

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150023	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/01/2013
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NAME OF PROVIDER OR SUPPLIER UNION HOSPITAL INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1606 N SEVENTH ST TERRE HAUTE, IN 47804
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(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
S000000	<p>This visit was for the investigation of one State complaint.</p> <p>Complaint # IN00124379 Unsubstantiated: lack of sufficient evidence. Deficiency unrelated to the allegations is cited.</p> <p>Facility #: 005022</p> <p>Date: 04-01-13</p> <p>Surveyor: Billie Jo Fritch RN, MSN, MBA Public Health Nurse Surveyor</p> <p>QA: claughlin 04/25/13</p>	S000000		

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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S000771	<p>410 IAC 15-1.5-4 MEDICAL RECORD SERVICES 410 IAC 15-1.5-4(g)(7)</p> <p>(g) A short stay record form used for inpatients hospitalized for less than forty-eight (48) hours, observation patients, ambulatory care patients and ambulatory surgery patients shall document and contain, but not be limited to, the following:</p> <p>(7) Final progress note, including instructions to the patient and family with dismissal diagnosis and disposition of patient.</p> <p>Based on document review and interview, the Medical Staff failed to ensure a final progress note was completed for 1 of 5 medical records reviewed, for a short stay patient (P#4).</p> <p>Findings included:</p> <ol style="list-style-type: none"> Review of the Medical and Dental Staff Rules and Regulations (amended 7-19-12) on 04-01-13 indicated the following on page 5: The final progress note for a stay less than forty-eight (48) hours must contain the following: outcome of the hospitalization, case disposition, provisions for follow-up care, and diagnosis. Review of the medical record for P#4, admitted on 02-08-13 at 1940 hours and discharged on 02-09-13 at 1600 hours 	S000771	<p>1. How we are correcting the deficiency. On April 8, 2013 a letter was sent out to ALL physician on staff notifying them that the four elements were required on ALL hospitalized patients, both in-patient and out-patient. The same analysis process will be implemented for all out-patients that are "hospitalized". The Cycle of Refinement of adding outpatients that are placed in a bed to the inpatient process will resolve the citation received. The letters were sent out on April 8th to the physicians. On April 10, 2013, the outpatient records were included in the process of requiring documentation of the four elements for each patient placed in a bed, regardless of the inpatient or outpatient status. 2. How are you going to prevent the deficiency from recurring in the future? All patients that are</p>	04/10/2013			

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	<p>lacked evidence of a final progress note.</p> <p>3. An interview was conducted with B#1 on 04-01-13 at 1405 hours and confirmed the medical record of P#4 does not contain a final progress note as required by the Medical and Dental Staff Rules and Regulations.</p>		<p>hospitalized less than 48 hours, regardless of status of inpatient or outpatient, will be reviewed to make sure the four elements were documented. If, during chart analysis, it is determined that one or more of the elements are missing, the analysis assistant will place the 48 hour discharge summary form on the record and add a missing text deficiency for the elements still required. When the physician completes this form, it will be returned to the queue for review to make sure the form was completed correctly.3. Who is going to be responsible for numbers 1 and 2 above?The Director of Medical Records will be responsible for implementation and monitoring of this process.4. By what date are you going to have the deficiency corrected?This process was implemented on April 10, 2013. Monitoring of compliance will be ongoing.</p>		