and principles that apply to professionals furnishing services in an HHA.	3
484.48 Clinical Records ( G0236)	A clinical record containing pertinent past and current findings in accordance with accepted professional standards is maintained for every patient receiving home health services. In addition to the plan of care, the record contains appropriate identifying information; name of physician; drug, dietary, treatment, and activity orders; signed and dated clinical and progress notes; copies of summary reports sent to the attending physician; and a discharge summary.	2
484.48 Clinical Records (G0303)	The HHA must inform the attending physician of the availability of a discharge summary. The discharge summary must be sent to the attending physician upon request and must include the patient's medical and health status at discharge.	2
484.14(g) Coordination of Patient Services (G0145)	A written summary report for each patient is sent to the attending physician at least every 60 days.	1
484.18 Acceptance of Patients, POC, Med Super (G0158)	Care follows a written plan of care established and periodically reviewed by a doctor of medicine, osteopathy, or podiatric medicine.	1
484.30 Skilled Nursing Services (G0170)	The HHA furnishes skilled nursing services in accordance with the plan of care.	1
484.30(a) Duties of the Registered Nurse (G0172)	The registered nurse regularly re-evaluates the patients nursing needs.	1
484.20(a) Encoding Oasis Data ( G0321)	The HHA must encode and be capable of transmitting OASIS data for each agency patient within 30 days of completing an OASIS data set.	1
484.20(c) (1) Transmittal of Oasis Data (G0323)	The HHA must electronically transmit accurate, completed, encoded and locked OASIS data for each patient to the State agency or CMS OASIS contractor at least monthly.	1
484.55(d)(2) Update of the Comprehensive Asses (G0340)	The comprehensive assessment must be updated and revised (including the administration of the OASIS) within 48 hours of the patient's return to the home from a hospital admission of 24 hours or more for any reason other than diagnostic tests.	1
484.55(d)(3) Update of the Comprehensive Asses (G0341)	The comprehensive assessment must be updated and revised (including the administration of the OASIS) at discharge.	1
<b>Total Federal Tags Cited for Quarter</b>		<b>20</b>

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State Tags Cited	Code Language	Number of Cites
133.20(2)(a) Plan of Care	CONTENTS OF PLAN. Each plan developed under sub. (1) shall include: (a) Measureable time-specific goals, with benchmark dates for review; and	6
133.20(1) Plan of Care	A plan of care, including physician's or advanced practice nurse prescriber's orders, shall be established for every patient accepted for care and shall be incorporated in the patient's medical record. An initial plan shall be developed within 72 hours of acceptance. The total plan of care shall be developed in consultation with the patient, home health agency staff, contractual providers, and the patient's physician or advanced practice nurse prescriber and shall be signed by the physician or advanced practice nurse prescriber within 20 working days following the patient's admission for care.	3
133.20(4) Plan of Care	ORDERS. Drugs and treatment shall be administered by the agency staff only as ordered by the attending physician or the advanced practice nurse prescriber. The nurse or therapist shall immediately record and sign and date oral orders and obtain the physician's or advanced practice nurse prescriber's countersignature and date within 20 working days.	3
133.20(3) Plan of Care	REVIEW OF PLAN. The total plan of care shall be reviewed by the attending physician or advanced practice nurse prescriber, and appropriate agency personnel as often as required by the patient's condition, but no less often than every 60 days. The agency shall promptly notify the physician or advanced practice nurse prescriber of any changes in the patient's condition that suggest a need to modify the plan of care.	2
133.21(5)(h) Medical Records	Summaries of reviews of the plan of care; and	2
133.21(5)(i) Medical Records	CONTENT. (i) Discharge summary, completed within 30 days following discharge	2
133.05(2)(b)1. Governance-Professional Advisory Body	The advisory group shall: 1. Review annually and make recommendations to the governing body concerning the agency's scope of services offered, admission and discharge policies, medical supervision and plans of care, emergency care, clinical records, personnel qualifications, and program	1
133.03(3)(a) Administration	PERSONNEL POLICIES. The agency shall prepare in writing and review annually the following policies: (a) A system for recruitment, orientation and continuing training of staff; and	1
133.06(3)(b) Administration	PERSONNEL POLICIES. The agency shall prepare in writing and review annually the following policies: (b) A plan for the evaluation of staff in the performance of duties.	1
133.09(3)(b) Discharge Summary	The home health agency shall complete a written discharge summary within 30 calendar days following discharge of a patient. The discharge summary shall include a description of the care provided and the reason for discharge. The home health agency shall place a copy of the discharge summary in the former patient's medical record. Upon request, the home health agency shall provide a copy of the discharge summary to the former patient, the patient's legal representative the attending physician or advanced practice nurse prescriber.	1
133.12 Coordination with other providers	The home health agency shall coordinate its services with any other health or social service providers serving the patient.	1
133.14(2)( c ) Skilled Nursing Services	DUTIES OF THE REGISTERED NURSE. The registered nurse shall: (c) Initiate the plan of care and necessary revisions;	1
133.17(3) Home Health Aide Services-Assignmnets	Home health aides shall be assigned to specific patients by a registered nurse. Written instructions for patient care shall be prepared and updated for the aides at least each 60 days by a registered nurse or appropriate therapist, consistent with the plan of care under s. HSS 133.20. These instructions shall be reviewed by the immediate supervisors with their aides.	1
133.21(1) Medical Records	REQUIREMENT. A medical record shall be maintained on each patient and shall be completely and accurately documented, systematically organized and readily accessible to authorized personnel.	1
133.21(5)(b) Medical Records	CONTENT. (b) Appropriate hospital information (discharge summary, diagnosis, current patient status, post-discharge plan of care);	1
133.21(5)( c ) Medical Records	CONTENT. (c) Patient evaluation and assessment;	1
133.21(5)(e) Medical Records	CONTENT. (e) Physician's or advanced practice nurse prescriber's orders;	1
133.21(5)(f) Medical Records	CONTENT. (f) Medication list and documentation of patient instructions;	1
133.21(6) Medical Records	FORM OF ENTRIES. All entries in the medical record shall be legible, permanently recorded, dated and authenticated with the name and title of the person making the entry.	1

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133.06(5)( c ) Infection control monitor and retraining	Monitor adherence to evidence-based standards of practice related to protective measures. When monitoring reveals a failure to follow evidence-based standards of practice, the home health agency shall provide counseling, education or retraining to ensure staff is adequately trained to complete their job responsibilities.	1
<b>TOTAL STATE TAGS CITED PER QUARTER</b>		<b>32</b>
<b>TOTAL ALL TAGS CITED PER QUARTER</b>		<b>52</b>
	Complaint surveys	5
	Partial Extended	0
	Extended	0
	State licensure only	4
	Federal Initial & Recertification Surveys	7
	Verification Visits	1
	Other	0
<b>TOTAL SURVEYS PERFORMED:</b>		<b>17</b>