Department of Health Services, State of Wisconsin

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Discharge Planning		0	0							
EMTALA		0	0							
Swing Bed: Hospital and CAH		0	0							
Infection Control		4	7							
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			Recertification, Licensure	Recertification, Licensure				
C 0278	[The policies include the following:] a system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	2			Recertification, Licensure	Recertification				
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.		2		Recertification, Licensure	Recertification, Licensure, LSC Validation				
R 0313	Sanitary environment. A sanitary environment shall be maintained to avoid sources and transmission of infection		5		Recertification, Licensure	Complaint	Recertification, Licensure	Recertification	Recertification, Licensure	

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Medical Record Services		10	9							
A 0441	The hospital must have a procedure for ensuring the confidentiality of patient records. Information from or copies of records may be released only to authorized individuals.	2			Recertification, Licensure	Recertification, Licensure				
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.	3			Recertification, Licensure	Complaint	Recertification, Licensure			
C 0302	The records are legible, complete, accurately documented, readily accessible, and systematically organized.	3			Recertification	Revisit	Recertification, Licensure			
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, Licensure	Recertification				
R 0446	Confidentiality. Original medical records may not be removed from the hospital except by authorized persons who are acting in accordance with a court order, a subpoena issued under s. 908.03(6m), Stats., or in accordance with contracted services, and where measures are taken to protect the record from loss, defacement, tampering and unauthorized access.		2		Complaint	Recertification, Licensure				
R 0473	Medical record contents. The medical record staff shall ensure that each patient's medical record contains: A discharge summary including the final diagnosis, the reason for hospitalization, the significant findings, the procedures performed, the condition of the patient on discharge and any specific instructions given the patient or family or both the patient and the family; and		2		Complaint	Recertification, Licensure				
R 0496	AUTHENTICATION OF ALL ENTRIES. Documentation. All entries in medical records by medical staff or other hospital staff shall be legible, permanently recorded, dated and authenticated with the name and title of the person making the entry.		5		Revisit	Recertification, Licensure	Recertification, Licensure	Recertification	Recertification, Licensure, LSC Validation	

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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		Revisit	Recertification	Recertification, Licensure, LSC Validation			
Nursing Services		2	8							
A 0396	The hospital must ensure that the nursing staff develops, and keeps current, a nursing care plan for each patient.	2			Recertification, Licensure	Recertification, Licensure				
R 0430	There shall be a written nursing care plan for each patient which shall include the elements of assessment, planning, intervention and evaluation.		4		Recertification	Recertification, Licensure	Recertification	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.		4		Recertification	Recertification	Complaint	Recertification, Licensure		

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Services: Anesthesia, Emrgcy, Food & Dietetic, Nucl Medicine, Respiratory, C		8	24							
A 0622	There must be administrative and technical personnel competent in their respective duties.	2			Recertification, Licensure	Recertification, Licensure				
A 0951	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			Recertification, Licensure	Recertification, Licensure				
A 1005	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			Recertification, Licensure	Recertification, Licensure				
C 0279	[The policies include the following:] If the CMS furnishes inpatient services, procedures that ensure that the nutritional needs of inpatients are met in accordance with recognized dietary practices and the orders of the practitioner responsible for the care of the patients, and that the requirement of §485.25(i) is met with respect to inpatients receiving posthospital SNF care.	2			Recertification, Licensure	Recertification				
R 0548	Dietary personnel shall have available a manual of regimens for therapeutic diets, approved jointly by the dietitian and medical staff. Diets served to patients shall be in compliance with these established diet regimens.		2		Recertification, Licensure	Recertification				
R 0552	Sanitary conditions shall be maintained in the storage, preparation and distribution of food.		5		Recertification, Licensure	Recertification	Recertification, Licensure	Recertification	Recertification, Licensure and LSC Validation	
R 0554	Equipment and work areas shall be clean and orderly. Effective procedures for cleaning and sanitizing all equipment and work areas shall be consistently followed in order to safeguard the health of the patients.		2		Recertification	Recertification, Licensure				
R 0558	All perishable foods shall be refrigerated at the appropriate temperature and in an orderly and sanitary manner.		2		Recertification	Recertification, 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.		4		Recertification, Licensure	Recertification	Recertification	Recertification, Licensure		
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	Recertification	Recertification, Licensure and LSC Validation Survey	Recertification, Licensure		

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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 re-corded within 48 hours after surgery by the individual who administers the anesthesia.		3		Recertification, Licensure	Recertification, Licensure and LSC Validation Survey	Recertification, Licensure			
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		Recertification, Licensure	Recertification, Licensure				
Pharmaceutical Services		6	6							
A 0491	The pharmacy or drug storage area must be administered in accordance with accepted professional principles.	2			Recertification, Licensure	Recertification, Licensure				
A 0502	All drugs and biologicals must be kept in a secure area, and locked when appropriate.	2			Recertification, Licensure	Recertification, Licensure				
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.	2			Recertification, Licensure	Recertification				
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.		6		Unannounced Recertification, Licensure and LSC Validation Survey	Recertification, Licensure	Recertification	Recertification, Licensure	Recertification	Recertification, Licensure

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Organ Tissue, Eye Procurement		0	0							
Patient Rights		0	6							
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		6		Recertification, Licensure	Recertification	Recertification	Recertification, Licensure and LSC Validation Survey	Complaint	Recertification, Licensure

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Physical Environment (all K tags are counted as federal cites)		167	10							
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.	3			Recertification, Licensure	Recertification, Licensure	Revisit			
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, Licensure	Recertification, Licensure	Revisit			
A 0709	Life Safety from Fire	3			Recertification, Licensure	Recertification, Licensure	Revisit			
A 0722	The hospital must maintain adequate facilities for its services.	2			Recertification, Licensure	Revisit				
A 0726	There must be proper ventilation, light, and temperature controls in pharmaceutical, food preparation, and other appropriate areas.	3			Recertification, Licensure	Recertification, Licensure	Revisit			
C 0220	Physical Plant and Environment	4			Revisit	Recertification, Licensure	Recertification	Revisit		
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	Revisit				
C 0231	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	2			Recertification	Recertification, Licensure				
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	Life Safety Code Revisit	Life Safety Code Survey			
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. 18.1.1.4.1, 18.1.1.4.2	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
K 0012	Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0012	Building construction type and height meets one of the following: 18.1.6.2, 18.1.6.3, 18.2.5.1	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit				

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K 0015	Interior finish for rooms and spaces not used for corridors or exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings, has a flame spread rating of Class A or Class B. (In fully sprinklered buildings, flame spread rating of Class A, Class B, or Class C may be continued in use within rooms separated in accordance with 19.3.6 from the access corridors.) 19.3.3.1, 19.3.3.2	3		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey			
K 0017	Corridors are separated from the area 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	3		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey			
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	4		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey		
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 Survey	Life Safety Code Survey	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 Survey	Life Safety Code Revisit			
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 8.2.5.6. 19.3.1.1.	3		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey			
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 two hours connecting four stories or more. (One hour for single story building and sprinklered buildings up to three stories in height.) 18.3.1.1. An atrium may be used in accordance with 8.2.2.3.5.	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			

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K 0021	Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure is held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of: a) the required manual fire alarm system; b) local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system; and c) the automatic sprinkler system, if installed. 19.2.2.2.6, 7.2.1.8.2	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey			
K 0022	Access to exits is marked by approved, readily visible signs in all cases where the exit or way to reach exit is not readily apparent to the occupants. 7.10.1.4	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey			
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, 19.1.6.3, 19.1.6.4	5		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Revisit	Life Safety Code Survey	
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	Life Safety Code Survey	Life Safety Code Survey				
K 0026	Space is provided on each side of smoke barriers to adequately accommodate those occupants served. 18.3.7.4	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit				
K 0027	Door opening 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	Life Safety Code Survey	Life Safety Code Survey				
K 0027	Door opening 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. Swinging doors are arranged so that each door swings in an opposite direction. Doors are self-closing and rabbets, bevels or astragals are required at the meeting edges. Positive latching is not required. 18.3.7.5, 18.3.7.6, 18.3.7.8	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey			

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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	4		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit	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 3/4 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	4		Regs for New Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey		
K 0032	Not less than two exits, remote from each other, are provided for each floor or fire section of the building. Only one of these two exits may be a horizontal exit. 19.2.4.1, 19.2.4.2	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0033	Exit components (such as stairways) are enclosed with construction having a fire resistance rating of at least one hour, are arranged to provide a continuous path of escape, and provide protection against fire or smoke from other parts of the building. 8.2.5.2, 19.3.1.1	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0033	Exit components (such as stairways) in buildings four stories or more are enclosed with construction having fire resistance rating of at least two hours, are arranged to provide a continuous path of escape, and provide protection against fire and smoke from other parts of the building. In all buildings less than four stories, the enclosure is at least one hour. 8.2.5.4, 18.3.1.1	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit				
K 0037	Every exit and exit access is arranged so that no corridor, aisle or passageway has a pocket or dead-end exceeding 30 feet. 18.2.5.10	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit				
K 0038	Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1	5		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey	
K 0038	Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 18.2.1	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0039	Width of aisles or corridors (clear and unobstructed) serving as exit access in hospitals and nursing homes is at least 8 feet. In limited care facilities and psychiatric hospitals, width of aisles or corridors is at least 6 feet. 18.2.3.3, 18.2.3.4	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Revisit			
K 0042	Any room or suite of rooms of more than 1,000 sq. ft. has at least 2 exit access doors remote from each other. 19.2.5.2	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0043	Patient room doors are arranged so that the patient can open the door from inside without using a key. (Special door locking arrangements are permitted in mental health facilities.) 19.2.2.2.2	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0044	Horizontal exits, if used, are in accordance with 7.2.4. 19.2.2.5	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit				
K 0046	Emergency lighting of at least 1½ hour duration is provided in accordance with 7.9. 19.2.9.1.	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				

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K 0047	Exit and directional signs are displayed in accordance with section 7.10 with continuous illumination also served by the emergency lighting system. 19.2.10.1	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
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	2		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey				
K 0051	A fire alarm system with approved components, devices or equipment is installed according to NFPA 72, 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 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, National Fire Alarm Code, and records of maintenance are kept readily available. There is remote annunciation of the fire alarm system to an approved central station. 18.3.4, 9.6	4		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey		
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	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0056	If there is an automatic sprinkler system, it is installed in 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. 19.3.5	5		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey	

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K 0056	accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, with approved components, devices, and equipment, to provide complete coverage of all portions of the facility. The system is maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. There is a reliable, adequate water supply for the system. The system is equipped with waterflow and tamper switches which are connected to the fire alarm system. 18.3.5.	4		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey		
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	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
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	4		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey		
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. 9.2, 18.5.2.1, 18.5.2.2, NFPA 90A	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0075	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	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey			
K 0075	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. 18.7.5.5	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Revisit				
K 0076	in accordance with NFPA 99, Standards for Health Care Facilities. (a) Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation. (b) Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99 4.3.1.1.2, 19.3.2.4	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0077	Piped in medical gas systems comply with NFPA 99, Chapter 4.	2		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey				
K 0077	Piped in medical gas systems comply with NFPA 99, Chapter 4.	2		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0103	Interior walls and partitions in buildings of Type I or Type II construction are noncombustible or limited-combustible materials. 19.1.6.3	4		Regs for Existing Structures	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey		

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K 0130	OTHER LSC DEFICIENCY NOT ON 2786	2		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Survey				
K 0130	OTHER LSC DEFICIENCY NOT ON 2786	5		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey	Life Safety Code Revisit	
K 0144	Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
K 0147	Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2	3		Regs for Existing Structures	Life Safety Code Survey	Life Safety Code Revisit	Life Safety Code Survey			
K 0147	Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2	3		Regs for New Structures	Life Safety Code Survey	Life Safety Code Survey	Life Safety Code Survey			
R 0865	GENERAL. The buildings of the hospital shall be constructed and maintained so that they are functional for diagnosis and treatment and for the delivery of hospital services appropriate to the needs of the community and with due regard for protecting the health and safety of the patients. The provisions of this section apply to all new, remodeled and existing construction unless otherwise noted.		3		Recertification, Licensure	Recertification	Recertification, Licensure, LSC Validation			
R 0890	A utility room for soiled linen and other soiled articles shall be readily accessible to each nursing unit. The room shall include at least: 1. A clinical sink or equivalent flush rim fixture; 2. A handwashing sink; 3. A work counter; 4. A waste receptacle; and 5. A linen receptacle.		2		Life Safety Code Survey	Life Safety Code Revisit				
R 0941	Walls and Ceilings. Patient room and patient care areas shall have walls and ceilings with smooth, washable surfaces. The walls and ceilings shall be kept in good repair. Loose, cracked or peeling wallpaper and paint on walls and ceilings shall be replaced or repaired. Washable ceilings shall be provided in surgery rooms, delivery rooms, the nursery, intensive care units, recovery rooms, kitchens, dishwashing rooms, janitor closets and utility rooms.		5		Recertification, Licensure	Life Safety Code Survey	Life Safety Code Revisit	Recertification, Licensure, LSC Validation	Recertification, Licensure	

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QAPI		4	3							
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			Revisit	Recertification, Licensure				
C 0337	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- all patient care services and other services affecting patient health and safety are evaluated.	2			Recertification, Licensure	Recertification				
R 0324	As part of the quality assurance program, the chief executive officer and chief of the medical staff shall ensure that: The hospital's quality assurance program is implemented and effective for all patient care related services;		3		Recertification, Licensure	Recertification, Licensure, LSC Validation	Recertification			
Chief of Service		0	0							
Psychiatric Services		2	0							
B 0122	The written plan must include the specific treatment modalities utilized.	2			Revisit	Revisit				
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			Revisit	Revisit				
	Total Federal/State Cites	205	76							
	Total Cites	281								