

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150129	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 06/20/2013
NAME OF PROVIDER OR SUPPLIER WESTVIEW HOSPITAL			STREET ADDRESS, CITY, STATE, ZIP CODE 3630 GUION RD INDIANAPOLIS, IN 46222		
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S000000	<p>This visit was for the investigation of a State complaint.</p> <p>Complaint: IN00125012 Substantiated, State deficiency related to allegation is cited.</p> <p>Date of Survey: 06-20-13</p> <p>Facility number: 005110</p> <p>Surveyor: John Lee, R.N. Public Health Nurse Surveyor</p> <p>QA: claughlin 07/22/13</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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S001312	<p>410 IAC 15-1.5-10 UTILIZATION REVIEW & DISCHARGE PLANNING 410 IAC 15-1.5-10(e)(1)</p> <p>(e) To facilitate discharge as soon as an acute level of care is no longer required, the hospital shall have effective, ongoing discharge planning that:</p> <p>(1) facilitates the provisions of follow-up care; Based on document review and interview, the facility failed to ensure that the discharge planning policy was followed for 1 of 5 medical records (MR) reviewed (Patient #1).</p> <p>Findings include:</p> <p>1. Review of policy/procedure A-13, Discharge Planning, indicated the following: "Policy A. Discharge planning is a hospital wide process initiated upon admission to identify, anticipate and evaluate the post hospitalization needs of patients and to coordinate resources to meet those needs. B. Discharge planning services shall be available to all patient of Community Hospital Westview. The process shall begin on admission and progress on a timely basis as the patient's condition or status changes.</p>	S001312	The discharge planning policy will be reviewed by all geriatric behavioral health staff. The manager of the behavioral health unit will be responsible for this inservice education to be completed by August 5, 2013. this process will be reviewed annually with the discharge planner at the timeof evaluation by the manager of behavioral health.Effective communications shall be maintained through the discharge planning process with pertinent information and progress summarized and transcribed into the patient's permanentmedical record. The manager of the geriatric behavioral health unit will be responsible for thisdocumentation improvement. This documentation will be monitored thru the QA,QI processover the next six months(thru January, 2014). This documentation improvement process outcome willbe shared with al unit staff by the unit manager at their staff	08/05/2013	

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	<p>D. Discharge planning shall include coordination of / or arrangements for placement in extended care facilities and provisions for referral to services required to improve or maintain patient's health status.</p> <p>5. Effective communications shall be maintained and documented through the discharge planning process with pertinent information and progress summarized and transcribed into the patient's permanent medical record." This policy/procedure was last reviewed/revised on 03/13.</p> <p>2. Review of patient #1's MR indicated the patient, an 81 year old, was admitted to the facility on 01-29-13 from an assisted living facility and had some of the following diagnoses; dementia with increased agitation, aggression and refusal of care.</p> <p>Review of Physician Progress Notes dated 02-06-13 at 1454 hours indicated the following: "At this point, [Person #2] is looking at several extended care facility options. I do think [he/she] needs a higher level of care. Disposition likely will be early next week if [he/she] continues to calm." Review of Physician Progress Notes dated 02-07-13 at 0921 hours indicated the following: "We did talk with the staff at [facility #1] and they felt that they could not longer care for [him/her]</p>		meetings.		

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	<p>and so [Person #2] has decided to look at nursing homes."</p> <p>Review of the Geriatric Social Work Progress Notes dated 02-06-13 at 1636 hours indicated the following: "Writer spoke with [Person #1] at [facility #1] regarding patient. Gave update and shared behaviors. Shared that [MD #1] feels that patient needs more care and structure at this time instead of assisted living. [Person #1] agreed. Writer contacted [Person #2] spoke about extended care facility placement and asking [him/her] to give writer referrals of facilities [he/she] would like to try."</p> <p>Review of the Geriatric Social Work Progress Notes dated 02-08-13 at 1230 hours indicated the following: "Contact with family: [Person #2] to inform patient will be discharged today to [facility #1]. [Person #2] stated that [he/she] thought [he/she] had more time to arrange for the patient. Shared that the doctor is discharging [him/her] due to [his/her] progress and [he/she] would need to figure out placement while [he/she] is back at assisted living. Contact with placement: Contacted assisted living, [facility #1], to speak with [Person #1] to confirm discharge. Left message, but also spoke with [him/her] on phone yesterday to inform of this."</p> <p>The physician wrote an order for the patient to be discharged to assisted living</p>						

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	<p>on 02-08-13 at 0900 hours. Review of the patient's MR indicated the patient was discharged to the assisted living facility on 02-08-13 at 1137 hours.</p> <p>Patient #1's MR lacked documentation that the patient's condition improved so the patient could be discharged to an assisted living facility. Patient #1's MR lacked documentation that facility #1 had agreed to accept patient #1 upon discharge from the hospital.</p> <p>2. On 06-20-13 at 1115 hours, staff #42 confirmed that he/she spoke with Person #1 at facility #1 about patient #1 returning to facility #1, but did not document in the MR that facility #1 agreed to accept patient #1 back.</p>				