

ANNUAL REPORT

2017

OFFICE OF PLAN REVIEW AND INSPECTION



STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
Division of Quality Assurance

P-01449 (05/2018)

TABLE OF CONTENTS

EXECUTIVE SUMMARY	3
NATIONAL TOP TEN LIFE SAFETY CODE DEFICIENCIES.....	4
WISCONSIN TOP TEN FEDERAL LIFE SAFETY CODE CITATIONS.....	7
NATIONAL AVERAGE LSC CITATIONS PER RECERTIFICATION SURVEY	10
WISCONSIN PLAN REVIEW TOTALS BY FACILITY TYPE	11

EXECUTIVE SUMMARY

The State of Wisconsin Department of Health Services (DHS), Division of Quality Assurance (DQA), Office of Plan Review and Inspection (OPRI) serves the health care facilities, building and infrastructure industry. The OPRI professional staff is comprised of eleven licensed architects and professional engineers and two administrative staff. The Office of Plan Review and Inspection conducts all federal health care facility surveys, as well as regulatory construction services from predesign through occupancy. The health care constituency served by the Office includes all hospitals, nursing homes, ambulatory surgery centers, end stage renal dialysis units, hospices, and assisted living facilities.

To support economic prosperity and quality of life, DHS exercises multiple roles in the protection and promotion of the health and safety of the citizens of Wisconsin. The mission of DQA is to:

- Protect the health, safety, and welfare of Wisconsin citizens through the survey, certification, and licensure of health care organizations.
- Promote quality health care.
- Provide education, resources, and guidance to regulated facilities.
- Assist in eliminating health disparities in Wisconsin through effective communication, technical assistance, and compliance.

Based on the DQA mission, OPRI follows the DQA guiding principles to:

- Encourage quality health care delivery and protect the rights of citizens receiving services from all regulated health care settings by enforcing regulations and recognizing nationally accepted standards.
- Encourage and support initiatives to improve the quality of care delivered to Wisconsin citizens by engaging stakeholders.

In 2017, OPRI conducted reviews of 998 construction documents representing \$706,181,100 of health care construction throughout the State of Wisconsin. OPRI staff conducted 320 federal surveys in hospitals, nursing homes, and surgery centers. Based on long-term care national data provided by The Centers for Medicare and Medicaid Services, the average number of life safety code citations in Wisconsin per recertification survey was 4.42. Wisconsin's top 10 nursing home citations were aligned with both the national and regional metrics.

The Office of Plan Review and Inspection continues to streamline the delivery model across all services. In 2017, OPRI began promoting predesign meetings encouraging all stakeholders to meet prior to construction. Through predesign meetings, OPRI serves as the facilitator bringing all stakeholders together early in the planning phase with the focus on project success all the way through the construction phase. OPRI has maintained an average review time for construction documents below 30 days. Onsite review during construction remains timely based on predesign meetings, project schedules, and expectations.

Henry Kosarzycki, Director
Office of Plan Review and Inspection

NATIONAL TOP TEN LIFE SAFETY CODE DEFICIENCIES – 2017

This data is provided by The Centers for Medicare & Medicaid Services.

Federal Ranking	Tag	Description of Regulation
1	K0353	<p>Sprinkler System Maintenance & Testing</p> <p>Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, <i>Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems</i>. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available.</p>
2	K0363	<p>Corridor Doors</p> <p>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 1¾ 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. 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. Fixed fire window assemblies are allowed per 8.3. In sprinklered compartments there are no restrictions in area or fire resistance.</p>
3	K0321	<p>Hazardous Areas – Enclosure</p> <p>2012 EXISTING Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with ¾ 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. <i>Describe the floor and zone locations of hazardous areas that are deficient.</i></p>
4	K0372	<p>Subdivision of Building Spaces – Smoke Barrier</p> <p>2012 EXISTING Smoke barriers shall be constructed to a ½ 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) <i>Describe any mechanical smoke control system in REMARKS.</i></p>

5	K0920	<p>Electrical Equipment – Power Cords & Extensions</p> <p>Power strips in a patient care vicinity are only used for components of movable patient-care-related electrical equipment (PCREE) assemblies that have been assembled by qualified personnel and meet the conditions of 10.2.3.6. Power strips in the patient care vicinity may not be used for non-PCREE (e.g., personal electronics), except in long-term care resident rooms that do not use PCREE. Power strips for PCREE meet UL 1363A or UL 60601-1. Power strips for non-PCREE in the patient care rooms (outside of vicinity) meet UL 1363. In non-patient care rooms, power strips meet other UL standards. All power strips are used with general precautions. Extension cords are not used as a substitute for fixed wiring of a structure. Extension cords used temporarily are removed immediately upon completion of the purpose for which it was installed and meets the conditions of 10.2.4. 10.2.3.6 (NFPA 99), 10.2.4 (NFPA 99), 400-8 (NFPA 70), 590.3(D) (NFPA 70), TIA 12-5.</p>
6	K0918	<p>Electrical Systems – Essential Electrical Systems</p> <p>The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110.</p> <p>Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions includes a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111.</p> <p>Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked and readily identifiable. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70).</p>
7	K0345	<p>Fire Alarm System – Testing & Maintenance</p> <p>A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, <i>National Electric Code</i>, and NFPA 72, <i>National Fire Alarm and Signaling Code</i>. Records of system acceptance, maintenance and testing are readily available. 9.7.5, 9.7.7, 9.7.8,</p>
8	K0712	<p>Fire Drills</p> <p>Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 18.7.1.4 through 18.7.1.7, 19.7.1.4 through 19.7.1.7.</p>

9	K0324	<p>Cooking Facilities</p> <p>Cooking equipment is protected in accordance with NFPA 96, <i>Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations</i>, unless:</p> <ul style="list-style-type: none"> • 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, • 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.
10	K0511	<p>Utilities – Gas & Electric</p> <p>Equipment using gas or related gas piping complies with NFPA 54, <i>National Fuel Gas Code</i>, electrical wiring and equipment complies with NFPA 70, <i>National Electric Code</i>. Existing installations can continue in service.</p>

WISCONSIN TOP TEN FEDERAL LIFE SAFETY CODE CITATIONS – 2017

This data is provided by The Centers for Medicare & Medicaid Services.

State Ranking	Tag	Description of Regulation
1	K0353	<p>Sprinkler System Maintenance & Testing</p> <p>Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, <i>Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems</i>. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available.</p>
2	K0712	<p>Fire Drills</p> <p>Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 18.7.1.4 through 18.7.1.7, 19.7.1.4 through 19.7.1.7.</p>
3	K0345	<p>Fire Alarm System – Testing & Maintenance</p> <p>A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, <i>National Electric Code</i>, and NFPA 72, <i>National Fire Alarm and Signaling Code</i>. Records of system acceptance, maintenance and testing are readily available. 9.7.5, 9.7.7, 9.7.8,</p>
4	K0321	<p>Hazardous Areas – Enclosure</p> <p>2012 EXISTING Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with ¾ 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. <i>Describe the floor and zone locations of hazardous areas that are deficient.</i></p>
5	K0355`	<p>Portable Fire Extinguishers</p> <p>Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, <i>Standard for Portable Fire Extinguishers</i>. 18.3.5.12, 19.3.5.12, NFPA 10.</p>
6	K0511	<p>Utilities – Gas & Electric</p> <p>Equipment using gas or related gas piping complies with NFPA 54, <i>National Fuel Gas Code</i>, electrical wiring and equipment complies with NFPA 70, <i>National Electric Code</i>. Existing installations can continue in service.</p>

7	K0363	<p>Corridor Doors</p> <p>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 1¾ 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. 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. Fixed fire window assemblies are allowed per 8.3. In sprinklered compartments there are no restrictions in area or fire resistance.</p>
8	K0372	<p>Subdivision of Building Spaces – Smoke Barrier</p> <p>2012 EXISTING Smoke barriers shall be constructed to a ½ 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) <i>Describe any mechanical smoke control system in REMARKS.</i></p>
9	K0324	<p>Cooking Facilities</p> <p>Cooking equipment is protected in accordance with NFPA 96, <i>Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations</i>, unless:</p> <ul style="list-style-type: none"> • 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, • 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.
10	K0341	<p>Fire Alarm System – Installation</p> <p>A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, <i>National Electric Code</i>, and NFPA 72, <i>National Fire Alarm Code</i> to provide effective warning of fire in any part of the building. In areas not continuously occupied, detection is installed at each fire alarm control unit. In new occupancy, detection is also installed at notification appliance circuit power extenders, and supervising station transmitting equipment. Fire alarm system wiring or other transmission paths are monitored for integrity. 18.3.4.1, 19.3.4.1, 9.6, 9.6.1.8.</p>

NATIONAL AVERAGE LSC CITATIONS PER RECERTIFICATION SURVEY – 2017

This data is provided by The Centers for Medicare & Medicaid Services.

Illinois	9.0
Montana	8.3
Kansas	8.3
Nebraska	7.2
Colorado	7.1
Nevada	6.5
Indiana	6.5
Virginia	6.1
Pennsylvania	5.9
California	5.5
Washington	5.4
Wisconsin	5.1
Maine	4.9
Utah	4.8
Iowa	4.7
Missouri	4.6
Alaska	4.3
National Average	4.1
North Carolina	4.1
Idaho	4.0
West Virginia	4.0
Texas	3.9
Wyoming	3.9
Tennessee	3.8
Oklahoma	3.7
North Dakota	3.6
New York	3.6
Alabama	3.6
Georgia	3.6
New Mexico	3.6
Maryland	3.4
Ohio	3.4
Michigan	3.1
Oregon	2.9
Arizona	2.6
Minnesota	2.6
Florida	2.0
District of Columbia	2.0
Massachusetts	1.9
New Jersey	1.8
Connecticut	1.7
Delaware	1.5
Louisiana	1.3
South Dakota	1.3
New Hampshire	1.3
South Carolina	1.2
Kentucky	0.9
Rhode Island	0.8
Mississippi	0.8
Arkansas	0.6
Hawaii	0.4
Vermont	0.4

WISCONSIN PLAN REVIEW TOTALS BY FACILITY TYPE
January 1 – December 31, 2017

Month	Provider Type Category	No. of Projects	Estimated Project Cost
January	CBRF	22	\$9,296,860
	ESRD, ASC, MOB, Hospice – Attached	4	\$ 75,668
	Hospital	50	\$ 90,916,368
	LTC Facility (nursing home)	4	\$ 654,900
	Monthly Totals	80	\$ 100,943,796
February	CBRF	18	\$ 20,267,733
	ESRD, ASC, MOB, Hospice – Attached	4	\$ 5,042,500
	Hospital	44	\$ 31,040,487
	LTC Facility (nursing home)	11	\$ 6,769,284
	Monthly Totals	77	\$ 63,120,004
March	CBRF	25	\$ 7,275,312
	ESRD, ASC, MOB, Hospice – Attached	1	
	Hospital	47	\$ 126,883,428
	LTC Facility (nursing home)	11	\$ 2,027,394
	Monthly Totals	84	\$ 136,186,134
April	CBRF	32	\$ 31,882,215
	Hospital	43	\$ 11,665,204
	LTC Facility (nursing home)	11	\$ 2,325,138
	Monthly Totals	86	\$ 45,872,557
May	CBRF	27	\$ 35,797,139
	Hospital	58	\$ 20,272,508
	LTC Facility (nursing home)	11	\$ 3,013,397
	Monthly Totals	96	\$ 59,083,044
June	CBRF	32	\$ 6,794,363
	ESRD, ASC, MOB, Hospice – Attached	4	\$195,494
	Hospital	58	\$ 61,163,251
	LTC Facility (nursing home)	10	\$ 6,641,039
	Monthly Totals	104	\$ 74,794,147
July	CBRF	14	\$ 26,472,180
	ESRD, ASC, MOB, Hospice – Attached	1	
	Hospital	56	\$ 7,668,727
	LTC Facility (nursing home)	14	\$ 4,698,053
	Monthly Totals	85	\$ 38,838,959

Month	Provider Type Category	No. of Projects	Estimated Project Cost
August	CBRF	20	\$8,271,457
	Hospital	51	\$ 12,996,618
	LTC Facility (nursing home)	11	\$ 4,078,823
	Monthly Totals	82	\$ 25,346,898
September	CBRF	19	\$ 5,042,830
	Hospital	32	\$ 12,712,628
	LTC Facility (nursing home)	10	\$ 26,284,916
	Monthly Totals	61	\$ 44,040,374
October	CBRF	25	\$ 4,583,365
	Hospital	50	\$ 12,349,358
	LTC Facility (nursing home)	5	\$ 34,321
	Monthly Totals	80	\$ 16,967,044
November	CBRF	16	\$ 743,568
	ESRD, ASC, MOB, Hospice – Attached	1	
	Hospital	46	\$ 39,084,659
	LTC Facility (nursing home)	8	\$ 1,161,000
	Monthly Totals	71	\$ 40,989,227
December	CBRF	36	\$ 35,323,020
	ESRD, ASC, MOB, Hospice – Attached	1	\$ 24,000
	Hospital	51	\$ 24,543,247
	LTC Facility (nursing home)	4	\$ 108,649
	Monthly Totals	92	\$ 59,998,915
TOTALS FOR THE PERIOD		998	\$ 706,181,100