

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/25/2025

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 150017		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 05/27/2025	
NAME OF PROVIDER OR SUPPLIER LUTHERAN HOSPITAL OF INDIANA				STREET ADDRESS, CITY, STATE, ZIP COD 7950 W JEFFERSON BLVD FORT WAYNE, IN 46804			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (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
S 0000 Bldg. 00	<p>This visit was for the investigation of a State Licensure Hospital complaint.</p> <p>Complaint Number: IN00455386 - Deficiency related to the allegation is cited.</p> <p>Survey Date: 5/27/2025</p> <p>Facility Number: 005016</p> <p>QA: 6/3/2025</p>			S 0000	<p>/p></p> <p>/p></p> <p>/p></p> <p>/p></p> <p>/p></p>		
S 0930 Bldg. 00	<p>410 IAC 15-1.5-6 NURSING SERVICE</p> <p>Based on document review and interview, staff failed to reassess patient pain after narcotic intervention on two occasions, and failed to assess patient pain prior to narcotic intervention on one occasion in 1 of 5 medical records reviewed (patient 2).</p> <p>Findings Include:</p> <p>1. Review of policy titled: (PCS.03.18) Pain Assessment and Management, network adoption 6/2022, indicated under: V. Action Directives. B. Patient will receive prompt assessment and management of pain. Clinical staff will conduct periodic reassessments of the patient for relief from pain and/or responses to treatment. D. Pain will be assessed utilizing one of six pain scales to accommodate developmental and cognitive capabilities of the population we serve: 1). Numeric 1 - 10 scale - The patient will be asked to rate his/he pain level on a 0 (no pain) to 10 (worst</p>			S 0930	<p>1.p dir="ltr" role="presentation" How</p> <p>1.p dir="ltr" role="presentation" 6/16/25, a group of leaders met to discuss the factors related to the deficiency involving failure to complete a pain assessment prior to and after narcotic administration. This group included the Chief Quality Officer, ACNO, and risk manager. The policy referenced in the survey Policy PCS.03.18 Pain Assessment and Management and it was determined that the policy does not need to be improved.</p>		06/17/2025

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Kasey Ladig

Chief Quality Officer

06/16/2025

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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>pain) numerical scale. This scale provides an objective tool for measurement of the patient's current pain level. Pain scale rating of 0 = no pain; a rating of 1 - 3 = mild pain; a rating of 4 - 6 = moderate pain; a rating of 7 - 10 = severe pain.</p> <p>2. P2's MR indicated the patient received the following pain medication interventions while in the ED on 3/02/25:</p> <p>a. 3:58 pm - morphine, 2 mg, IV push, every 2 hours - int (intermittent needle therapy), PRN (as needed) for severe pain 7 to 10 where patient reported pain 7/10. MR lacked documentation of pain reassessment.</p> <p>b. 10:20 pm - morphine, 2 mg, IV push, every 2 hours - int, PRN for severe pain 7 to 10. MR lacked documentation of patient pain assessed prior to medication administered. MR lacked documentation of pain reassessed after narcotic was administered.</p> <p>3. On 5/27/25 at approximately 12:15 pm, A1 (Chief Quality Officer) confirmed P2's MR lacked documentation of patient pain reassessment after narcotic intervention at approximately 3:58 pm and 10:20 pm on 3/02/25. A1 confirmed P2's MR lacked documentation of reported pain prior to narcotic intervention at approximately 10:20 pm on 3/02/25 and was not reassessed again until approximately 2:35 am on 3/03/25. A1 confirmed P2's pain assessment/reassessment was not documented in the MR, per policy.</p>				<p>1.p dir="ltr" role="presentation" On 6/17/2025,</p> <p>/p></p> <p>1.p dir="ltr" role="presentation" Ten charts of patients who have been given pain medication in the Emergency Department will be audited each month. The results of these audits will be reported to the Chief Quality Officer and Chief Nursing Officer, and reported to the Quality Council on a monthly basis.</p> <p>1.p dir="ltr" role="presentation" The charts will be audited to determine discharge pain assessment and reassessment has been completed by nursing until at least 100% compliance is achieved for 3 consecutive months for patients receiving pain medication.</p> <p>/p></p> <p>1.p dir="ltr" role="presentation" Lutheran Hospital will reinforce that this specific policy is followed by ensuring corrective action is taken for remediation for non-adherence</p>		

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			<p>of the policy among staff as follows:</p> <p>1.p dir="ltr" role="presentation">Corrective action and feedback will occur for non adherence to the specified policy as stated in the Employee Handbook: The disciplinary action that is appropriate for any particular act or misconduct depends upon many factors including the employee's length of service, prior disciplinary record, the seriousness of the misconduct, and the impact of the misconduct on others. The disciplinary action that is administered for any particular act or misconduct rests in the employer's sole discretion. Examples of disciplinary action include, in no particular order, informal counseling, verbal and/or written warnings, investigative or disciplinary suspension, probation, demotion and separation.</p> <p>/p> /p> /p> /p></p>		