



Department of Health Services, State of Wisconsin

Hospital Citation Report for April 1, 2016 - June 30, 2016

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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
Discharge Planning		0	0						
EMTALA		0	0						
Governing Body		0	0						
Swing Bed: Hospital and CAH		0	0						
Infection Control		8	17						
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.	4			Recertification	Recertification, Follow-up	Recertification	Recertification, Follow-up, Validation, State Licensure	
C 0278	[The policies include the following:] A system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	4			Recertification	Recertification, Follow-up	Recertification, Follow-up, State Licensure	Recertification, Follow-up, Validation	



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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.		3		Recertification	Recertification, Follow-up	Rcertification, Follow-up, Validation		
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;		5		Recertification	Recertification, Follow-up	Recertification	Rcertification, Follow-up, Validation, State Licensure	Rcertification, Follow-up, Validation
R 0313	Sanitary environment. A sanitary environment shall be maintained to avoid sources and transmission of infection.		5		Recertification	Recertification, Follow-up	Recertification	Rcertification, Follow-up, Validation, State Licensure	Rcertification, Follow-up, State Licensure



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R 0552	Sanitary conditions shall be maintained in the storage, preparation and distribution of food.		2		Rcertification, Follow-up, Validation, State Licensure	Rcertification, Follow-up, State Licensure			
R 0563	All garbage and kitchen refuse not disposed of through a garbage disposal unit shall be kept in watertight metal or plastic containers with close-fitting covers and disposed of daily in a safe and sanitary manner.		2		Recertification	Recertification, Follow-up			
Medical Record Services		6	10						
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			Complaint	Recertification, Follow-up, State Licensure			



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C 0305	[For each patient receiving health care services, the CAH maintains a record that includes, as applicable--] reports of physical examinations, diagnostic and laboratory test results, including clinical laboratory services, and consultative findings;	2			Recertification	Recertification, Follow-up			
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]	2			Recertification	Recertification, Follow-up			
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	Recertification, Follow-up			



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Medical Staff		0	0						
Nursing Services		5	6						
A 0396	The hospital must ensure that the nursing staff develops, and keeps current, a nursing care plan for each patient. The nursing care plan may be part of an interdisciplinary care plan	2			Recertification	Recertification, Follow-up, Validation, State Licensure			
C 0298	A nursing care plan must be developed and kept current for each inpatient.	3			Complaint	Recertification, Follow-up, State Licensure	Complaint		
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.		4		Complaint	Recertification	Recertification, Follow-up, Validation, State Licensure	Complaint	
R 0426	Training. There shall be appropriate, ongoing training programs available to all nursing service personnel to augment their knowledge of pertinent new developments in patient care and to maintain current competence.		2		Complaint	Recertification, State Licensure			



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Services: Anesthesia, Emrgcy, Food & Dietetic, Nucl Medicine, Respiratory, Outpt, Radiologic, Rehab & Surgical		2	8						
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.	2			Recertification, Follow-up, State Licensure	Recertification, Follow-up, Validation			
R 0564	Food and non-food supplies stored in the same room shall be clearly labeled and shall be stored in separate areas.		2		Recertification	Recertification, Follow-up			
R 0576	Cooks and food handlers. Cooks and food handlers shall wear clean outer garments and hair nets or caps, and shall keep their hands clean at all times when engaged in handling food, drink, utensils or equipment.		2		Recertification	Recertification, Follow-up, Validation, State Licensure			
R 0577	Refrigeration. All refrigerators shall have a temperature maintained at or below 40 degrees F. (4 degrees C.).		2		Recertification	Recertification, Follow-up			



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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.		2		Recertification, Follow-up, Validation, State Licensure		Recertification Follow-up, Validation		
Pharmaceutical Services		3	3						
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.	3			Recertification		Recertification, Follow-up, State Licensure		



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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.		3		Recertification	Recertification, Follow-up	Recertification, Follow-up, State Licensure		
Organ, Tissue, Eye Procurement		0	0						
Patient Rights		4	4						
A 0122	At a minimum: The grievance process must specify time frames for review of the grievance and the provision of a response.	2			Recertification	Recertification, Follow-up			
A 0144	The patient has the right to receive care in a safe setting.	2			Recertification	Complaint			



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R 0237	Patient rights and responsibilities. Every hospital shall have written policies established by the governing board on patient rights and responsibilities which shall provide that: Patients shall be treated with consideration, respect and recognition of their individuality and personal needs, including the need for privacy in treatment;		2		Recertification, Validation, Follow-up, State Licensure	Complaint			
R 0250	Patient rights and responsibilities. Every hospital shall have written policies established by the governing board on patient rights and responsibilities which shall provide that: Every patient shall be informed in writing about the hospital's policies and procedures for initiation, review and resolution of patient complaints, including the address where complaints may be filed with the department; and		2		Recertification	Recertification, Follow-up			
Physical Environment (all K tags are counted as federal cites)		46	0						
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.	4			Recertification	Recertification, Follow-up	Recertification	Recertification, Follow-up, Validation, State Licensure	



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A 0709	Life Safety from Fire (Standard) Interpretive Guideline: The hospital must ensure that the life safety from fire requirements are met.	4			Recertification	Recertification, Follow-up	Recertification	Recertification, Follow-up, Validation, State Licensure	
A 0713	The hospital must have procedures for the proper routine storage and prompt disposal of trash.	3			Recertification	Recertification, Follow-up	Recertification, Follow-up, Validation, State Licensure		
C 0221	The CAH is constructed, arranged, and maintained to ensure access to and safety of patients, and provides adequate space for the provision of direct services.	2			Recertification	Recertification, Follow-up			



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K 0018	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 13/4 inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Clearance between bottom of door and floor covering is not exceeding 1 inch. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Hold open devices that release when the door is pushed or pulled are permitted. Doors shall be provided with a means suitable for keeping the door closed. 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 8.2.3.2.1. Roller latches are prohibited by CMS regulations in all health care facilities. 19.3.6.3	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up			
K 0020	Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least one hour. An atrium may be used in accordance with 8.2.5, 8.2.5.6, 19.3.1.1	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up			



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K 0025	Smoke barriers shall be constructed to provide at least a one half hour fire resistance rating and constructed in accordance with 8.3. Smoke barriers shall be permitted to terminate at an atrium wall. Windows shall be protected by fire-rated glazing or by wired glass panels and steel frames. 8.3, 19.3.7.3, 19.3.7.5	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up			
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	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up	Recertification, Life Safety Code		



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K 0050	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. 18.7.1.2, 19.7.1.2	2		Regs for New Structures	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code, Follow-up			



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K 0051	A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. Fire alarm system wiring or other transmission paths are monitored for integrity. Initiation of the fire alarm system is by manual means and by any required sprinkler system alarm, detection device, or detection system. Manual alarm boxes are provided in the path of egress near each required exit. Manual alarm boxes in patient sleeping areas shall not be required at exits if manual alarm boxes are located at all nurse's stations. Occupant notification is provided by audible and visual signals. In critical care areas, visual alarms are sufficient. The fire alarm system transmits the alarm automatically to notify emergency forces in the event of fire. The fire alarm automatically activates required control functions. System records are maintained and readily available. 18.3.4, 19.3.4, 9.6	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up	Recertification, Life Safety Code		



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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	Where required by section 19.1.6, Health care facilities shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with section 9.7. Required sprinkler systems are equipped with water flow and tamper switches which are electrically interconnected to the building fire alarm. In Type I and II construction, alternative protection measures shall be permitted to be substituted for sprinkler protection in specific areas where State or local regulations prohibit sprinklers. 19.3.5, 19.3.5.1, NPFA 13	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up	Recertification, Life Safety Code		
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	2		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code			
K 0067	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	3		Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up	Recertification, Life Safety Code		



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QAPI		6	6						
A 0273	(a) Program Scope: (1) The program must include, but not be limited to, an ongoing program that shows measurable improvement in indicators for which there is evidence that it will improve health outcomes ... (2) The hospital must measure, analyze, and track quality indicators ... and other aspects of performance that assess processes of care, hospital service and operations. (b)Program Data: (1) The program must incorporate quality indicator data including patient care data, and other relevant data, for example, information submitted to, or received from, the hospital's Quality Improvement Organization. (2) The hospital must use the data collected to-- (i) Monitor the effectiveness and safety of services and quality of care; and (3) The frequency and detail of data collection must be specified by the hospital's governing body.	2			Recertification	Recertification, Follow-up			



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A 0286	(a) Standard: Program Scope: (1) The program must include, but not be limited to, an ongoing program that shows measurable improvement in indicators for which there is evidence that it will ... identify and reduce medical errors. (2) The hospital must measure, analyze, and track ...adverse patient events ... (c) Program Activities (2) Performance improvement activities must track medical errors and adverse patient events, analyze their causes, and implement preventive actions and mechanisms that include feedback and learning throughout the hospital. (e) Executive Responsibilities, The hospital's governing body (or organized group or individual who assumes full legal authority and responsibility for operations of the hospital), medical staff, and administrative officials are responsible and accountable for ensuring the following: ...	2			Recertification	Recertification, Follow-up			
C 0336	The CAH has an effective quality assurance program to evaluate the quality and appropriateness of the diagnosis and treatment furnished in the CAH and of the treatment outcomes. The program requires that --	2			Complaint	Recertification, Follow-up, State Licensure			



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R 0327	Monitoring and evaluation of the quality of care given patients shall focus on identifying patient care problems and opportunities for improving patient care.		3		Recertification	Recertification, Follow-up	Recertification, Follow-up, State Licensure		
R 0329	For each of the monitoring and evaluation activities, a hospital shall document how it has used data to initiate changes that improve quality of care and promote more efficient use of facilities and services. Quality assurance activities shall: Emphasize identification and analysis of patterns of patient care and suggest possible changes for maintaining consistently high quality patient care and effective and efficient use of services.		3		Recertification	Recertification, Follow-up	Complaint		
Chief of Service		0	0						
Psychiatric Services		0	0						
Other		2	0						
C 0151	The CAH is in compliance with applicable Federal laws and regulations related to the health and safety of patients.	2			Recertification	Recertification, Follow-up			



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	Total Federal/State Cites	82	54						
	Total Cites	136							