

	Department of Health Services, State of Wisconsin	
Federal Tags Cited	Regulation Language	Number of Cites
484.22 Establishment of the Emergency Preparedness Program (EP)	The [facility, except for Transplant Center] must comply with all applicable Federal, State and local emergency preparedness requirements. The [facility] must establish and maintain a comprehensive emergency preparedness program that meets the requirements of this section.*	1
484.22(a) Develop EP Plan, Review and Update Annually	[The [facility] must comply with all applicable Federal, State and local emergency preparedness requirements. The [facility] must develop establish and maintain a comprehensive emergency preparedness program that meets the requirements of this section.] The emergency preparedness program must include, but not be limited to, the following elements:] (a) Emergency Plan. The [facility] must develop and maintain an emergency preparedness plan that must be [reviewed], and updated at least annually.	1
484.22(b) Development of EP Policies and Procedures	(b) Policies and procedures. [Facilities] must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated at least annually.	1
484.22(c) Development of Communication Plan	(c) The [facility] must develop and maintain an emergency preparedness communication plan that complies with Federal, State and local laws and must be reviewed and updated at least annually.	1
484.22(d) EP Training and Testing	(d) Training and testing. The [facility] must develop and maintain an emergency preparedness training and testing program that is based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, policies and procedures at paragraph (b) of this section, and the communication plan at paragraph (c) of this section. The training and testing program must be reviewed and updated at least annually.	1
484.60(c) Promptly alert physicians of changes	The HHA must promptly alert the relevant physician(s) to any changes in the patient's condition or needs that suggest that outcomes are not being achieved and/or that the plan of care should be altered.	1
484.60(c)(3)(i) Revisions communicated to patient and MDs	Any revision to the plan of care due to a change in patient health status must be communicated to the patient, representative (if any), caregiver, and all physicians issuing orders for the HHA plan of care.	1
484.70(a) Prevention	Prevention. The HHA must follow accepted standards of practice, including the use of standard precautions, to prevent the transmission of infections and communicable diseases.	1
484.75(c)(1) Nursing Services Supervised by RN	Nursing services are provided under the supervision of a registered nurse that meets the requirements of §484.115(k).	1
484.80(h)(1)(i) Onsite supervisory visit every 14 days	If home health aide services are provided to a patient who is receiving skilled nursing, physical or occupational therapy, or speech-language pathology services, a registered nurse or other appropriate skilled professional who is familiar with the patient, the patient's plan of care, and the written patient care instructions described in §484.80(g), must make an onsite visit to the patient's home no less frequently than every 14 days. The home health aide does not have to be present during this visit.	1
484.110(a)(3) Goals in the patient's plans of care	Goals in the patient's plans of care and the patient's progress toward achieving them;	1
TOTAL FEDERAL TAGS CITED PER QUARTER		11

	Department of Health Services, State of Wisconsin	
State Tags Cited	Code Language	Number of Cites
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.	2
133.06(4)(c) Administration - Employees	EVALUATION. Every employe shall be evaluated periodically for quality of performance and adherence to the agency's policies and this chapter, in accordance with the written plan of evaluation under sub. (3)(b). Evaluations shall be followed up with appropriate action.	1
133.14(4) Skilled Nursing Services	PRACTICAL NURSING. Nursing services not requiring a registered nurse may be provided by a licensed practical nurse under the supervision of a registered nurse.	1
133.18(1) Supervisory Visits	If a patient receives skilled nursing care, a registered nurse shall make a supervisory visit to each patient's residence at least every 2 weeks. The visit may be made when the home health aide is present or when the home health aide is absent. If the patient is not receiving skilled nursing care, but is receiving another skilled service, the supervisory visit may be provided by the appropriate therapist providing a skilled service.	1
133.20(1) Plan of Care	REQUIREMENT. A plan of care, including physician's, advanced practice nurse prescriber's, or physician assistant'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, advanced practice nurse prescriber, or physician assistant, and shall be signed and dated by the physician, advanced practice nurse prescriber, or physician assistant within 20 working days following the patient's admission for care.	1
133.20(3) Plan of Care	REVIEW OF PLAN. The total plan of care shall be reviewed by the attending physician, advanced practice nurse prescriber, or physician assistant, 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, advanced practice nurse prescriber, or physician assistant of any changes in the patient's condition that suggest a need to modify the plan of care.	1
133.20(4) Plan of Care	ORDERS. Drugs and treatment shall be administered by the agency staff only as ordered by the attending physician, advanced practice nurse prescriber, or physician assistant. The nurse or therapist shall immediately record and sign and date oral orders and obtain the physician's, advanced practice nurse prescriber's, or physician assistant's countersignature and date within 20 working days.	1
133.21(5)(g) Medical Records	CONTENT. (g) Progress notes, as frequently as necessary to document patient status and services	1
TOTAL STATE TAGS CITED PER QUARTER		9
TOTAL ALL TAGS CITED PER QUARTER		20
	Complaint surveys	2
	Partial Extended	0
	Extended	0
	State licensure only	0
	Federal Initial & Recertification Surveys	3
	Verification Visits	1
	Other	0
TOTAL SURVEYS PERFORMED:		6