

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
CMS- Chicago Survey & Operations Group  
233 North Michigan Avenue, Suite 600  
Chicago, IL 60601-5519



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CMS Certification Number (CCN): 24-0004

November 23, 2020

Administrator  
Hennepin County Medical Center  
701 Park Avenue  
Minneapolis, MN 55415

Dear Administrator:

As a result of the October 30, 2020 substantial allegation (complaint) survey, Hennepin County Medical Center in Minneapolis, Minnesota was found to be in compliance with the Medicare Conditions of Participation and will continue to be deemed to meet applicable Medicare requirements based upon accreditation by the Joint Commission.

The Minnesota Department of Health advised you of the Medicare deficiencies noted during this survey of your hospital. Enclosed is a complete listing of all deficiencies cited.

Since your hospital has been found in compliance with the Conditions of Participation, you are not required to submit a plan of correction. However, under Federal disclosure rules, the findings of this Medicare survey are available for public disclosure. Therefore, you may wish to submit your comments on the findings and your plans for correcting the cited deficiencies.

We thank you for your cooperation. If you have any questions regarding this matter, please contact Gregory Hann via [Gregory.hann@cms.hhs.gov](mailto:Gregory.hann@cms.hhs.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Tamra Swistowicz".

Tamra Swistowicz  
Principal Program Representative  
Chicago Acute & Continuing Care Branch

cc: Minnesota Department of Health (MN00066469)  
Minnesota Department of Human Services  
Joint Commission

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November 23, 2020

Chris Dvorak  
3691 172 Lane NW  
Andover, MN 55304

Dear Mr. Dvorak:

Complaint #: MN00066469

This letter is in response to your complaints regarding infection control practices at Hennepin County Medical Center in Minneapolis, Minnesota. An on-site investigation was conducted on October 30, 2020 by the Minnesota Department of Health (MDH) on behalf of the Centers for Medicare & Medicaid Services. The survey included interviews, observations, medical record review, review of the grievance of and review of policies and procedures.

The investigation was limited to determining whether Hennepin County Medical Center meets the Federal requirements for participation in the Medicare program for hospitals, specifically for the Condition of Participation of Infection Control.

The MDH's investigation revealed that Hennepin County Medical Center meets the Federal requirements. We are not implying that your complaint is not important, or that the incidents you describe did not occur, but at the time of the DQA's survey on October 30, 2020 the hospitals met the Condition of Participation of Infection Control. Thank you for bringing your concerns to our attention.

Sincerely,

A handwritten signature in black ink, appearing to read "Tamra Swistowicz".

Tamra Swistowicz  
Principal Program Representative  
Chicago Acute & Continuing Care Branch

cc: Minnesota Department of Health

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 11/23/2020  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>240004</b>		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>10/30/2020</b>	
NAME OF PROVIDER OR SUPPLIER  <b>HENNEPIN COUNTY MEDICAL CENTER 1</b>				STREET ADDRESS, CITY, STATE, ZIP CODE <b>701 PARK AVENUE MINNEAPOLIS, MN 55415</b>			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
A 000	INITIAL COMMENTS  A COVID-19 Focused Infection Control survey was conducted 10/28/20 through 10/30/20, at your facility by the Minnesota Department of Health to determine compliance with §482.42 Infection Control. The facility was not in compliance.  In addition, a substantial allegation investigation conducted on 10/28/20 through, 10/30/20, to investigate an alleged violation of the Conditions of Participation for Hospitals participating in Medicare, specifically the Condition of Participation of Infection Control at CFR 42 482.42 related to complaint H0004104C, Hennepin County Medical Center was found not to be in compliance with the Federal Regulations for Hospice Conditions of Participation at 42 CFR, Part 482.			A 000			
A 749	INFECTION CONTROL PROGRAM CFR(s): 482.42(a)(2)  The hospital infection prevention and control program, as documented in its policies and procedures, employs methods for preventing and controlling the transmission of infections within the hospital and between the hospital and other institutions and settings; This STANDARD is not met as evidenced by: Based on interview and document review, the facility failed to ensure that emergency medical services (EMS) staff followed hospital policy to ensure face coverings were worn and/or social distancing was maintained while on duty on the hospital property. This had the potential to affect staff and the general public.  Findings included:			A 749			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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A 749	<p>Continued From page 1</p> <p>The Minnesota Executive Order 20-81 dated 7/22/20, directs people in Minnesota to wear a face covering while indoor businesses and public settings. Workers must also wear face coverings outdoors when it is not possible to maintain social distancing.</p> <p>According to the Centers for Disease Control (CDC) face coverings are effective in preventing the transmission of respiratory droplets that may spread COVID-19.</p> <p>During an interview on 10/28/20, 11:40 a.m. assistant emergency medical services (EMS) Chief stated the expectation of EMS staff was to wear a surgical mask while on duty and be six feet away from co-workers. Assistant EMS Chief stated email updates are sent daily and include reminders to wear a mask at all times.</p> <p>During an interview on 10/28/20, at 1:00 p.m. Infection Preventionist (IP) stated there was enough personal protective equipment (PPE) for all hospital staff.</p> <p>During an interview on 10/28/20, at 1:10 p.m. Director of IP stated COVID education was on the computer for staff and was sent out to the staff, a biweekly publication went out to employees, and employees were coached on donning and doffing PPE.</p> <p>During an interview on 10/28/20, at 1:40 p.m. EMS Chief stated all EMS staff should wear a mask at all times. The EMS Chief stated EMS personnel should follow the hospital policy and wear a mask. EMS Chief stated EMS services were part of the hospital.</p>	A 749			

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A 749	<p>Continued From page 2</p> <p>During an interview on 10/28/20, at 3:20 p.m. paramedic (P)-A stated a mask should be worn at all times. P-A stated there were concerns there was a high non-compliance rate with EMS wearing masks while at work. P-A stated paramedics did not wear masks in the garage or in the cab of the rig (ambulance). P-A stated the EMS personnel should be at the top of their game by now as they know about COVID-19.</p> <p>During an interview on 10/28/20, at 3:59 p.m. P-B stated compliance was not good. P-B stated staff from a neighboring state will not wear masks while at work. P-B stated in staff quarters there a lot of personnel that do not wear masks on overnights.</p> <p>During an interview on 10/28/20, at 3:17 p.m. P-C stated we get emails from our supervisors that suggest we wear a mask. P-C stated we have two paramedics in the cab of the rig, we are not six feet apart and one of the paramedics usually does not wear a mask.</p> <p>During an interview on 10/28/20, at 3:45 p.m. the accreditation program manager (APM) stated the EMS personnel were to follow the hospital policy on wearing masks.</p> <p>During video review on 10/28/20, at 4:15 p.m. of the EMS quarters area, located on hospital grounds, dated 10/23/20, at 12:00 a.m. through 4:46 a.m. revealed there were twelve paramedics in that time frame that did not wear a mask in the EMS quarters area. The paramedics came in from the garage area without masks, came out of changing rooms without masks on and walked by other paramedics, and stood by the time clock</p>	A 749			

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A 749	<p>Continued From page 3</p> <p>within six feet of other paramedics with no masks on and had conversations.</p> <p>During an interview on 10/28/20, at 4:40 p.m. the APM stated staff were not six feet apart and that there was a problem on night shift with paramedics who did not wear masks at all times.</p> <p>During an interview on 10/28/20, at 4:50 p.m. Assistant EMS Chief stated the paramedics should have a mask on in staff quarters. The Assistant EMS Chief stated there was a problem on the night shift with paramedics who did not wear a masks.</p> <p>A HEMS (Hennepin Emergency Medical Services) Weekly Update dated 9/4/20, revealed a reminder to wear a mask at all times when practical. We want to reduce the spread of COVID-19.</p> <p>A facility policy titled, Personal Protective Equipment (PPE) Requirements by role grid dated 6/29/20, indicated Ambulatory/Outpatient personnel were to wear surgical mask.</p>	A 749			