

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150047	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 05/07/2012
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NAME OF PROVIDER OR SUPPLIER ST JOSEPH HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 700 BROADWAY FORT WAYNE, IN 46802
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED 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
S0000	<p>This visit was for investigation of two State hospital complaints.</p> <p>Complaint Numbers: IN00096818: Unsubstantiated: Lack of Sufficient Evidence IN00100409: Unsubstantiated: Lack of Sufficient Evidence with one deficiency not related to the allegations</p> <p>Date: 5/7/12</p> <p>Facility Number: 005043</p> <p>Surveyor: Linda Plummer, R.N., Public Health Nurse Surveyor</p> <p>QA: cloughlin 05/17/12</p>	S0000		

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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S0762	<p>410 IAC 15-1.5-4 MEDICAL RECORD SERVICES 410 IAC 15-1.5-4(f)(13)</p> <p>(f) All inpatient records, except those in subsections (g), shall document and contain, but not be limited to, the following:</p> <p>(13) A discharge summary authenticated by the physician. A final progress note may be substituted for the discharge summary in the case of a normal newborn infant and uncomplicated obstetric delivery. The final progress note should include any instruction given to the patient and family.</p> <p>Based on policy and procedure review, patient medical record review, and staff interview, the facility failed to ensure the completion of a discharge summary for 4 of 5 short stay patients. (pts. #1, #2, #4 and #5)</p> <p>Findings: 1. at 11:15 AM on 5/7/12, review of the policy and procedure "Chart completion Requirements for Short Stay Patients" (HIM 122), indicated: a. on page 3 under the heading "Final Progress Note", it reads: "A final progress note may be substituted for the discharge summary in the case of patients with problems of a minor nature who require a forty-eight hour or less period of hospitalization, and in the case of normal</p>	S0762	<p>1. How are you going to correct the deficiency?The policy related to short stay (< 48 hours) was reviewed with HIM managers on 5/7/12. No policy changes were required. HIM manager reviewed policy requirements with Chart Processing staff on 5/7/12. Education to physicians regarding the requirements of final progress note (if to be used as the discharge summary) on 5/29/12.2. How are you going to prevent the deficiency from reoccurring in the future? The chart analyst will ask for the final note elements if not on the chart at the time of discharge. 100% chart audits for 30 days to be conducted at the time of discharge for all patients admitted < 48 hours (short stay). Then random chart audits of 10 short stay patients per week for an</p>	05/29/2012			

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	<p>newborn infants...The final progress note must include: a) condition on discharge b) instructions given and provisions made for follow-up care c) discharge diagnoses..."</p> <p>2. review of patient medical records at 10:10 AM on 5/7/12 indicated patients #1, #2, #4, and #5 were all short stay patients and all lacked either a final progress note, with the elements required by HIM policy #122, or a discharge summary note</p> <p>3. interview with staff member #50 at 2:30 PM on 5/7/12 indicated: a. portions of the elements required in policy 122 are found in nursing notes, progress notes, and other areas of the medical record, but not necessarily a completion by the attending physician b. after checking with the medical records staff, it cannot be determined that either a final progress note, or a discharge summary, was performed for patients #1, #2, #4 or #5, as per the policy requirements</p>		<p>additional 3 months. 3. Who is responsible for #1 and #2HIM director4. By what date are you going to have the deficiency corrected? Corrected by 5/29/12</p>	