



Department of Health Services, State of Wisconsin

Hospital Citation Report for April 1, 2014 - June 30, 2014

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Tag	Regulation	# Fed Cites	# State Cites	Special Purpose Regulation Sets	Deficiency #1 Survey Category	Deficiency #2 Survey Category	Deficiency #3 Survey Category	Deficiency #4 Survey Category	Deficiency #5 Survey Category	Deficiency #6 Survey Category	Deficiency #7 Survey Category
Discharge Planning		0	0								
EMTALA		0	0								
Governing Body		0	0								
Swing Bed: Hospital and CAH		0	0								
Infection Control		10	16								
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.	2			Complaint	Complaint					
C 0223	[The CAH has housekeeping and preventive maintenance programs to ensure that--] there is proper routine storage and prompt disposal of trash;	2			Recertification	Recertification, Relicensure					
C 0278	[The policies include the following:] a system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	6			Recertification	Recertification, Relicensure	Recertification, Relicensure, Revisit	Recertification	Recertification, Relicensure	Recertification, Relicensure	
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.		4		Recertification	Recertification, Relicensure	Recertification, Relicensure	Recertification, Relicensure			



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R 0299	Responsibilities. The infection control committee shall: Establish a method of control used in relation to the sterilization and disinfection of instruments, medications, and other items requiring sterility and disinfection. There shall be a written policy requiring identification of sterile items and specified time periods in which sterile items shall be reprocessed;		3		Complaint	Recertification, Relicensure	Recertification, Relicensure				
R 0310	The hospital shall provide training to all appropriate hospital personnel on the epidemiology, etiology, transmission, prevention and elimination of infection, as follows: Aseptic technique. All appropriate personnel shall be educated in the practice of aseptic techniques such as handwashing and scrubbing practices, personal hygiene, masking, dressing, gloving and other personal protective equipment techniques, disinfecting and sterilizing techniques and the handling and storage of patient care equipment and supplies;		3		Complaint	Recertification, Relicensure	Recertification, Relicensure				
R 0313	Sanitary environment. A sanitary environment shall be maintained to avoid sources and transmission of infection		3		Complaint	Recertification	Recertification, Relicensure				
R 0314	Disposal of wastes. Proper facilities shall be maintained and techniques used for incineration or sterilization of infectious wastes, and sanitary disposal of all other wastes.		3		Complaint	Recertification	Recertification, Relicensure				
Medical Record Services		11	11								
A 0955	A properly executed informed consent form for the operation must be in the patient's chart before surgery, except in emergencies.		2		Complaint	Complaint					



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C 0302	The records are legible, complete, accurately documented, readily accessible, and systematically organized.	2			Recertification, Relicensure	Recertification, Relicensure					
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;	2			Recertification, Relicensure	Recertification, Relicensure					
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.	3			Recertification	Recertification, Relicensure	Recertification, Relicensure				
C 0308	The CAH maintains the confidentiality of record information and provides safeguards against loss, destruction, or unauthorized use.	2			Recertification	Recertification					
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.		2		Recertification	Recertification					
R 0443	MEDICAL RECORD. A medical record shall be maintained for every patient admitted for care in the hospital. The record shall be kept confidential and released only in accordance with ss. 146.81 to 146.83, Stats., s. 146.025, Stats., or s. 51.30, Stats., and ch. HFS 92, as appropriate.		2		Recertification	Recertification					



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R 0468	Medical record contents. The medical record staff shall ensure that each patient's medical record contains: Except in an emergency, an appropriate history and physical work-up recorded in the medical record of every patient before surgery;		2		Complaint	Complaint					
R 0496	MATERNITY PATIENT AND NEWBORN RECORDS. Newborn medical record. Each newborn infant shall have a complete hospital record which shall include: A record of pertinent maternal data, labor and delivery, and the condition of the infant at birth;		5		Recertification	Recertification, Relicensure	Recertification, Relicensure	Complaint	Recertification, Relicensure		
Medical Staff		0	2								
R 0378	Content. Medical staff by-laws 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.		2		Recertification, Relicensure	Complaint					
Nursing Services		6	4								
C 0295	A registered nurse must provide (or assign to other personnel) the nursing care of each patient, including patients at a SNF level of care in a swing-bed CAH. The care must be provided in accordance with the patient's needs and the specialized qualifications and competence of the staff available.		2		Recertification	Recertification, Relicensure					



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C 0297	All drugs, biologicals, and intravenous medications must be administered by or under the supervision of a registered nurse, a doctor of medicine or osteopathy, or where permitted by State law, a physician assistant, in accordance with written and signed orders, accepted standards of practice, and Federal and State laws.	2			Recertification, Relicensure	Recertification, Relicensure					
C 0298	A nursing care plan must be developed and kept current for each inpatient.	2			Recertification	Recertification					
R 0417	Care determinants. A registered nurse shall plan, supervise and evaluate the care of all patients, including the care assigned to other nursing personnel.		2		Recertification	Recertification, Relicensure					
R 0433	The nursing service director shall ensure that there is ongoing review and evaluation of the nursing care provided for patients and shall ensure that nursing care standards and objectives are established and met.		2		Complaint	Recertification, Relicensure					
Services: Anesthesia, Emrgcy, Food & Dietetic, Nucl Medicine, Respiratory, Outpt, Radiologic, Rehab & Surgical		4	9								
A 951	Surgical services must be consistent with needs and resources. Policies governing surgical care must be designed to assure the achievement and maintenance of high standards of medical practice and patient care.	2			Complaint	Revisit, Complaint					



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A 1005	[The policies must ensure that the following are provided for each patient:] A post-anesthesia evaluation completed and documented by an individual qualified to administer anesthesia, as specified in paragraph (a) of this section, no later than 48 hours after surgery or a procedure requiring anesthesia services. The post-anesthesia evaluation for anesthesia recovery must be completed in accordance with State law and with hospital policies and procedures, which have been approved by the medical staff and which reflect current standards of anesthesia care.	2			Complaint	Complaint					
R 0658	Hospitals which have surgery, anesthesia, dental or maternity services shall have effective policies and procedures, in addition to those set forth under s. HFS 124.12 (9), relating to the staffing and functions of each service in order to protect the health and safety of the patients.		4		Recertification, Relicensure	Recertification, Relicensure	Complaint	Complaint, Revisit			
R 0673	Anesthesia use requirements. 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 recorded within 48 hours after surgery by the individual who administers the anesthesia.		3		Complaint	Recertification	Complaint				



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R 0810	Medical records. Adequate medical records to permit continuity of care after provision of emergency services shall be maintained on all patients. The emergency room patient record shall contain: a. Patient identification; b. History of disease or injury; c. Physical findings; d. Laboratory and x-ray reports, if any; e. Diagnosis; f. Record of treatment; g. Disposition of the case; h. Authentication as required by s. HFS 124.14(3)(b); and i. Appropriate time notations, including time of the patient's arrival, time of physician notification, time of treatments, including administration of medications, and time of patient discharge or transfer from the service.		2		Recertification, Relicensure	Recertification, Relicensure					



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Pharmaceutical Services		4	7								
C 0276	[The policies include the following:] 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.	4			Recertification	Recertification, Relicensure	Recertification	Recertification, Relicensure			
R 0517	Storage and equipment. Drugs shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation and security. In a pharmacy, current reference materials and equipment shall be provided for the compounding and dispensing of drugs. Hospitals utilizing automated dispensing systems must meet the requirements under Phar 7.09.		5		Complaint	Recertification	Recertification, Relicensure	Recertification	Recertification, Relicensure		
R 0530	Responsibility. All hospitals shall have written policies relating to the selection, intrahospital distribution and handling and safe administration of drugs. The medical staff shall develop and monitor the administration of these policies and procedures in cooperation with the pharmacist and with representatives of other disciplines in the hospital.		2		Complaint	Recertification, Relicensure					



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Organ, Tissue, Eye Procurement		2	0								
C 0345	[The CAH must have and implement written protocols that:] incorporate an agreement with an OPO designated under part 486 of this chapter, under which it must notify, in a timely manner, the OPO or a third party designated by the OPO of individuals whose death is imminent or who have died in the CAH. The OPO determines medical suitability for organ donation and, in the absence of alternative arrangements by the CAH, the OPO determines medical suitability for tissue and eye donation, using the definition of potential tissue and eye donor and the notification protocol developed in consultation with the tissue and eye banks identified by the CAH for this purpose;				Recertification, Relicensure	Recertification, Relicensure					
Patient Rights		0	5								
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;				Complaint	Complaint	Recertification, Relicensure	Recertification, Relicensure	Complaint		



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Physical Environment (all K tags are counted as federal cites)		74	0								
C 0220	Physical Plant and Environment (condition of certification)	7			Recertification, Relicensure, Revisit	Recertification	Recertification, Relicensure	Recertification, Relicensure, Revisit	Recertification	Recertification, Relicensure	Recertification, Relicensure
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: http://www.archives.gov/federal_register/code_of_federal-regulations/ibr_locations.html . 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.	7			Recertification, Relicensure, Revisit	Recertification	Recertification, Relicensure	Recertification, Relicensure, Revisit	Recertification	Recertification, Relicensure	Recertification, Relicensure



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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	4		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit			
K 0017	Corridor walls form a barrier to limit the transfer of smoke. Such walls are permitted to terminate at the ceiling where the ceiling is constructed to limit the transfer of smoke. No fire resistance rating is required for the corridor walls. 18.3.6.1, 18.3.6.2, 18.3.6.5	2		Regs for New Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
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,	6		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit	



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K 0025	Smoke barriers are constructed to provide at least a one-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 in approved 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. 18.3.7.3, 18.3.7.5, 18.1.6.3	2		Regs for New Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
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	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
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. 19.3.2.1	6		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit				



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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	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
K 0038	Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 18.2.1	3		Regs for New Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit				
K 0050	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 PM and 6 AM a coded announcement may be used instead of audible alarms. 19.7.1.2	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
K 0051	A fire alarm system with approved components, devices or equipment is installed according to NFPA 72, National Fire Alarm Code, to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system is by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations in patient sleeping areas may be omitted provided that manual pull stations are within 200 feet of nurse's stations. Pull stations are located in the path of egress. Electronic or written records of tests are available. A reliable second source of power is provided. Fire alarm systems are maintained in accordance with NFPA 72 and records of maintenance are kept readily available. There is remote annunciation of the fire alarm system to an approved central station. 19.3.4, 9.6	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code				



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K 0052	A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit				
K 0054	All required smoke detectors, including those activating door hold-open devices, are approved, maintained, inspected and tested in accordance with the manufacturer's specifications. 9.6.1.3	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
K 0056	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.	4		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit			
K 0056	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.	2		Regs for New Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					



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K0062	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	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
K 0069	Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code					
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. 19.7.5.5	2		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code					
K 0106	Hospitals, and nursing homes and hospices with life support equipment, have a Type I Essential Electrical System powered by a generator with a transfer switch and separate power supply. The EES is in accordance with NFPA 99, 3.4.2.2, 3.4.2.1.4.	2		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code					
K 0130	OTHER LSC DEFICIENCY NOT ON 2786	4		Regs for Existing Structures	Recertification, Life Safety Code, Revisit	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code			
K 0144	Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Revisit					



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Other		2	2								
C 0151	The CAH is in compliance with applicable Federal laws and regulations related to the health and safety of patients.	2			Recertification, Relicensure	Recertification, Relicensure					
Z 0055	Entity's duty to report to the department. Except as provided under pars. (b) and (c), an entity shall report to the department any allegation of an act, omission or course of conduct described in this chapter as client abuse or neglect or misappropriation of client property committed by any person employed by or under contract with the entity if the person is under the control of the entity. The entity shall submit its report on a form provided by the department within 7 calendar days from the date the entity knew or should have known about the misconduct. The report shall contain whatever information the department requires.		2		Complaint	Complaint					
Total Federal/State Cites											
		115	56								
		171									