



**Hospital Citation Report for July 1, 2019 - September 30, 2019**  
 (Tags must have been cited twice or more during the period to be entered in this roster.)

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
<b>Discharge Planning</b>		0	0					
<b>EMTALA</b>		11	0					
A 2400	[The provider agrees,] in the case of a hospital as defined in §489.24(b), to comply with §489.24.	4			Complaint	Complaint	Complaint	Complaint
A 2402	[The provider agrees,] in the case of a hospital as defined in §489.24(b), to post conspicuously in any emergency department or in a place or places likely to be noticed by all individuals entering the emergency department, as well as those individuals waiting for examination and treatment in areas other than traditional emergency departments (that is, entrance, admitting area, waiting room, treatment area) a sign (in a form specified by the Secretary) specifying the rights of individuals under section 1867 of the Act with respect to examination and treatment for emergency medical conditions and women in labor; and to post conspicuously (in a form specified by the Secretary) information indicating whether or not the hospital or rural primary care hospital (e.g., critical access hospital) participates in the Medicaid program under a State plan approved under Title XIX.	3			Complaint	Complaint	Complaint	

<b>Hospital Citation Report for July 1, 2019 - September 30, 2019</b> (Tags must have been cited twice or more during the period to be entered in this roster.)								
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
A 2406	<p><u>Applicability of provisions of this section.</u> (1) In the case of a hospital that has an emergency department, if an individual (whether or not eligible for Medicare benefits and regardless of ability to pay) "comes to the emergency department", as defined in paragraph (b) of this section, the hospital must (i) provide an appropriate medical screening examination within the capability of the hospital's emergency department, including ancillary services routinely available to the emergency department, to determine whether or not an emergency medical condition exists. The examination must be conducted by an individual(s) who is determined qualified by hospital bylaws or rules and regulations and who meets the requirements of §482.55 of this chapter concerning emergency services personnel and direction; and b) If an emergency medical condition is determined to exist, provide any necessary stabilizing treatment, as defined in paragraph (d) of this section, or an appropriate transfer as defined in paragraph (e) of this section. If the hospital admits the individual as an inpatient for further treatment, the hospital's obligation under this section ends, as specified in paragraph (d)(2) of this section. (2) <u>Nonapplicability of provisions of this section.</u> Sanctions under this section for inappropriate transfer during a national emergency or for the direction or relocation of an individual to receive medical screening at an alternate location do not apply to a hospital with a dedicated emergency department located in an emergency area, as specified in section 1135(g)(1) of the Act. A waiver of these sanctions is limited to a 72-hour period beginning upon the implementation of a hospital disaster protocol, except that, if a public health emergency involves a pandemic infectious disease (such as pandemic influenza), the waiver will continue in effect until the termination of the applicable declaration of a public health emergency, as provided for by section 1135(e)(1)(B) of the Act. (c) <u>Use of Dedicated Emergency Department for Nonemergency Services</u> If an individual comes to a hospital's dedicated emergency department and a request is made on his or her behalf for examination or treatment for a medical condition, but the nature of the request makes it clear that the medical condition is not of an emergency nature, the hospital is required only to perform such screening as would be appropriate for any individual presenting in that manner, to determine that the individual does not have an emergency medical condition.</p>	2			Complaint	Complaint		



**Hospital Citation Report for July 1, 2019 - September 30, 2019**  
(Tags must have been cited twice or more during the period to be entered in this roster.)

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
A 2407	<p><u>(1) General.</u> Subject to the provisions of paragraph (d)(2) of this section, if any individual (whether or not eligible for Medicare benefits) comes to a hospital and the hospital determines that the individual has an emergency medical condition, the hospital must provide either - (i) within the capabilities of the staff and facilities available at the hospital, for further medical examination and treatment as required to stabilize the medical condition. (ii) For for transfer of the individual to another medical facility in accordance with paragraph (e) of this section.</p> <p><u>(2) Exception: Application to inpatients.</u> (i) If a hospital has screened an individual under paragraph (a) of this section and found the individual to have an emergency medical condition, and admits that individual as an inpatient in good faith in order to stabilize the emergency medical condition, the hospital has satisfied its special responsibilities under this section with respect to that individual</p> <p>(ii) This section is not applicable to an inpatient who was admitted for elective (nonemergency) diagnosis or treatment.</p> <p>(iii) A hospital is required by the conditions of participation for hospitals under Part 482 of this chapter to provide care to its inpatients in accordance with those conditions of participation.</p> <p><u>(3) Refusal to consent to treatment.</u> A hospital meets the requirements of paragraph (d)(1)(i) of this section with respect to an individual if the hospital offers the individual the further medical examination and treatment described in that paragraph and informs the individual (or a person acting on the individual's behalf) of the risks and benefits to the individual of the examination and treatment, but the individual (or a person acting on the individual's behalf) does not consent to the examination or treatment. The medical record must contain a description of the examination, treatment, or both if applicable, that was refused by or on behalf of the individual. The hospital must take all reasonable steps to secure the individual's written informed refusal (or that of the person acting on his or her behalf). The written document should indicate that the person has been informed of the risks and benefits of the examination or treatment, or both.</p>	2			Complaint	Complaint		
<b>Governing Body</b>		2	0					
C 0271	The CAH's health care services are furnished in accordance with appropriate written policies that are consistent with applicable State law.	2			Complaint	Complaint		
<b>Swing Bed: Hospital and CAH</b>		0	0					
<b>Infection Control</b>		2	0					
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, Relicensure, Other	Recertification, Relicensure, Follow-up		



**Hospital Citation Report for July 1, 2019 - September 30, 2019**  
 (Tags must have been cited twice or more during the period to be entered in this roster.)

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
<b>Medical Record Services</b>		0	0					
<b>Medical Staff</b>		0	0					
<b>Nursing Services</b>		3	0					
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.	3			Complaint	Complaint	Complaint	

Hospital Citation Report for July 1, 2019 - September 30, 2019 (Tags must have been cited twice or more during the period to be entered in this roster.)								
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
Services: Anesthesia, Emrgcy, Food & Dietetic, Nucl Medicine, Respiratory, Outpt, Rehab & Surgical		0	0					
Organ, Tissue, Eye Procurement		0	0					
Patients' Rights		11	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	Complaint	Complaint	
A 0123	At a minimum: 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 unnecessary or inappropriate.	2			Complaint	Complaint		
A 0145	The patient has the right to be free from all forms of abuse or harassment.	3			Complaint	Complaint	Complaint	
Physical Environment (all K tags are counted as federal cites)		10	0					
C 0202	Equipment, supplies and medication used in treating emergency cases are kept at the CAH and are readily available for treating emergency cases. The items available must include the following:	2			Recertification, Relicensure, Other	Recertification, Relicensure, Follow-up		
C 0220	Physical Plant and Environment	2			Recertification, Relicensure, Other	Recertification, Relicensure, Follow-up		
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, Relicensure, Other	Recertification, Relicensure, Follow-up		
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, Relicensure, Other	Recertification, Relicensure, Follow-up		

