

	Department of Health Services, State of Wisconsin										
Hospital Citation Report for January 1, 2013 - March 31, 2013											
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Discharge Planning		2	0								
A 0837	The hospital must transfer or refer patients, along with necessary medical information, to appropriate facilities, agencies, or outpatient services, as needed, for follow-up or ancillary care.	2			Complaint	Recertification, Licensure					
EMTALA		0	0								

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Infection Control		4	4								
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			Complaint	Revisit	Recertification, Licensure, Physical Environment	Recertification, Licensure			
R 0313	Sanitary environment. A sanitary environment shall be maintained to avoid sources and transmission of infection		4		Complaint	Recertification, Licensure	Revisit	Recertification, Physical Environment			
Medical Record Services		20	4								
A 0449	The medical record must contain information to justify admission and continued hospitalization, support the diagnosis, and describe the patient's progress and response to medications and services.	2			Complaint	Recertification					
A 0450	All patient medical record entries must be legible, complete, dated, timed, and authenticated in written or electronic form by the person responsible for providing or evaluating the service provided, consistent with hospital policies and procedures.	4			Recertification, Licensure	Recertification, Licensure	Complaint	Complaint			
A 0454	i) All orders, including verbal orders, must be dated, timed, and authenticated promptly by the ordering practitioner, except as noted in paragraph (c)(1)(ii) of this section. (ii) For the 5 year period following January 26, 2007, all orders, including verbal orders, must be dated, timed, and authenticated by the ordering practitioner or another practitioner who is responsible for the care of the patient as specified under §482.12(c) and authorized to write orders by hospital policy in accordance with State law.	3			Recertification, Licensure	Recertification, Licensure	Complaint				
A 0457	All verbal orders must be authenticated based upon Federal and State law. If there is no State law that designates a specific timeframe for the authentication of verbal orders, verbal orders must be authenticated within 48 hours.	3			Complaint	Recertification, Licensure	Recertification, Licensure				
A 0467	[All records must document the following, as appropriate:] All practitioner's orders, nursing notes, reports of treatment, medication records, radiology and laboratory reports, and vital signs and other information necessary to monitor the patient's condition.	3			Complaint	Recertification, Licensure	Complaint				

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Medical Staff		0	3									
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.		3		Complaint	Recertification, Licensure	Recertification, Licensure					
Nursing Services		6	13									
A 0395	A registered nursing must supervise and evaluate the nursing care for each patient.	4			Revisit	Complaint	Complaint	Complaint				
C 0298	A nursing care plan must be developed and kept current for each inpatient.	2			Complaint	Recertification, Licensure						
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.		6		Revisit	Complaint	Complaint	Recertification, Licensure	Recertification, Licensure	Complaint		
R 0430	There shall be a written nursing care plan for each patient which shall include the elements of assessment, planning, intervention and evaluation.		5		Complaint	Complaint	Recertification, Licensure	Complaint	Recertification, Licensure			
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		Complaint	Revisit						
Services: Anesthesia. Emrgcv. Food & Dietetic. Nucl Medicine. Respiratory. O		2	8									
A 0622	There must be administrative and technical personnel competent in their respective duties.	2			Revisit	Recertification, Licensure						
R 0552	Sanitary conditions shall be maintained in the storage, preparation and distribution of food.		2		Recertification, Licensure	Recertification, Licensure						
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, Licensure	Recertification, Licensure						

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R 0810	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		Complaints	Recertification, Licensure				
R 0830	When appropriate, planning for patient care shall include assessment by the social work staff of the need to provide services to patients, their families and others designated by the patient in order to help them adjust to illness and to plan for needed post-hospital care.		2		Complaint	Complaint				
Pharmaceutical Services		4	3							
A 0405	Drugs and biologicals must be prepared and administered in accordance with Federal and State laws, the orders of the practitioner or practitioners responsible for the patient's care as specified under §482.12(c), and accepted standards of practice. (1) - All drugs and biologicals must be administered by, or under supervision of, nursing or other personnel in accordance with Federal and State laws and regulations, including applicable licensing requirements, and in accordance with the approved medical staff policies and procedures.	2			Complaint	Recertification, Licensure				
A 0502	All drugs and biologicals must be kept in a secure area, and locked when appropriate.	2			Revisit	Recertification, Licensure				
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, Licensure	Recertification, Licensure	Complaint			

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Organ Tissue, Eye Procurement		0	0									
Patient Rights		12	0									
A 0117	A hospital must inform each patient, or when appropriate, the patient's representative (as allowed under State law), of the patient's rights, in advance of furnishing or discontinuing patient care whenever possible.	3			Complaint	Revisit	Complaint					
A 0123	In its resolution of the grievance, the hospital must provide the patient with written notice of its decision that contains the name of the hospital contact person, the steps taken on behalf of the patient to investigate the grievance, the results of the grievance process, and the date of completion.	3			Complaint	Complaint	Complaint					
A 0131	The patient or his or her representative (as allowed under State law) has the right to make informed decisions regarding his or her care. The patient's rights include being informed of his or her health status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically	4			Complaint	Complaint	Recertification, Licensure	Complaint				
A 0143	The patient has the right to personal privacy.	2			Complaint	Complaint						
Physical Environment (all K tags are counted as federal cites)		55	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			Physical Environment, Revisit	Physical Environment, Revisit	Recertification	Recertification				
A 0701	The condition of the physical plant and the overall hospital environment must be developed and maintained in such a manner that the safety and well-being of patients are assured.	3			Recertification	Physical Environment, Revisit	Physical Environment					
A 0709	Life Safety from Fire	4			Physical Environment, Revisit	Physical Environment, Revisit	Physical Environment, Revisit	Recertification, Licensure, Physical Environment				

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A 0726	There must be proper ventilation, light, and temperature controls in pharmaceutical, food preparation, and other appropriate areas.	3			Physical Environment, Revisit	Recertification, Licensure, Physical Environment	Recertification			
C 0220	Physical Plant and Environment	3			Recertification, Licensure, Physical Environment	Physical Environment, Revisit	Physical Environment, Revisit			
C 0226	The CAH has housekeeping and preventive programs to ensure that- there is proper ventilation, lighting, and temperature control in all pharmaceutical, patient care, and food preparation areas.	2			Recertification, Licensure, Physical Environment	Physical Environment, Revisit				
C 0231	Except as otherwise provided in this section, (b) 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	3			Recertification, Licensure, Physical Environment	Physical Environment, Revisit	Physical Environment, Revisit			
K 0011	If the building has a common wall with a nonconforming building, the common wall is a fire barrier having at least a two-hour fire resistance rating constructed of materials as required for the addition. Communicating openings occur only in corridors and are protected by approved self-closing fire doors. 19.1.1.4.1, 19.1.1.4.2	3		Regs for Existing Structures	Life Safety Code Survey	Physical Environment, Revisit	Life Safety Code Survey			
K 0017	Corridor walls are required to be fire-rated or fire-protected 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	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			

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K 0018	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas are 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 sprinklered buildings are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Doors are provided with a means suitable for keeping the door closed. Dutch doors meeting 19.3.6.3.6 are permitted. 19.3.6.3 Roller latches are prohibited by CMS regulations in all health care facilities.	3		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Revisit	Life Safety Code Survey			
K 0018	Doors protecting corridor openings are constructed to resist the passage of smoke. Doors are provided with positive latching hardware. Dutch doors meeting 18.3.6.3.6 are permitted. Roller latches are prohibited. 18.3.6.3	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
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	2		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey				
K 0029	Hazardous areas are protected in accordance with 8.4. The areas are enclosed with a one hour fire-rated barrier, with a ¾ hour fire-rated door, without windows (in accordance with 8.4). Doors are self-closing or automatic closing in accordance with 7.2.1.8. 18.3.2.1	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
K 0048	There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. 19.7.1.1	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit				

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QAPI		4	0								
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. (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	2			Complaint	Recertification, Licensure					
A 0308	... The hospital's governing body must ensure that the program reflects the complexity of the hospital's organization and services; involves all hospital departments and services (including those services furnished under contract or arrangement) ... The hospital must maintain and demonstrate evidence of its QAPI program for review by CMS	2			Recertification, Licensure	Recertification					
Chief of Service		0	0								
Psychiatric Services		0	0								
Other		0	0								
C 0151	The CAH is in compliance with applicable Federal laws and regulations related to the health and safety of patients.	2			Complaint	Recertification, Licensure					
Total Federal/State Cites		109	35								
Total Cites		144									