

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  150035	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  08/27/2019
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NAME OF PROVIDER OR SUPPLIER  PORTER REGIONAL HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 85 EAST US HWY 6 VALPARAISO, IN 46383
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S 0000  Bldg. 00	<p>This visit was for investigation of a state licensure hospital complaint.</p> <p>Complaint Number: IN00287280</p> <p>Substantiated: Deficiency related to the allegations is cited.</p> <p>Date of Survey: 8/27/2019</p> <p>Facility Number: 005033</p> <p>QA: 9/11/19</p>	S 0000		
S 0726  Bldg. 00	<p>410 IAC 15-1.5-4 MEDICAL RECORD SERVICES 410 IAC 15-1.5-4 (c)(7)(A)(B)</p> <p>(c) An adequate medical record shall be maintained with documentation of service rendered for each individual who is evaluated or treated as follows:</p> <p>(7) The hospital shall ensure the confidentiality of patient records which includes, but is not limited to, the following:</p> <p>(A) A procedure for releasing information from or copies of records only to authorized individuals in accordance with federal and state laws.</p> <p>(B) A procedure that ensures that unauthorized individuals cannot gain</p>			

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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	<p><b>access to patient records.</b></p> <p>Based on document review and interview, the facility MR (Medical Record) staff failed to ensure the MR P&amp;P (Policy &amp; Procedure) related to release of information (ROI), and P&amp;P related to patient right to access PHI (Protected Health Information) were followed for 1 of 5 (Patient # 2) closed MR's reviewed and ROI requests reviewed.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>Review of hospital policy titled: "Release of Protected Health Information (PHI)", indicated on page 1, under POLICY: "the right of patients or their personal representatives to access a patient's protected health information", and on page 2, under "INTRODUCTION", 2nd paragraph, "The facility must permit an individual who the facility has taken reasonable steps to identify, to request access to, or be provided with, an electronic or paper copy of his or her protected health information". Policy last revised 2/1/2018.</li> <li>Review of hospital policy titled: "Right to Access Protected Health Information (PHI)", indicated on page 2, under "Requests for Access and Timely Action", 3. "Extenuating Circumstances", If the facility is not able to provide access to the record within 30 days of the request, a one-time 30 day extension is allowed". Policy last revised 1/31/2018.</li> <li>Review of MRs and/or ROI logs/forms for Patient # 2, indicated the following: <ol style="list-style-type: none"> <li>Patient # 2 visit history for AH # 1 (Acute Care Facility/Hospital) dates back to 1994, with most recent visit/encounter dated 5/8/2019.</li> <li>Multiple request forms ("Authorization to Use and Disclose Protected Health Information") were completed for release of information dating</li> </ol> </li> </ol>	S 0726	<p>Collaborated with Market Information Systems and Market Chief Information Officer – NW Indiana to up load the medical records for patient #2 from the former electronic medical record system (HPF) to Historical Records Viewer. Medical record copies printed, certified and mailed to patient #2 on Friday, September 27, 2019.</p> <p>A new process was implemented to expedite (upon request) the upload of medical records from the former electronic medical record system (HPF) to Historical Records Viewer. Requests for medical records will be fulfilled in compliance with medical record p&amp;p related to release of information and p&amp;p related to patient right to access protected health information.</p> <p>CHS Corporate Information Systems, Market Chief Information Officer – NW Indiana and Porter Regional Hospital Health Information Management Director.</p> <p>Medical record copies were mailed to the patient on Friday, September 27, 2019. New process to expedite historical records was initiated on September 27, 2019.</p>	09/27/2019			

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	<p>back to 5/30/2018, with most recent dated 5/10/2019. The requests included MR health information (i.e. H&amp;P's {History &amp; Physicals}, Discharge Summaries, Progress Notes, Diagnostic reports) for timeframes of: January 2009 through May 2013, May 2017, August through September 2017, and January through August 2018.</p> <p>C. Release of requested MR health information was completed in noted policy timeframes; although there remains to be 3 visits from May 2013 (May 16, May 27 and May 31), that have not been provided-released as requested.</p> <p>D. Communication has occurred (last documented 2/28/2019) with Patient # 2; as well as letter(s)/notes (last noted on 3/28/2019) sent to Patient # 2, by HI # 40 (Health Information Contractual Staff), in regards to "archived records", "currently unavailable".</p> <p>E. The timeframe from the original request ("8/13/2018") for MR health information for visits in May 2013 is noted to be greater than one year.</p> <p>4. In interview on 8/27/2019 at approximately 3:30 pm, approximately 4:45 pm and approximately 5:05 pm, with A # 6 (Director - HIM {Health Information Management}), the following was confirmed:</p> <p>A. Recalled patient requests for MR copies multiple times over a span of visits from last year (2018). Still not able to provide 3 hospital visits from 2013.</p> <p>B. Unsure "what the hold up is" in getting "2013" EV # 21 (Electronic Medical Record System) EMR's"converted to EV # 22 (Electronic Medical Record System). Facility "needs to get this done".</p> <p>C. Still trying to work on getting patient copies of MR's from 2013; is past the 30 days and past the extension.</p>						

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	<p>D. Has "no excuses" as to why this EMR conversion has not been completed. Corporate IT (Information Technology) is responsible for this. "This should already have been done".</p> <p>E. Recently spoke with IT staff member with no answer for timeframe for when conversion will be completed.</p> <p>5. In interview on 8/27/2019 at approximately 4:00 pm and approximately 5:08 pm, with A # 11 (Supervisor - HIM), the following was confirmed:</p> <p>A. Recalled multiple requests from patient (Patient # 2) for records; started last year (2018). Has had multiple conversations with patient with the last one about "a week and a half ago"; informed him/her "will need more time". Have no ETA (Estimated time of arrival) for 3 specific visits from 2013.</p> <p>B. Have been able to get patient copies of MR's from other years; some stored off-site. The conversion for EMR's from EV # 21 to EV # 22, has not been completed by IT; not sure when will have completed. Corporate IT is responsible for conversion.</p> <p>C. No real central log for communication tracking between MR department staff and HI # 40 (Health Information Management Contractual Staff). Both staff though have communicated and/or corresponded with patient- requestor.</p> <p>D. Aware of 3 visits from 2013; not available yet, "up to Corporate IT".</p>			