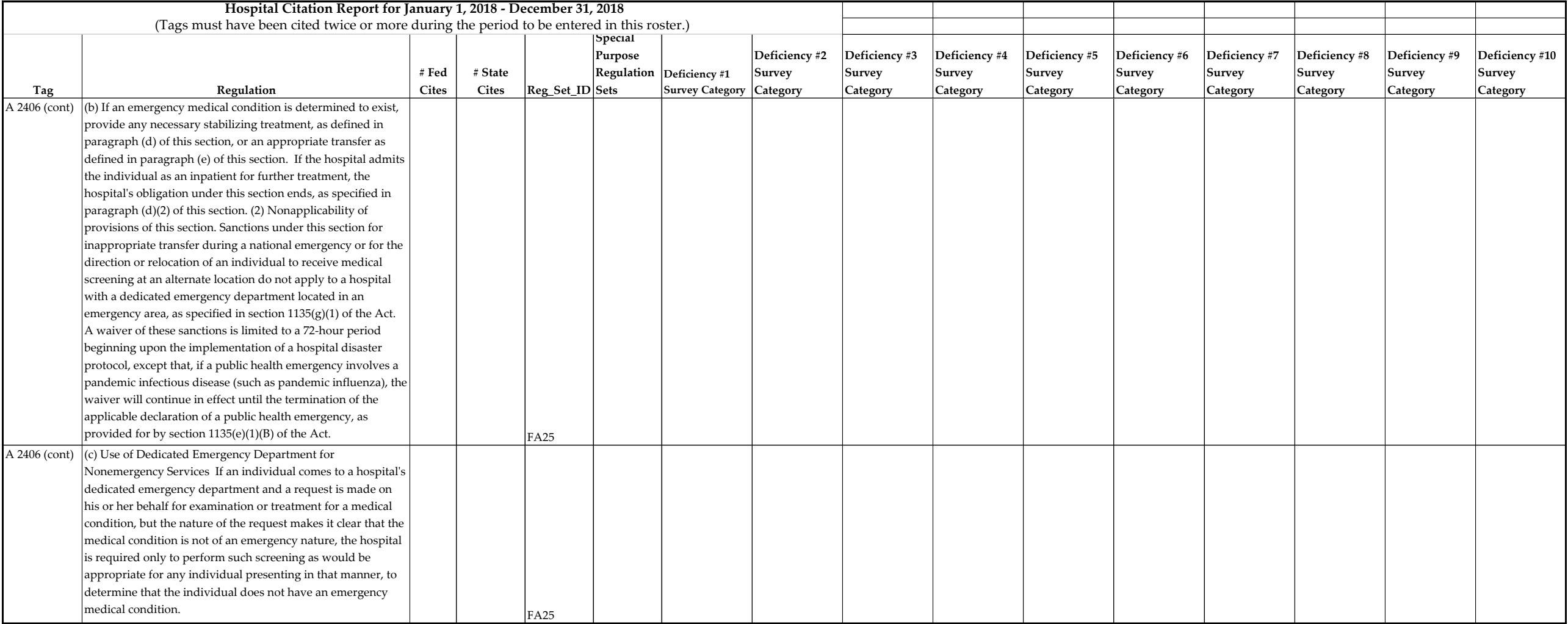
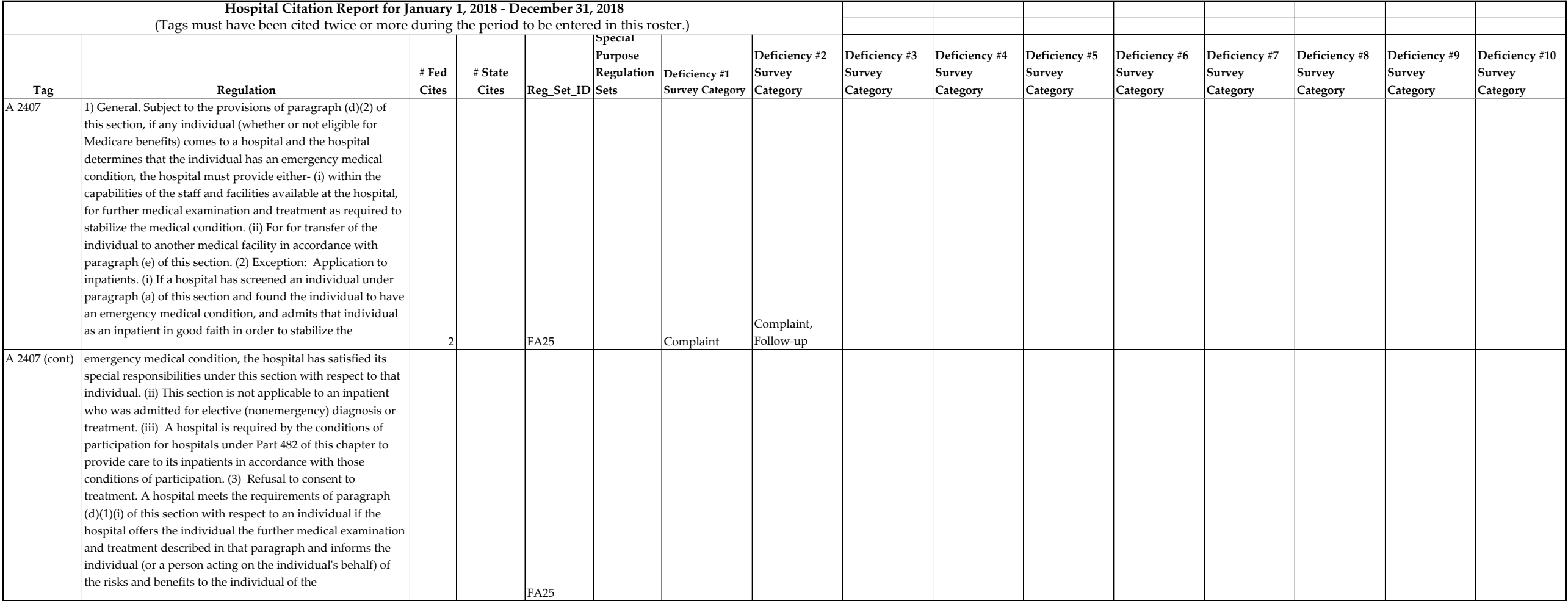


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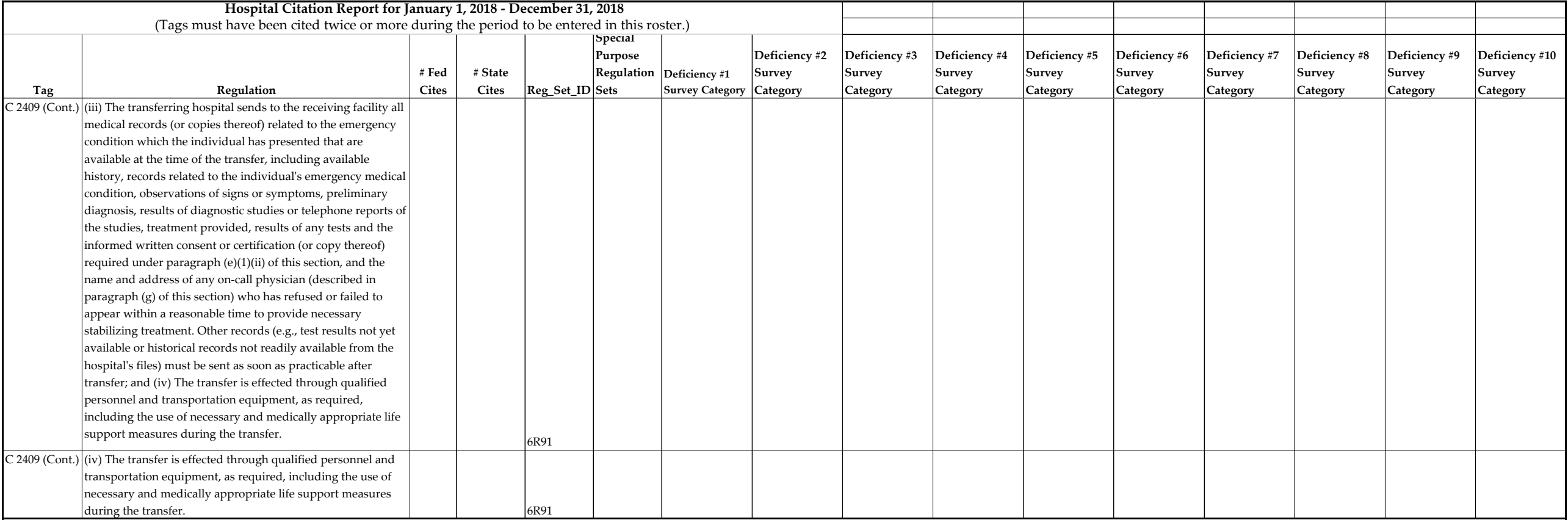
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A 2407 (cont)	examination and treatment, but the individual (or a person acting on the individual's behalf) does not consent to the examination or treatment. The medical record must contain a description of the examination, treatment, or both if applicable, 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.			FA25											
C 0378	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Transfer, and discharge rights (§483.10(a)(5)): "(i) Except when specified in paragraph (a)(5)(ii) of this section, the notice of transfer or discharge required under paragraph (a)(4) of this section must be made by the facility at least 30 days before the resident is transferred or discharged. (ii) Notice may be made as soon as practicable before transfer or discharge when- (A) the safety of individuals in the facility would be endangered under paragraph (a)(2)(iii) of this section; (B) The health of individuals in the facility would be endangered, under paragraph (a)(2)(iv) of this section; (C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (a)(2)(ii) of this section;	2		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure								
C 0378 (cont.)	(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (a)(2)(i) of this section; or (E) A resident has not resided in the facility for 30 days.			6R91											
C 0379	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Transfer, and discharge rights (§483.12(a)(6)): The written notice specified in paragraph (a)(4) of this section must include the following: (i) The reason for transfer or discharge; (ii) The effective date of transfer or discharge; (iii) The location to which the resident is transferred or discharged;	6		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification	Recertification	Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure				

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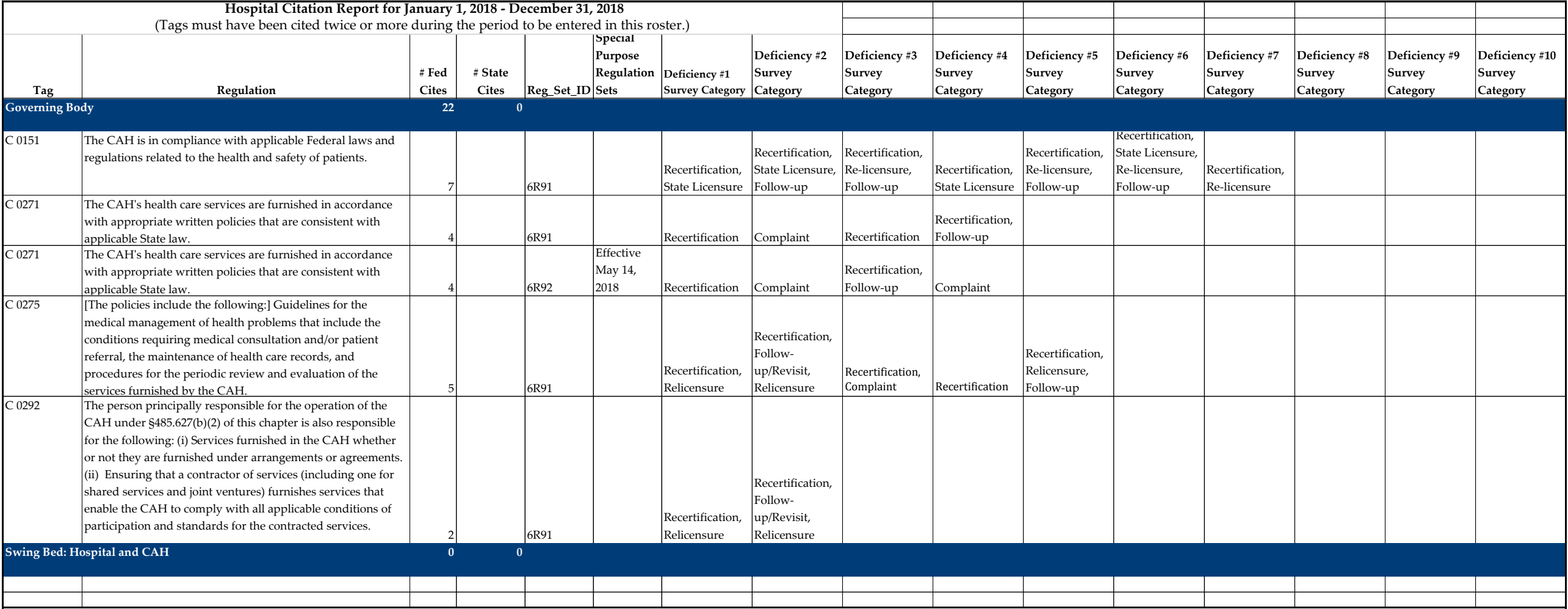
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Infection Control		32	0													
A 0747	The hospital must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases. There must be an active program for the prevention, control, and investigation of infections and communicable diseases.	2		FA25		Complaint	Recertification, Validation, Relicensure									
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.	13		FA25		Recertification	Recertification, Validation	Complaint	Complaint	Recertification, Validation, Relicensure	Complaint	Recertification	Recertification, Follow-up	Recertification, Complaint	Recertification	
A 0756	Standard: Responsibilities of Chief Executive Officer, Medical Staff, and Director of Nursing Services: The chief executive officer, the medical staff, and the director of nursing must-- (1) Ensure that the hospital-wide quality assessment and performance improvement (QAPI) program and training programs address problems identified by the infection control officer or officers; and (2) Be responsible for the implementation of successful corrective action plans in affected problem areas.	2		FA25		Recertification, Complaint	Complaint									
C 0278	[The policies include the following:] A system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	15		6R91		Recertification, Relicensure	Recertification, Relicensure, Follow-up	Recertification	Recertification, Licensure, Relicensure, Follow-up	Recertification, Complaint	Recertification	Recertification, Relicensure, Follow-up	Recertification, Relicensure	Recertification	Recertification, Licensure	

Hospital Citation Report for January 1, 2018 - De														
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C 0278	[The policies include the following:] A system for identifying, reporting, investigating and controlling infections and communicable diseases of patients and personnel.	15		Recertification, Licensure, Follow-up	Recertification	Recertification, Follow-up	Recertification, Licensure, Follow-up	Recertification						

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Medical Record Services		43	0												
A 0438	The hospital must maintain a medical record for each inpatient and outpatient. Medical records must be accurately written, promptly completed, properly filed and retained, and accessible. The hospital must use a system of author identification and record maintenance that ensures the integrity of the authentication and protects the security of all record entries.	2		FA26	Effective February 1, 2018	Recertification, Complaint, Validation	Complaint								
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, and the hospital must ensure that unauthorized individuals cannot gain access to or alter patient records. Original medical records must be released by the hospital only in accordance with Federal or State laws, court orders, or subpoenas.	3		FA25		Recertification, Validation	Recertification	Complaint							
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.	3		FA25		Complaint	Recertification	Recertification, Follow-up							
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.	5		FA25		Recertification, Validation, Relicensure	Complaint	Recertification	Recertification, Relicensure	Recertification, Relicensure, Follow-up					
A 0454	All orders, including verbal orders, must be dated, timed, and authenticated promptly by the ordering practitioner or by another practitioner who is responsible for the care of the patient only if such a practitioner is acting in accordance with State law, including scope-of-practice laws, hospital policies, and medical staff bylaws, rules, and regulations.	6		FA25		Recertification, Validation, Relicensure	Complaint	Recertification, Relicensure	Recertification, Validation, Relicensure	Recertification	Recertification, Relicensure, Follow-up				
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.	2		FA25		Complaint	Complaint								

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A 0631	A current therapeutic diet manual approved by the dietitian and medical staff must be readily available to all medical, nursing, and food service personnel.	2		FA25		Recertification	Recertification, Follow-up								
C 0301	The CAH maintains a clinical records system in accordance with written policies and procedures.	2		6R91		Recertification, State Licensure	Recertification, State Licensure, Follow-up								
C 0302	The records are legible, complete, accurately documented, readily accessible, and systematically organized.	5		6R91		Recertification, State Licensure	Recertification, State Licensure, Follow-up	Recertification, State Licensure, Follow-up	Recertification, Relicensure	Recertification					
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;	3		6R91		Complaint	Recertification, Licensure, Relicensure, Follow-up	Recertification							
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		6R91		Recertification, State Licensure	Recertification, State Licensure, Follow-up								
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.	4		6R91		Recertification, State Licensure	Recertification, State Licensure, Follow-up	Recertification, State Licensure, Follow-up	Recertification, Relicensure						
C 0308	The CAH maintains the confidentiality of record information and provides safeguards against loss, destruction, or unauthorized use.	4		6R91		Recertification	Recertification, Complaint	Recertification, Follow-up	Recertification, Follow-up						

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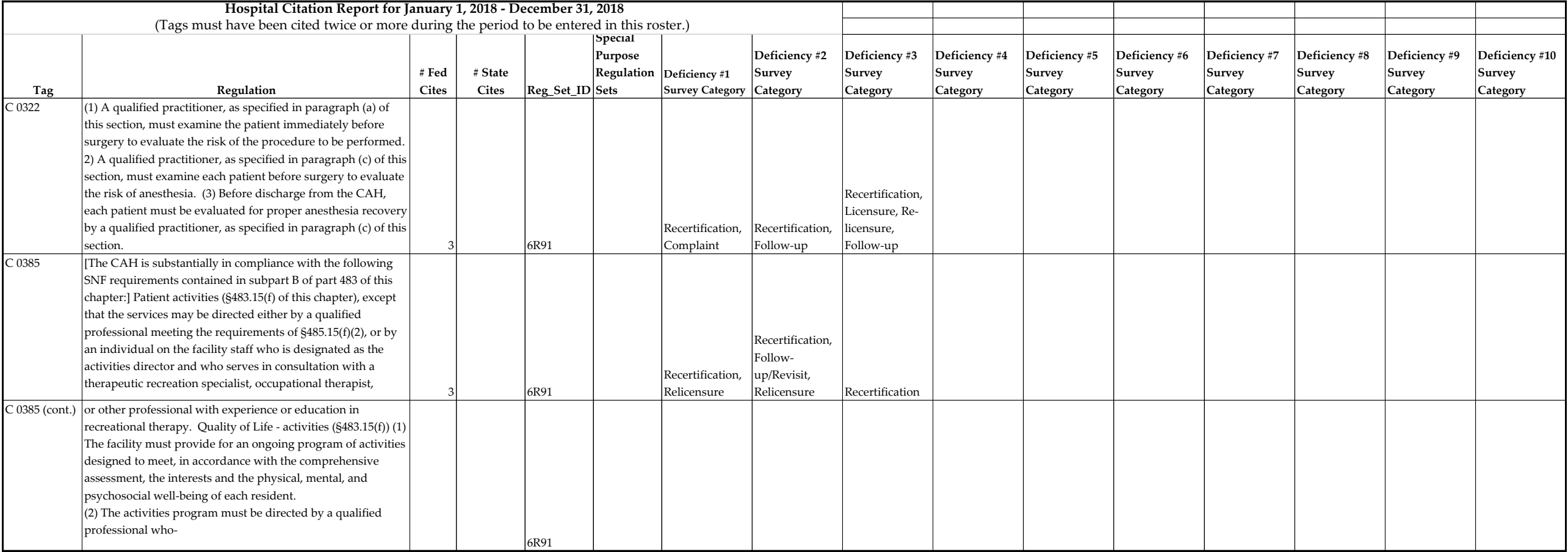
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Medical Staff		9	2												
A 0622	There must be administrative and technical personnel competent in their respective duties.	7		FA25		Recertification	Recertification, Validation, Relicensure	Recertification	Recertification, Relicensure	Recertification, Follow-up	Recertification, Follow-up	Recertification, Relicensure, Follow-up			
C 0270	Provision of Services. Interpretive Guidelines: This condition establishes requirements related to patient care policies, required CAH services, and CAH services provided through agreements or arrangements. Assessment of the manner and degree of noncompliance with any one of the following standards in this condition is required in order to determine whether there is noncompliance with this condition.	2		6R91		Recertification	Recertification								
Z 0014	Every entity shall maintain, or shall contract with another person to maintain, the most recent background information obtained on a caregiver under par. (b). The information shall be made available for inspection by authorized persons, as defined by the department by rule.			2 BVI3		Recertification, Complaint	Recertification, Follow-up								
Nursing Services		43	0												
A 0385	The hospital must have an organized nursing service that provides 24-hour nursing services. The nursing services must be furnished or supervised by a registered nurse.	3		FA25		Complaint	Complaint, Follow-up	Complaint							
A 0392	The nursing service must have adequate numbers of licensed registered nurses, licensed practical (vocational) nurses, and other personnel to provide nursing care to all patients as needed. There must be supervisory and staff personnel for each department or nursing unit to ensure, when needed, the immediate availability of a registered nurse for bedside care of any patient.	3		FA25		Recertification, Validation, Relicensure	Recertification	Recertification, Follow-up							
A 0395	A registered nurse must supervise and evaluate the nursing care for each patient.	6		FA25		Complaint	Complaint	Complaint	Complaint, Follow-up	Recertification, Relicensure	Recertification, Relicensure,				
A 0395	A registered nurse must supervise and evaluate the nursing care for each patient.	2		FA26	Effective February 1,	Complaint	Complaint								
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.	10		FA25		Complaint	Complaint	Recertification, Validation, Relicensure	Complaint	Recertification, Complaint	Complaint	Recertification	Recertification, Follow-up	Recertification, Relicensure	Recertification, Relicensure, Follow-up

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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		FA26	Effective February 1, 2018	Recertification, Complaint, Validation	Complaint	Complaint								
C 0296	A registered nurse or, where permitted by State law, a physician assistant, must supervise and evaluate the nursing care for each patient, including patients at a SNF level of care in a swing-bed CAH.	6		6R91		Recertification, Complaint	Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification, Relicensure	Recertification, Follow-up	Recertification, Follow-up/Revisit, Relicensure					
C 0298	A nursing care plan must be developed and kept current for each inpatient.	10		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification, Follow-up	Recertification	Recertification, Complaint	Recertification, Relicensure	Recertification, Licensure	Recertification, Licensure, Follow-up	Recertification, Follow-up/Revisit, Relicensure	Recertification, Follow-up	

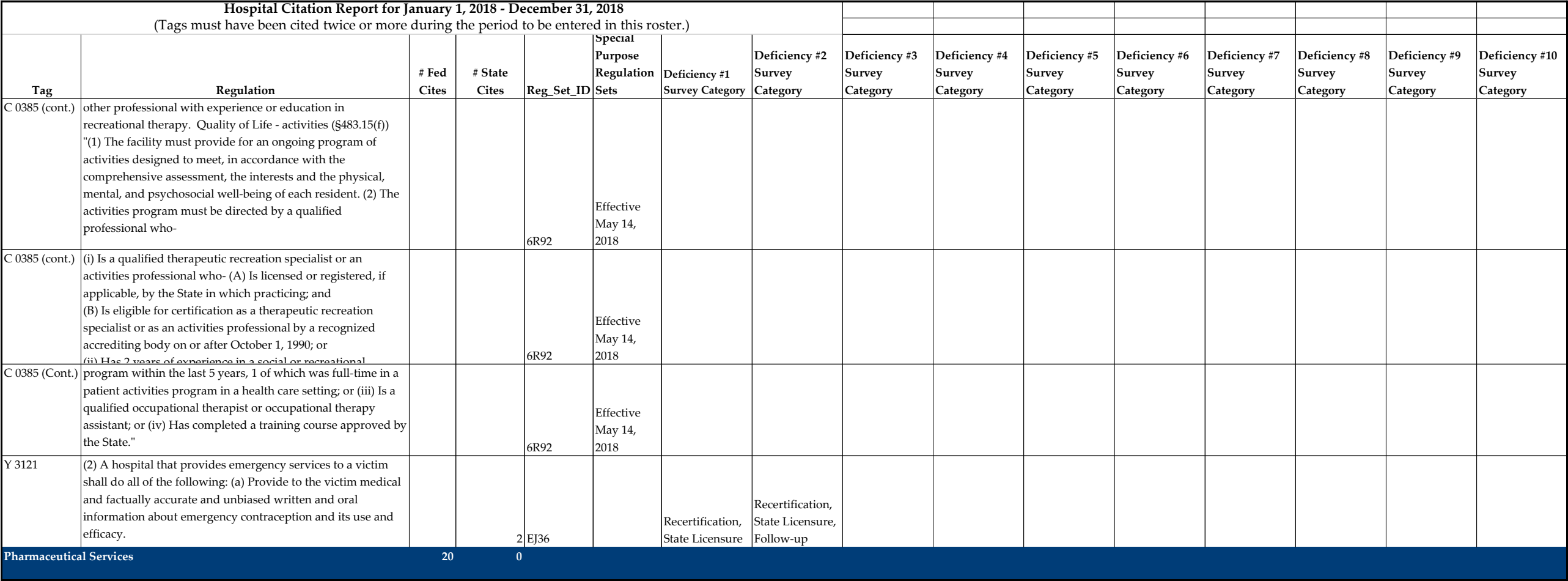
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C 0385 (cont.)	other professional with experience or education in recreational therapy. Quality of Life - activities (§483.15(f)) "(1) The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident. (2) The activities program must be directed by a qualified professional who-													
C 0385 (cont.)	(i) Is a qualified therapeutic recreation specialist or an activities professional who- (A) Is licensed or registered, if applicable, by the State in which practicing; and (B) Is eligible for certification as a therapeutic recreation specialist or as an activities professional by a recognized accrediting body on or after October 1, 1990; or <i>(ii) Has 2 years of experience in a social or recreational</i>													
C 0385 (Cont.)	program within the last 5 years, 1 of which was full-time in a patient activities program in a health care setting; or (iii) Is a qualified occupational therapist or occupational therapy assistant; or (iv) Has completed a training course approved by the State."													
Y 3121	(2) A hospital that provides emergency services to a victim shall do all of the following: (a) Provide to the victim medical and factually accurate and unbiased written and oral information about emergency contraception and its use and efficacy.		2											
Pharmaceutical Services														
		20	0											

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A 0405	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. (i) Drugs and biologicals may be prepared and administered on the orders of other practitioners not specified under §482.12(c) only if such practitioners are acting in accordance with State law, including scope of practice laws, hospital policies, and medical staff bylaws, rules, and regulations. (2) 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.	4		FA25		Recertification, Validation	Complaint	Recertification, Complaint	Complaint						
A 0405	(1) 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. (i) Drugs and biologicals may be prepared and administered on the orders of other practitioners not specified under §482.12(c) only if such practitioners are acting in accordance with State law, including scope of practice laws, hospital policies, and medical staff bylaws, rules, and regulations. (2) 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		FA26	Effective February 1, 2018	Complaint	Complaint								
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.	8		6R91		Recertification	Recertification, Licensure, Relicensure, Follow-up	Recertification	Recertification	Recertification, State Licensure	Recertification, Relicensure, Follow-up	Recertification	Recertification, Follow-up		

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A 0118	The hospital must establish a process for prompt resolution of patient grievances and must inform each patient whom to contact to file a grievance.	3		FA25		Complaint	Recertification, Follow-up	Recertification, Relicensure							
A 0119	[The hospital must establish a process for prompt resolution of patient grievances and must inform each patient whom to contact to file a grievance.] The hospital's governing body must approve and be responsible for the effective operation of the grievance process, and must review and resolve grievances, unless it delegates the responsibility in writing to a grievance committee.	2		FA25		Complaint	Complaint								
A 0122	At a minimum: The grievance process must specify time frames for review of the grievance and the provision of a response.	4		FA25		Complaint	Recertification, Relicensure	Complaint	Recertification, Relicensure, Follow-up						
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.	2		FA25		Complaint	Complaint								
A 0132	The patient has the right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives, in accordance with §489.100 of this part (Definition), §489.102 of this part (Requirements for providers), and §489.104 of this part (Effective dates).	2		FA25		Recertification	Complaint								
A 0144	The patient has the right to receive care in a safe setting.	8		FA25		Complaint	Recertification	Complaint	Recertification	Complaint	Recertification	Recertification, Follow-up	Recertification, Follow-up		
A 0168	The use of restraint or seclusion must be in accordance with the order of a physician or other licensed independent practitioner who is responsible for the care of the patient as specified under §482.12(c) and authorized to order restraint or seclusion by hospital policy in accordance with State law.	3		FA25		Complaint	Complaint, Follow-up	Complaint							

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C 0364	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Resident rights (§483.10(d)(1)): "The resident has the right to - Choose a personal attending physician,"	2		6R91		Recertification, Relicensure	Recertification, Relicensure, Follow-up								
C 0368	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Resident rights - work (§483.10(h)): "The resident has the right to- (1) Refuse to perform services for the facility; (2) Perform services for the facility, if he or she chooses, when - (i) The facility has documented the need or desire for work in the plan of care; (ii) The plan specifies the nature of the services performed and whether the services are voluntary or paid; (iii) Compensation for paid services is at or above prevailing rates; and (iv) The resident agrees to the work arrangement described in the plan of care."	2		6R91		Recertification, Relicensure	Recertification, Relicensure, Follow-up								
C 0372	[The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:] Resident rights - married couples (§483.10(m)): "The resident has the right to share a room with his or her spouse when married residents live in the same facility and both spouses consent to the arrangement."	2		6R91		Recertification, Relicensure	Recertification, Relicensure, Follow-up								
C 1001	[A CAH must have written policies and procedures regarding the visitation rights of patients, including those setting forth any clinically necessary or reasonable restriction or limitation that the CAH may need to place on such rights and the reasons for the clinical restriction or limitation.] A CAH must meet the following requirements: (1) Inform each patient (or support person, where appropriate) of his or her visitation rights, including any clinical restriction or limitation on such rights, in advance of furnishing patient care whenever possible. (2) Inform each patient (or support person, where appropriate) of the right, subject to his or her consent, to	4		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Complaint, Recertification	Recertification, Follow-up						

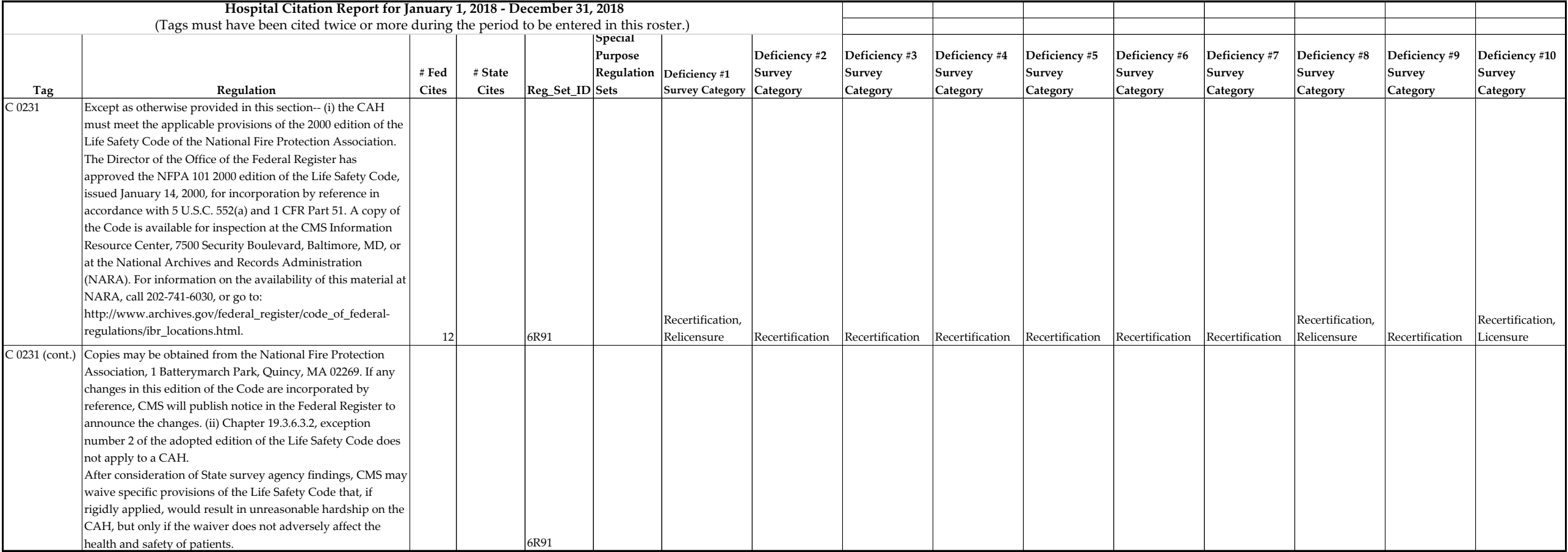
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C 1001 (cont.)	receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and his or her right to withdraw or deny such consent at any time.			6R91											
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 BVI3		Complaint	Complaint								
Physical Environment (all K tags are counted as federal cites)		257	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.	8		FA25		Recertification	Recertification, Validation, Relicensure	Recertification	Recertification, Relicensure	Recertification, Follow-up	Recertification, Complaint	Recertification	Recertification, Follow-up		
A 701	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.	2		FA25		Recertification	Recertification, Complaint								
A 0709	Life Safety from Fire	8		FA25		Recertification	Recertification, Validation, Relicensure	Recertification	Recertification, Relicensure	Recertification	Recertification, Complaint	Recertification	Recertification, Follow-up		
A 0724	[...the services furnished by the distinct part unit must comply with ...§412.25(a)(2) through (f) of Part 412 ...Satellite facilities (§412.25(e)(2)).] "(ii) The satellite facility independently complies with- (A) For a rehabilitation unit, the requirements under §412.23(b)(2); or (B) For a psychiatric unit, the requirements under §412.27(a)."	6		FA25		Recertification	Recertification, Validation, Relicensure	Recertification, Relicensure	Recertification, Follow-up, Validation	Recertification, Relicensure, Follow-up	Recertification, Relicensure				

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C 0204	[The items available must include the following:] Equipment and supplies commonly used in life saving procedures, including airways, endotracheal tubes, ambu bag/valve/mask, oxygen, tourniquets, immobilization devices, nasogastric tubes, splints, IV therapy supplies, suction machine, defibrillator, cardiac monitor, chest tubes, and indwelling urinary catheters.	2		6R91		Recertification	Recertification, Follow-up									
C 0220	Physical Plant and Environment	11		6R91		Recertification, Relicensure	Recertification	Recertification	Recertification	Recertification, Complaint	Recertification	Recertification	Recertification, Relicensure	Recertification	Recertification, Licensure	
C 0222	The CAH has housekeeping and preventive maintenance programs to ensure that-- all essential mechanical, electrical, and patient care equipment is maintained in safe operating condition;	6		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification	Recertification, Complaint	Recertification, Complaint	Recertification, Follow-up					
C 0224	[The CAH has housekeeping and preventive maintenance programs to ensure that--] drugs and biologicals are appropriately stored;	2		6R92		Recertification	Recertification, Follow-up									
C 0225	[The CAH has housekeeping and preventive maintenance programs to ensure that- the premises are clean and orderly;	7		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification	Recertification	Recertification, Licensure, Follow-up	Recertification	Recertification, 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.	4		6R91		Recertification, Complaint	Recertification	Recertification, Follow-up	Recertification							

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K 0131	Multiple Occupancies - Sections of Health Care Facilities Sections of health care facilities classified as other occupancies meet all of the following: * They are not intended to serve four or more inpatients. * They are separated from areas of health care occupancies by construction having a minimum 2-hour fire resistance rating in accordance with Chapter 8. * The entire building is protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7. Hospital outpatient surgical departments are required to be classified as an Ambulatory Health Care Occupancy regardless of the number of patients served. 18.1.3.3, 19.1.3.3, 42 CFR 482.41, 42 CFR 485.623	3		K307	Regs for Existing Structures	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code, Follow-up							
K 0133	Multiple Occupancies - Construction Type Where separated occupancies are in accordance with 18/19.1.3.2 or 18/19.1.3.4, the most stringent construction type is provided throughout the building, unless a 2-hour separation is provided in accordance with 8.2.1.3, in which case the construction type is determined as follows: * The construction type and supporting construction of the health care occupancy is based on the story in which it is located in the building in accordance with 18/19.1.6 and Tables 18/19.1.6.1 * The construction type of the areas of the building enclosing the other occupancies shall be based on the applicable occupancy chapters. 18.1.3.5, 19.1.3.5, 8.2.1.3	3		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code							

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K 0161	Building Construction Type and Height 2012 EXISTING Building construction type and stories meets Table 19.1.6.1, unless otherwise permitted by 19.1.6.2 through 19.1.6.7 19.1.6.4, 19.1.6.5 Construction Type 1 I (442), I (332), II (222) Any number of stories non-sprinklered and sprinklered 2 II (111) One story non-sprinklered Maximum 3 stories sprinklered 3 II (000) Not allowed non-sprinklered 4 III (211) Maximum 2 stories sprinklered 5 IV (2HH) 6 V (111) 7 III (200) Not allowed non-sprinklered 8 V (000) Maximum 1 story sprinklered	3		K307	Regs for Existing Structures	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code							
K 0161 (cont.)	Sprinklered stories must be sprinklered throughout by an approved, supervised automatic system in accordance with section 9.7. (See 19.3.5) Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patients are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.			K307	Regs for Existing Structures										
K 0222	Egress Doors Doors in a required means of egress shall not be equipped with a latch or a lock that requires the use of a tool or key from the egress side unless using one of the following special locking arrangements: CLINICAL NEEDS OR SECURITY THREAT LOCKING Where special locking arrangements for the clinical security needs of the patient are used, only one locking device shall be permitted on each door and provisions shall be made for the rapid removal of occupants by: remote control of locks; keying of all locks or keys carried by staff at all times; or other such reliable means available to the staff at all times. 18.2.2.2.5.1, 18.2.2.2.6, 19.2.2.2.5.1, 19.2.2.2.6 SPECIAL NEEDS LOCKING ARRANGEMENTS (cont.)	4		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code						

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K 0222 (cont.)	18.2.2.2.5.2, 19.2.2.2.5.2, TIA 12-4DELAYED-EGRESS LOCKING ARRANGEMENTS Approved, listed delayed-egress locking systems installed in accordance with 7.2.1.6.1 shall be permitted on door assemblies serving low and ordinary hazard contents in buildings protected throughout by an approved, supervised automatic fire detection system or an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4 ACCESS-CONTROLLED EGRESS LOCKING ARRANGEMENTS Access-Controlled Egress Door assemblies installed in accordance with 7.2.1.6.2 shall be permitted. 18.2.2.2.4, 19.2.2.2.4 ELEVATOR LOBBY EXIT ACCESS LOCKING ARRANGEMENTS Elevator lobby exit access door locking in accordance with 7.2.1.6.3 shall be permitted on door assemblies in buildings protected throughout by an approved, supervised automatic fire detection system and an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4			K307	Regs for Existing Structures											
K 0223	Doors with Self-Closing Devices Doors in an exit passageway, stairway enclosure, or horizontal exit, smoke barrier, or hazardous area enclosure are self-closing and kept in the closed position, unless held open by a release device complying with 7.2.1.8.2 that automatically closes all such doors throughout the smoke compartment or entire facility upon activation of: * Required manual fire alarm system; and * Local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system; and * Automatic sprinkler system, if installed; and * Loss of power. 18.2.2.2.7, 18.2.2.2.8, 19.2.2.2.7, 19.2.2.2.8	3		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Follow-up, Life Safety Code								

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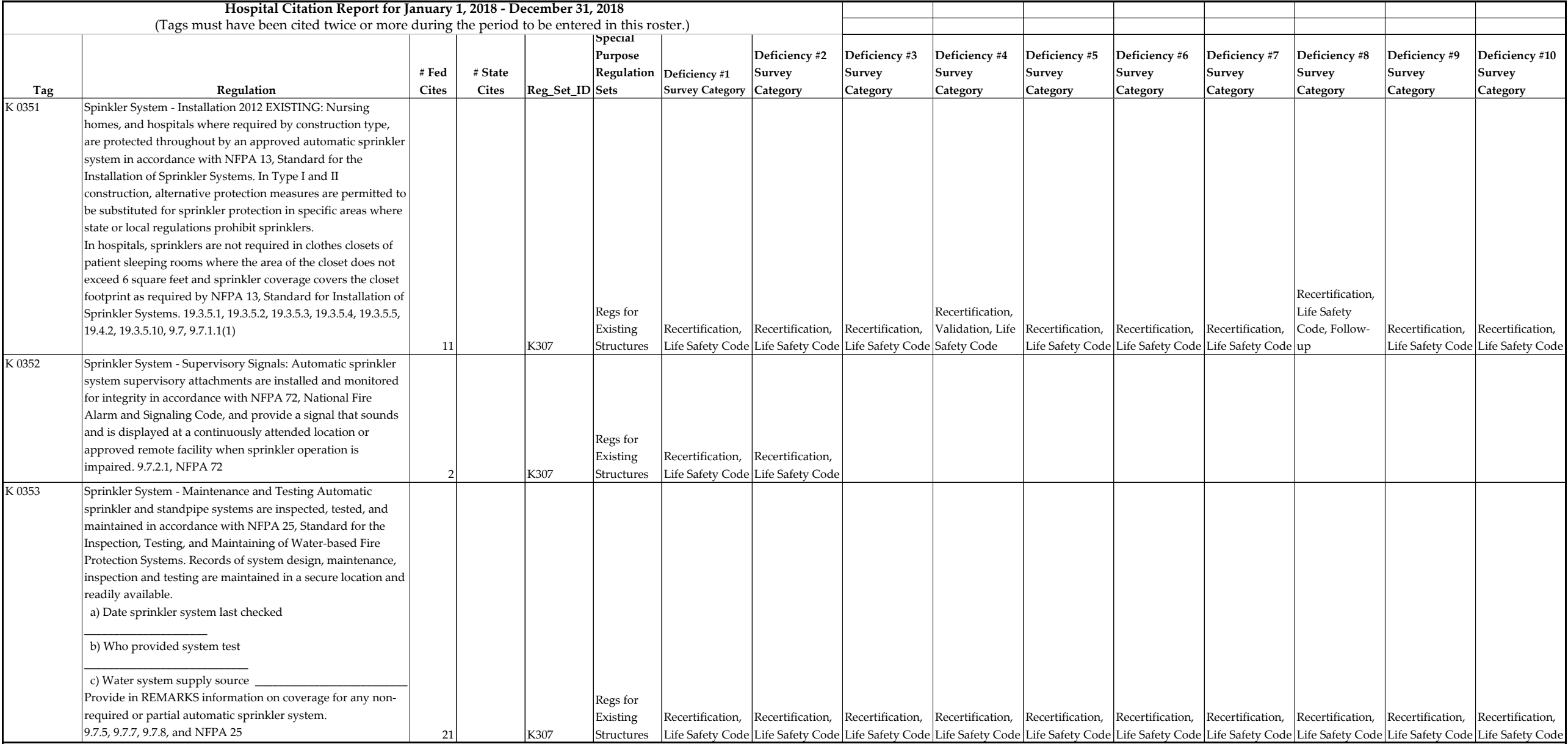
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K 0271	Discharge from Exits: Exit discharge is arranged in accordance with 7.7, provides a level walking surface meeting the provisions of 7.1.7 with respect to changes in elevation and shall be maintained free of obstructions. Additionally, the exit discharge shall be a hard packed all-weather travel surface. 18.2.7, 19.2.7	3		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code							
K 0293	Exit Signage 2012 EXISTING: Exit and directional signs are displayed in accordance with 7.10 with continuous illumination also served by the emergency lighting system. 19.2.10.1 (Indicate N/A in one-story existing occupancies with less than 30 occupants where the line of exit travel is obvious.)	4		K307	Regs for Existing Structures	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code						
K 0300	Protection - Other: List in the REMARKS section any LSC Section 18.3 and 19.3 Protection requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567.	2		K307	Regs for Existing Structures	Recertification, Validation, Life Safety Code	Recertification, Validation, Life Safety Code								
K 0311	Vertical Openings - Enclosure: 2012 EXISTING: 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 1 hour. An atrium may be used in accordance with 8.6. 19.3.1.1 through 19.3.1.6. If all vertical openings are properly enclosed with construction providing at least a 2-hour fire resistance rating, also check this box.	3		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code							

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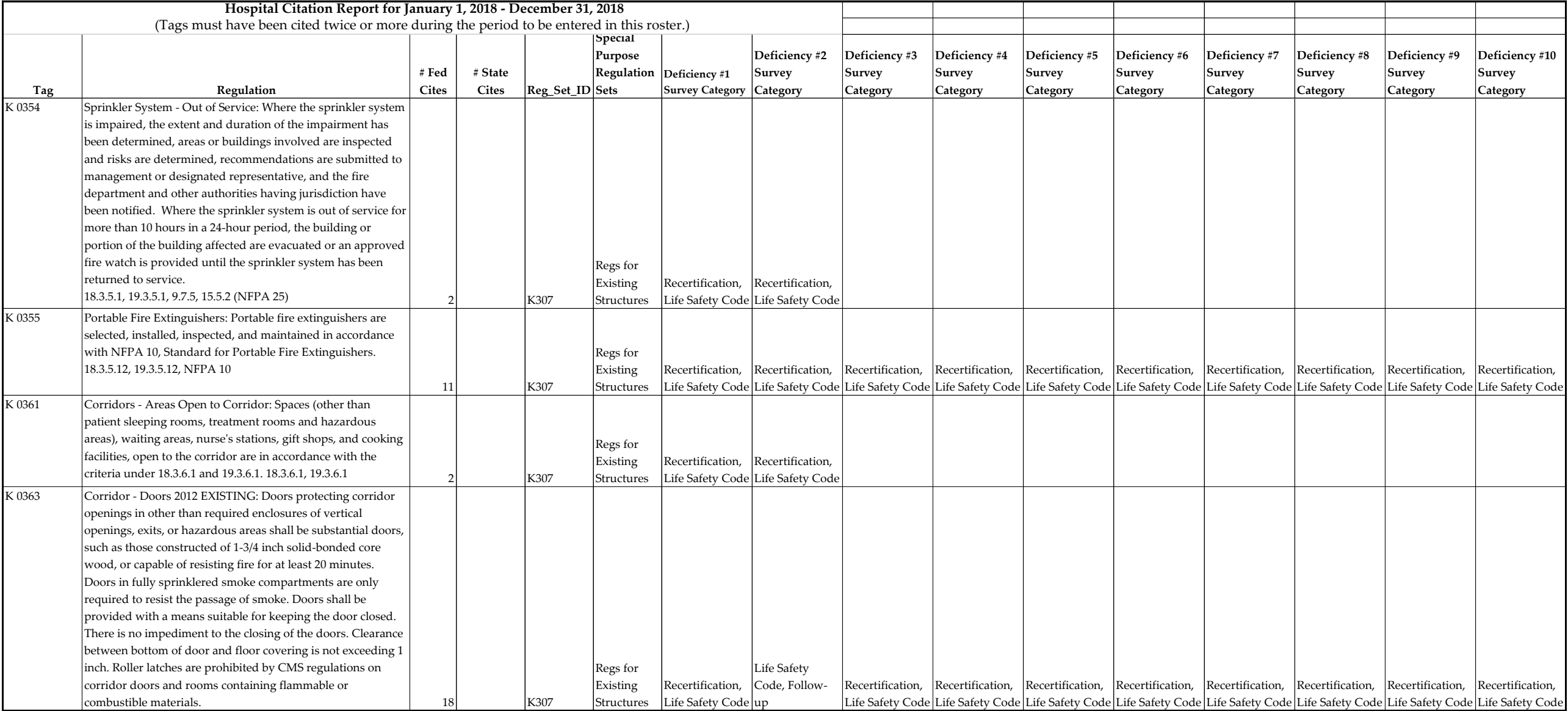
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K 0321	Hazardous Areas - Enclosure 2012 EXISTING Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4-hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. Describe the floor and zone locations of hazardous areas that are deficient in REMARKS.	14		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code
K 0321 (cont.)	19.3.2.1 Area Automatic Sprinkler Separation N/A a. Boiler and Fuel-Fired Heater Rooms b. Laundries (larger than 100 square feet) c. Repair, Maintenance, and Paint Shops d. Soiled Linen Rooms (exceeding 64 gallons) e. Trash Collection Rooms (exceeding 64 gallons) f. Combustible Storage Rooms/Spaces (over 50 square feet) g. Laboratories (if classified as Severe Hazard - see K322)			K307	Regs for Existing Structures										
K 0324	Cooking Facilities Cooking equipment is protected in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, unless: * residential cooking equipment (i.e., small appliances such as microwaves, hot plates, toasters) are used for food warming or limited cooking in accordance with 18.3.2.5.2, 19.3.2.5.2 * cooking facilities open to the corridor in smoke compartments with 30 or fewer patients comply with the conditions under 18.3.2.5.3, 19.3.2.5.3, or * cooking facilities in smoke compartments with 30 or fewer patients comply with conditions under 18.3.2.5.4, 19.3.2.5.4. Cooking facilities protected according to NFPA 96 per 9.2.3 are not required to be enclosed as hazardous areas, but shall not be open to the corridor. 18.3.2.5.1 through 18.3.2.5.4, 19.3.2.5.1 through 19.3.2.5.5, 9.2.3, TIA 12-2	4		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code						

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K 0351	Sprinkler System - Installation 2012 EXISTING: Nursing homes, and hospitals where required by construction type, are protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems. In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit sprinklers. In hospitals, sprinklers are not required in clothes closets of patient sleeping rooms where the area of the closet does not exceed 6 square feet and sprinkler coverage covers the closet footprint as required by NFPA 13, Standard for Installation of Sprinkler Systems. 19.3.5.1, 19.3.5.2, 19.3.5.3, 19.3.5.4, 19.3.5.5, 19.4.2, 19.3.5.10, 9.7, 9.7.1.1(1)	11		Recertification, Life Safety Code											
K 0352	Sprinkler System - Supervisory Signals: Automatic sprinkler system supervisory attachments are installed and monitored for integrity in accordance with NFPA 72, National Fire Alarm and Signaling Code, and provide a signal that sounds and is displayed at a continuously attended location or approved remote facility when sprinkler operation is impaired. 9.7.2.1, NFPA 72	2													
K 0353	Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25	21		Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	



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K 0354	Sprinkler System - Out of Service: Where the sprinkler system is impaired, the extent and duration of the impairment has been determined, areas or buildings involved are inspected and risks are determined, recommendations are submitted to management or designated representative, and the fire department and other authorities having jurisdiction have been notified. Where the sprinkler system is out of service for more than 10 hours in a 24-hour period, the building or portion of the building affected are evacuated or an approved fire watch is provided until the sprinkler system has been returned to service. 18.3.5.1, 19.3.5.1, 9.7.5, 15.5.2 (NFPA 25)	2													
K 0355	Portable Fire Extinguishers: Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 18.3.5.12, 19.3.5.12, NFPA 10	11		Recertification, Validation, Life Safety Code											
K 0361	Corridors - Areas Open to Corridor: Spaces (other than patient sleeping rooms, treatment rooms and hazardous areas), waiting areas, nurse's stations, gift shops, and cooking facilities, open to the corridor are in accordance with the criteria under 18.3.6.1 and 19.3.6.1. 18.3.6.1, 19.3.6.1	2													
K 0363	Corridor - Doors 2012 EXISTING: 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 1-3/4 inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. Doors shall be provided with a means suitable for keeping the door closed. There is no impediment to the closing of the doors. Clearance between bottom of door and floor covering is not exceeding 1 inch. Roller latches are prohibited by CMS regulations on corridor doors and rooms containing flammable or combustible materials.	18		Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code				

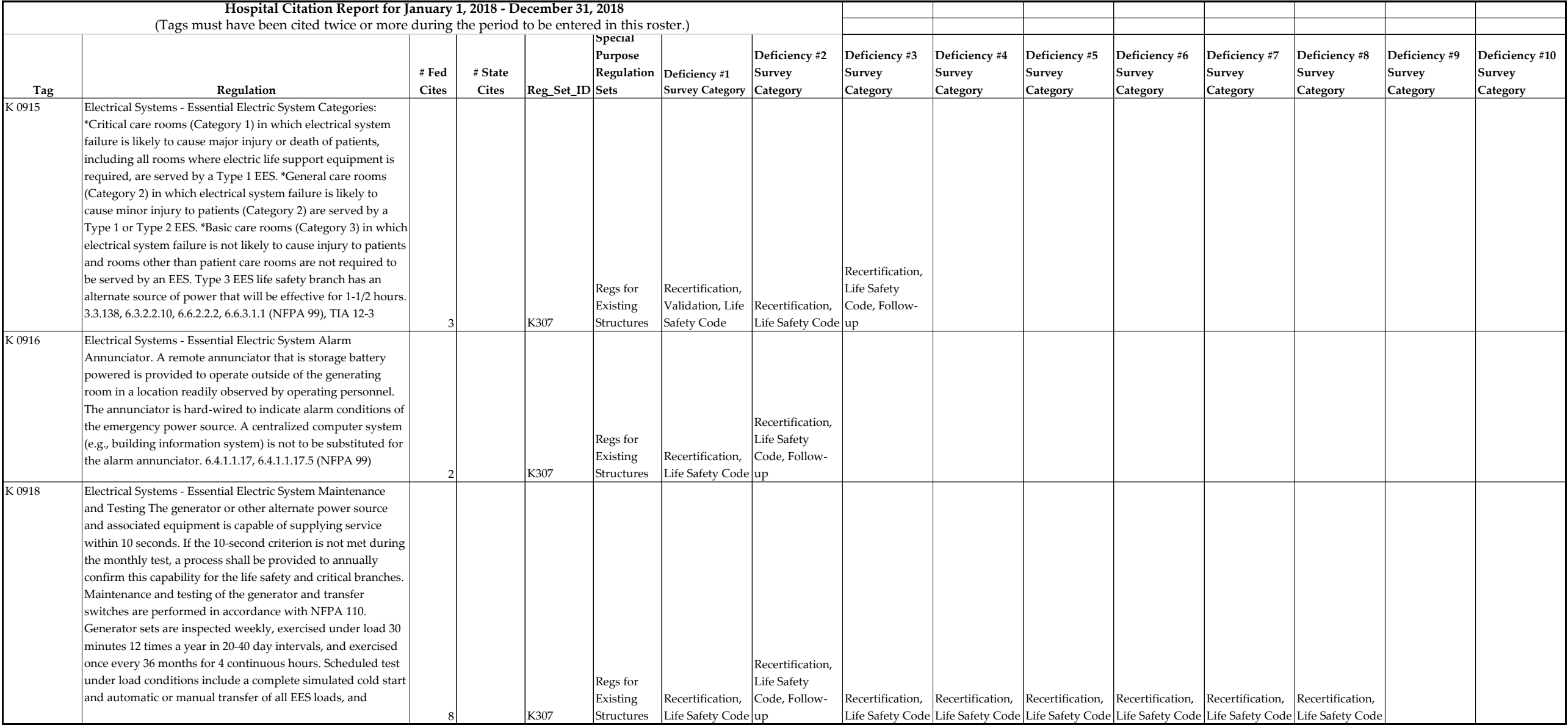
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K 0363 (cont.)	Powered doors complying with 7.2.1.9 are permissible. Hold open devices that release when the door is pushed or pulled are permitted. Nonrated protective plates of unlimited height are permitted. Dutch doors meeting 19.3.6.3.6 are permitted. Door frames shall be labeled and made of steel or other materials in compliance with 8.3, unless the smoke compartment is sprinklered. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. Doors shall be provided with a means suitable for keeping the door closed. In sprinklered compartments there are no restrictions in area or fire resistance of glass or frames in window assemblies. 19.3.6.3, 42 CFR Parts 403, 418, 460, 482, 483, and 485 Show in REMARKS details of doors such as fire protection ratings, automatics closing devices, etc.			K307	Regs for Existing Structures										
K 0372	Subdivision of Building Spaces - Smoke Barrier Construction, 2012 EXISTING: Smoke barriers shall be constructed to a 1/2-hour fire resistance rating per 8.5. Smoke barriers shall be permitted to terminate at an atrium wall. Smoke dampers are not required in duct penetrations in fully ducted HVAC systems where an approved sprinkler system is installed for smoke compartments adjacent to the smoke barrier. 19.3.7.3, 8.6.7.1(1) Describe any mechanical smoke control system in REMARKS.	5		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code					
K 0374	Subdivision of Building Spaces - Smoke Barrier Doors 2012 EXISTING Doors in smoke barriers are 1-3/4-inch thick solid bonded wood-core doors or of construction that resists fire for 20 minutes. Nonrated protective plates of unlimited height are permitted. Doors are permitted to have fixed fire window assemblies per 8.5. Doors are self-closing or automatic-closing, do not require latching, and are not required to swing in the direction of egress travel. Door opening provides a minimum clear width of 32 inches for swinging or horizontal doors. 19.3.7.6, 19.3.7.8, 19.3.7.9	9		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code

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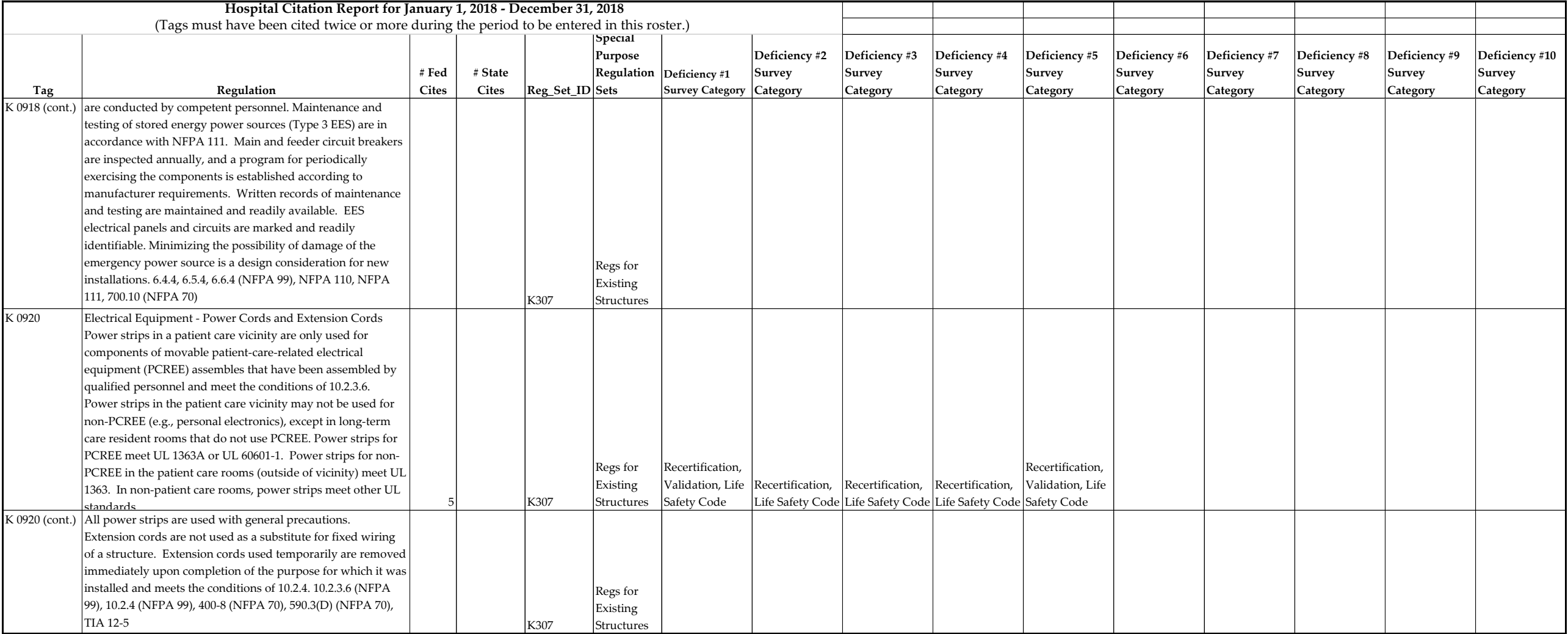
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K 0511	Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2	4		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code						
K 0712	Fire Drills: Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at expected and 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. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 19.7.1.4 through 19.7.1.7	9		K307	Regs for Existing Structures	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	Recertification, Validation, Life Safety Code	Recertification, Life Safety Code	Recertification, Life Safety Code	

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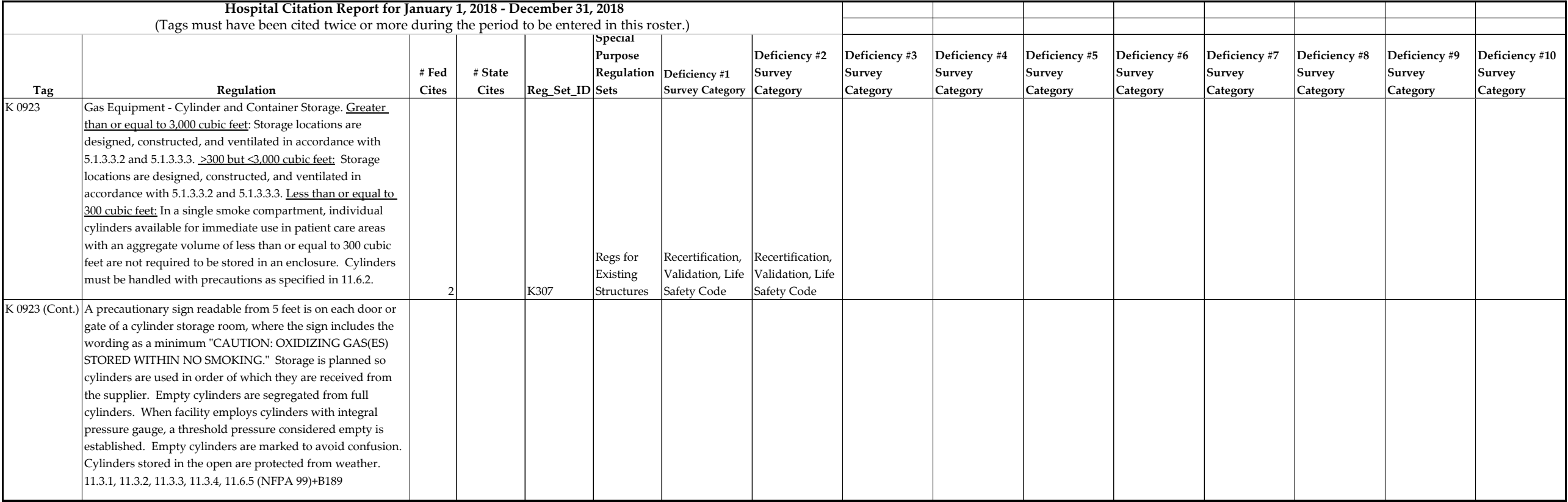
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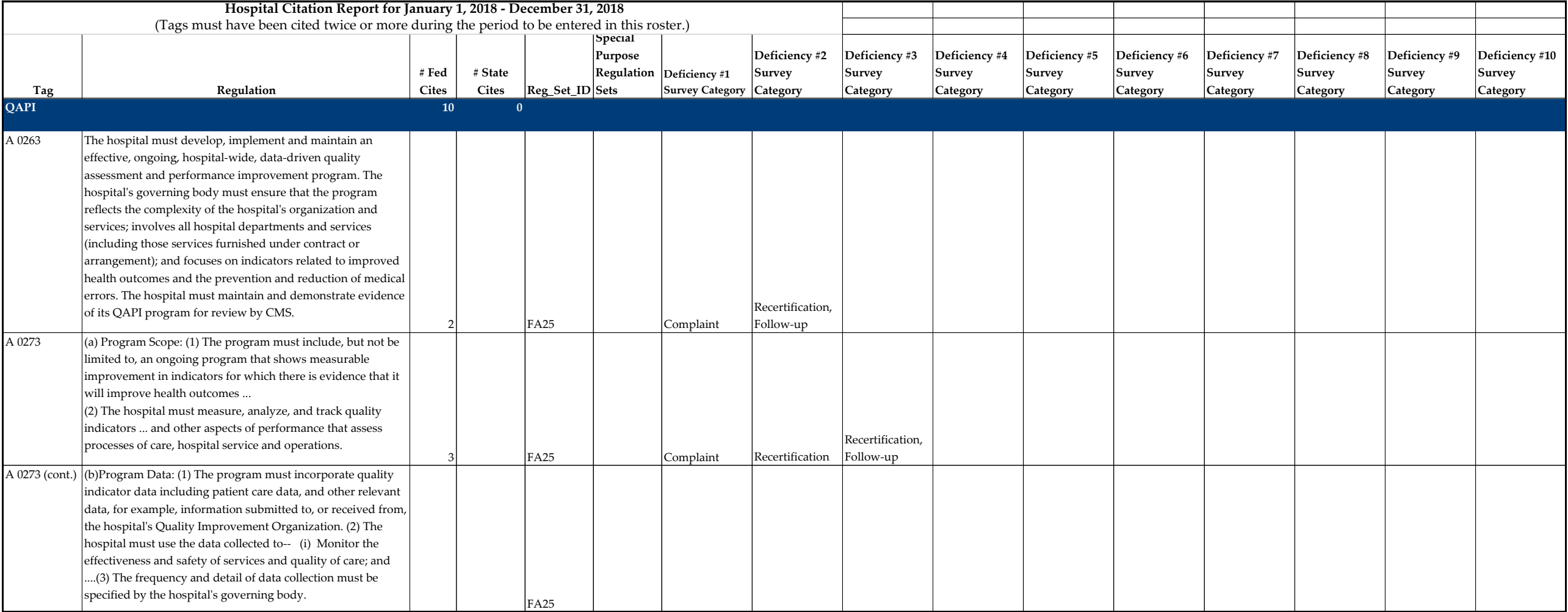
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C 0337	The CAH has an effective quality assurance program to evaluate the quality and appropriateness of the diagnosis and treatment furnished in the CAH and of the treatment outcomes. The program requires that- all patient care services and other services affecting patient health and safety are evaluated.	3		6R91		Recertification, Relicensure	Recertification, Follow-up/Revisit, Relicensure	Recertification							
C 0342	[The program requires that--] the CAH also takes appropriate remedial action to address deficiencies found through the quality assurance program.	2		6R91		Recertification, Complaint	Recertification, Follow-up								
Chief of Services		0	0												
Psychiatric Services		24	0												
B 0122	The written plan must include the specific treatment modalities utilized.	4		FB01		Recertification	Recertification	Recertification, Follow-up	Recertification, Follow-up						
B 0123	The written plan must include the responsibilities of each member of the treatment team.	2		FB01		Recertification, Follow-up	Recertification, Follow-up								
B 0125	The treatment received by the patient must be documented in such a way to assure that all active therapeutic efforts are included.	3		FB01		Recertification	Recertification	Recertification, Follow-up							
B 0136	The hospital must have adequate numbers of qualified professional and supportive staff to evaluate patients, formulate written, individualized comprehensive treatment plans, provide active treatment measures and engage in discharge planning.	3		FB01		Recertification	Recertification	Recertification, Follow-up							
B 0144	The director must monitor and evaluate the quality and appropriateness of services and treatment provided by the medical staff.	5		FB01		Recertification	Recertification, Follow-up	Recertification, Follow-up	Recertification	Recertification, Follow-up					
B 0148	The director must demonstrate competence to participate in interdisciplinary formulation of individual treatment plans; to give skilled nursing care and therapy; and to direct, monitor, and evaluate the nursing care furnished.	5		FB01		Recertification	Recertification, Follow-up	Recertification, Follow-up	Recertification	Recertification, Follow-up					

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