

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15J200	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/16/2013
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NAME OF PROVIDER OR SUPPLIER EVANSVILLE PSYCHIATRIC CHILDREN'S CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 3300 E MORGAN AVE EVANSVILLE, IN 47715
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A0000	<p>This visit was for a Federal psychiatric recertification survey.</p> <p>Facility Number: 005966</p> <p>Dates: 1-14-13 through 1-16-13</p> <p>Surveyors: John Lee, RN Public Health Nurse Surveyor</p> <p>Billie Jo Fritch, RN, MSN, MBA Public Health Nurse Surveyor</p> <p>Jennifer Hembree, RN Public Health Nurse Surveyor</p> <p>QA: cloughlin 01/29/13</p>	A0000		
	<p>This visit was for a Federal recertification survey.</p> <p>Facility Number: 005966</p>	B0000		

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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B0109	<p>482.61(a)(5) DEVELOPMENT OF ASSESSMENT/DIAGNOSTIC DATA When indicated, a complete neurological examination must be recorded at the time of the admission physical examination. Based on document review, the facility failed to ensure a neurological examination was completed at the time of admission for 6 of 18 patients. (patients #1, 3, 5, 7, 8, and 11)</p> <p>Findings include;</p> <p>1. Facility policy titled "ADMISSION AND DISCHARGE Patient Physical Examination" last reviewed/revised 7/11 states under policy: "A complete examination and assessment report is required for each child within 24 hours of admission." and under procedures: "1. The referring agency must provide a report of a physical examination and assessment that has been completed within 30 days prior to admission.....3. If the exam within the past 30 days is not available, the admitting physician will perform or arrange for a physical examination within 24 hours of admission." #4 states "The complete physical examination performed by a qualified physician, shall includeC. Neurological assessment....."</p> <p>2. Patient #1 was admitted on 6/12/12. His/her physical exam including a neurological exam was completed on 6/7/10.</p> <p>3. Patient #3 was admitted on 11/20/12. His/her physical exam including a neurological exam was completed on 10/6/12.</p> <p>4. Patient #5 was admitted on 9/27/12. His/her physical exam including a neurological exam was completed on 8/22/12.</p>	B0109	<p>Effective 1/25/13, EPCC Medical Director is the person responsible for reviewing each history and physical which includes a neurological examination at the time of admission (if it was done within 30 days prior to admission) to confirm and/or assess the need for re-evaluation. She will initial the review upon completion and if necessary, notify the on call physician for any follow-up needed for completion within 24 hours of admission. The Admissions Coordinator is the responsible person to assure that the Medical Director has access to the history and physical at the time of admission for complete review. The HIS Director, through Medical Record Committee audits of the medical records will include review of the Medical Director's initials on each history and physical that was completed within 30 days prior to admission.</p>	01/25/2013

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	<p>5. Patient #7 was admitted on 11/9/12. His/her physical exam including a neurological exam was completed on 10/12/12.</p> <p>6. Patient #8 was admitted on 6/1/12. His/her physical exam including a neurological exam was completed on 4/30/12.</p> <p>7. Patient #11 was admitted on 5/18/12. His/her physical exam including a neurological exam was completed on 4/14/12.</p>			

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A0454	<p>482.24(c)(1) ORDERS DATED AND SIGNED</p> <p>(i) All orders, including verbal orders, must be dated, timed, and authenticated promptly by the ordering practitioner, except as noted in paragraph (c)(1)(ii) of this section.</p> <p>(ii) For the 5 year period following January 26, 2007, all orders, including verbal orders, must be dated, timed, and authenticated by the ordering practitioner or another practitioner who is responsible for the care of the patient as specified under §482.12(c) and authorized to write orders by hospital policy in accordance with State law.</p> <p>Based on document review and interview, the facility failed to ensure that staff followed facility policy & procedures for receiving verbal orders for 4 of 4 restraint medical records (MR) reviewed (Patient #2, 8, 17 & 18).</p> <p>Findings include:</p> <p>1. Review of policy/procedure NS Policy indicated the following: "E. Verbal/telephone orders received from MD.</p> <p>2) If order is for precautions, restrictions, etc., then write order in chart.</p> <p>a. Write order, sign prescribing MD's name and your name to order, indicate type of order, i.e., verbal order/telephone order, indicate time and date of order.</p> <p>b. Read back and verify order to MD."</p> <p>This policy/procedure was last reviewed/revised on 04/10.</p>	A0454	<p>The Behavioral Intervention Sheet which includes the physician order for use of restraint was revised on 1/18/13 to include type of restraint and type of order, including readback/verified. The revised form was put into use immediately upon completion 1/18/13. (see section copied below which indicates additions to the order) The clinical administrative team and nurse managers are responsible to monitor form completion. Form completion is reviewed at least three times weekly by clinical administrative team and nurse managers during restraint reviews as well as regularly through medical record audit by the HIS director and committee.</p> <p>MD ORDER £ Initiate Bridge Building Restraint techniques: £ Come-Along £ Littles £ Wall Stabilization £ Corner Stabilization £ Floor Stabilization</p>	01/18/2013			

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	<p>2. Review of patient #2's MR indicated an order was received by a RN on 12-30-12 at 1742 hours that indicated the following: "Initiate Restraint up to 1 hr." The physician signed the order on 12-30-12 at 1838 hours. The MR lacked documentation of being a verbal or telephone order and it could not be determined what kind of restraint that was to be initiated.</p> <p>3. Review of patient #8's MR indicated an order was received by a RN on 01-02-13 at 1822 hours that indicated the following: "Initiate Restraint up to 1 hr." The physician signed the order on 01-02-13 at 1945 hours. The MR lacked documentation of being a verbal or telephone order and it could not be determined what kind of restraint that was to be initiated.</p> <p>4. Review of patient #17's MR, the Progressive Behavioral Intervention Record dated 01-03-13 at 0208 hours, indicated the following: Pt began smacking himself on the side of the head on the ear with a closed fist with a lot of force. A second staff entered the room to assist with pt. Heavy hands were attempted by this staff, however, pt moved from his chair to the ground and</p>		<p>£ 2-person £ 3-person £ Other (describe) _____ RN Signature</p> <p>£ TO £ VO £ RBV Date Time The "L" symbol (which appeared above when saved) is a checkbox on our actual form.</p>	

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	<p>continued to smack himself. A come along was called. Since pt was already on the floor, a two man stabilization on the floor was used. The Progressive Behavioral Intervention Record dated 01-03-13 at 0220 hours indicated the following: Pt's body began to relax and pt shut eyes. This staff gave expectations for staff to roll off of legs. Pt nodded and staff did roll off. Patient #17's MR indicated the RN received an order from the physician on 01-03-13 at 0226 hours, but lacked documentation of what the order was for.</p> <p>5. Review of patient #18's MR indicated an order was received by a RN on 01-03-13 at 0655 hours that indicated the following: "Initiate Restraint." The physician signed the order on 01-03-13 at 0715 hours. The MR lacked documentation of being a verbal or telephone order and it could not be determined what kind of restraint that was to be initiated and the time limit of the restraint.</p> <p>6. On 01-16-13 at 1255 hours, staff #40 confirmed that most restraint orders are received via the telephone from the physician. Staff #40 confirmed the facility utilizes Bridgebuilding techniques to hold/restrain patients.</p>			

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A0458	<p>482.24(c)(2) CONTENT OF RECORD All records must document the following, as appropriate: (i) Evidence of-- (A) A medical history and physical examination completed and documented no more than 30 days before or 24 hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services. The medical history and physical examination must be placed in the patient's medical record within 24 hours after admission or registration, but prior to surgery or a procedure requiring anesthesia services.</p> <p>Based on document review, the facility failed to ensure a history and physical examination was completed no more than 30 days before or 24 hours after admission for 5 of 18 patients. (patient #1, 3, 5, 8, and 11)</p> <p>Findings include;</p> <p>1. Facility policy titled "ADMISSION AND DISCHARGE Patient Physical Examination" last reviewed/ revised 7/11 states under policy: "A complete examination and assessment report is required for each child within 24 hours of admission." and under procedures: "1. The referring agency must provide a report of a physical examination and assessment that has been completed within 30 days prior to admission.....3. If the exam</p>	A0458	<p>Referral sources are notified when a referral packet is received that the Physical Examination must be completed no more than 30 days prior to admission. Effective 1/21/113 if they are unable to secure this for any reason, EPCC physicians on call will complete this within 24 hours of admission. The Admissions Coordinator is the responsible person to review all physical examination paperwork to assure compliance with the stated time frame and notify EPCC Medical Director when an on call physician must follow up and conduct the examination within 24 hours of admission.</p>	01/21/2013	

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	<p>within the past 30 days is not available, the admitting physician will perform or arrange for a physical examination within 24 hours of admission."</p> <p>2. Patient #1 was admitted on 6/12/12. His/her physical exam was completed on 6/7/10.</p> <p>3. Patient #3 was admitted on 11/20/12. His/her physical exam was completed on 10/6/12.</p> <p>4. Patient #5 was admitted on 9/27/12. His/her physical exam was completed on 8/22/12.</p> <p>5. Patient #8 was admitted on 6/1/12. His/her physical exam was completed on 4/30/12.</p> <p>6. Patient #11 was admitted on 5/18/12. His/her physical exam was completed on 4/14/12.</p>			