STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	005016	A. BUILDING: _____ B. WING _____	C 02/19/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LUTHERAN HOSPITAL OF INDIANA	7950 W JEFFERSON BLVD FORT WAYNE, IN 46804

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S 000	INITIAL COMMENTS The visit was for the investigation of a State hospital licensure complaint. Complaint Number: IN00319485 Unsubstantiated: Lack of sufficient evidence. Unrelated deficiencies are cited. Survey Date: 2/18-19/2020 Facility Number: 005016 QA: 3/3/2020	S 000		
S 788	410 IAC 15-1.5-4 MEDICAL RECORD SERVICES 410 IAC 15-1.5-4(i)(9) (i) Emergency service records shall document and contain, but not be limited to, the following: (9) Copy of transfer form, if patient is referred to the inpatient service of another hospital. If care is not furnished to a patient or if the patient is referred elsewhere, the reasons for such action shall be recorded. This RULE is not met as evidenced by: Based on document review and interview, the facility failed to ensure a transfer form including a physician certification of patient transfer and the written consent for patient transfer to an accepting facility was included in the medical record (MR) for 4 of 20 MR reviewed (Patients #1, 5, 6 & 8).	S 788		4/10/20

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S 788	Continued From page 1 Findings include: 1. Review of the policy/procedure Emergency Medical Treatment and Patient Transfer - EMTALA (revised 9-13) indicated the following: "Appropriate transfer occurs when 1) the transferring hospital provides medical treatment within its capacity and capability that minimizes risks to the individual's health...[and]...3) the transferring hospital sends to the receiving hospital all medical records (or copies thereof) related to the...treatment provided and the informed written consent of certification required..." 2. Review of the policy/procedure Transition of Care (TOC), Continuity of Care Document (CCD) - Transfer to Another Facility and Patient Discharge (revised 6-19) indicated the following: "V. Transferring Patient to Another Facility or Hospital...G...If patient is being transported by stretcher/ambulance, have physician complete "Patient Transfer Form" (Emprint ER-3401-2) (aka Physician Certification Statement)..." 3. Review of the document titled Patient Transfer Form ER-3401-2 (revised 10-19) indicated the following: "To Be Utilized for All Patient Transfers - Emergency and Non-Emergency Complete Sections A and B for All Patient Transfers. Complete Section C Only for Emergency Transfers...Section A...1. Appropriate medical records of the examination and treatment of the patient provided to the receiving facility at the time of transfer...Section B...Risks related to transfer acknowledgement ...I acknowledge I have been informed of the above and agree to transfer by the mode determined by the physician...[and]...I have been informed by the	S 788		

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S 788	Continued From page 2	S 788		

physician that the medical benefits of transfer outweigh the risks...[followed by blank space for a signature of the patient or patient's representative and date & time when signed]...Section C Additional Physician Documentation To Be Completed For Transfers From the Emergency Department and Labor & Delivery...Transfer of the patient to a hospital with additional capacity and/or capabilities is medically indicated...Check only one...The patient is being transferred because of failure, refusal, or inability of an on-call physician to respond...I certify that the medical benefits expected from the provision of appropriate medical care at another facility outweigh the increased risks to the individual... [followed by blank space for the signature of the Transferring Physician]..."

4. Review of the MR for Patient #5 indicated a copy of the [facility name] Critical Care Transport Patient Signature Form (authorizing the financial responsibility for services provided) was signed on 11-22-19 by Family Member FM21 for Patient #5 and the patient was transferred to facility F075 on 11/22/19, and the MR lacked documentation of a Patient Transfer Form ER-3401-2 including documentation of the physician certification of the benefits and risks of patient transfer and/or the signed informed patient consent for transfer to the receiving facility F075.

5. On 2-19-2020 at 1205 hours, the Interim Emergency Department Director A4 confirmed the MR for Pt#5 lacked documentation of a Patient Transfer Form ER-3401-2 including a Physician Certification of Transfer Need and/or a signed Patient Consent for Transfer.

6. Review of the 8-9-19 MR for Patient #1, the 1-23-2020 MR for Patient #6 and the 12-9-19 MR

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S 788	Continued From page 3 for Patient #8 lacked documentation indicating a Patient Transfer Form ER-3401-2 was completed including documentation of the physician certification of the benefits and risks of patient transfer and/or a signed patient consent for transfer to the receiving facility F479. 7. On 2-19-2020 at 1205 hours, 1312 hours and 1346 hours, staff A4 confirmed the MRs for Patients #1, 6 & 8 lacked the indicated transfer documentation.	S 788		
S1518	410 IAC 15-1.6-2 EMERGENCY SERVICES 410 IAC 15-1.6-2(b)(3) (b) The emergency service shall have the following: (3) intergration with other hospital services. This RULE is not met as evidenced by: Based on document review and interview, the facility failed to ensure its Emergency Department (ED) services were integrated with its Patient Access and Registration services for 1 of 20 medical records (MR) reviewed (Patients #5). Findings include: 1. Review of the policy/procedure Consent to Treat (revised 1-2020) indicated the following: "A competent adult patient, 18 years of age or older, may consent to his or her own health care treatment ...An individual may appoint another to act as a representative in matters affecting their health care ..."	S1518		4/12/20

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S1518	Continued From page 4 2. Review of the MR for Patient #5 indicated on 11-22-19 the patient was present in the ED with family members including FM21 (spouse) for approximately 100 minutes and lacked documentation indicating a Consent for Medical Treatment was signed by the patient or the patient's representative during the ED visit. 3. On 2-19-2020 at 1835 hours, the ED Nurse Manager A3 confirmed the patient registration process (which includes the written Consent for Medical Treatment) is not completed by the Patient Access and Registration staff until after the patient is seen by the medical provider in the ED. 4. On 2-19-2020 at 1050 hours, staff A3 and the Quality Manager A5 confirmed the MR for Pt#5 lacked documentation indicating a Consent for Medical Treatment was signed by the patient or the patient's representative during the ED visit.	S1518		
S1522	410 IAC 15-1.6-2 EMERGENCY SERVICES 410 IAC 15-1.6-2 (b)(5)(A)(B) (b) The emergency service shall have the following: (5) Adequate qualified medical and nursing personnel available to meet the needs anticipated by the facility in accordance with 410 IAC 15-1.4-1 and 410 IAC 15-1.5-6, which includes, but is not limited to, the following: (A) A registered nurse on duty and available to patients presenting with an emergency condition, on a	S1522		4/10/20

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S1522	Continued From page 5 twenty-four (24) hour per day, seven (7) day per week basis. (B) A physician available at all times in accordance with 410 IAC 15-1.4 (d) (3) and attending to patients with an emergency condition. This RULE is not met as evidenced by: Based upon document review and interview, the facility failed to ensure that a Registered Nurse (RN) was readily available to patients arriving to the emergency department (ED) with an emergency condition for 2 of 20 medical records (MR) reviewed (Patients #15 & 17). Findings include: 1. Review of the policy/procedure Staffing in the Emergency Department (approved 10-19) indicated the following: "A six week work schedule will be formulated by the Nurse Manager (or designee) using an average number of associates required to assure that all areas on all shifts of Emergency Services are staffed...to provide safe and adequate associate numbers to care for patients..." 2. Review of the policy/procedure Triage of ED Patients (revised 5-19) indicated the following: "Promptly identify patients requiring immediate, definitive care according to the [ESI] Emergency Severity Index (5 Level Triage)... Ambulatory patients presenting to the ED with the following conditions: ACS (Acute Coronary Syndrome)...will be immediately taken back to treatment room. All other ambulatory patients presenting to the ED will receive a gross observation by a triage trained RN documented	S1522		

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S1522	Continued From page 6 by date, time, and signature on the consent to treat form." 3. Review of administrative documentation listing all ED patients that left before triage for the period from 8-1-2019 thru 1-31-2020 indicated the following: A. Patient #15 came to the ED on 10-7-19 at 1332 hours with a chief complaint of chest pain and back pain and was not present at 1415 hours (43 minutes after arrival). B. Patient #17 came to the ED on 12-9-19 at 1442 hours with a chief complaint of chest pain and shortness of breath and was not present at 1636 hours (114 minutes after arrival). 4. Review of the MR for Patient #15 lacked documentation indicating the chief complaint and/or a triage level was established and/or a gross observation was performed and/or lacked documentation that the patient was immediately taken back to a treatment room during the 43 minute patient encounter by the Registered Nurse RN02 identified in the ED Clinical Summary. 5. Review of the MR for Patient #17 lacked documentation indicating the chief complaint and/or a triage level was established and/or a gross observation was performed and/or lacked documentation that the patient was immediately taken back to a treatment room during the 114 minute patient encounter by the Registered Nurse RN03 identified in the ED Clinical Summary. 6. During an interview on 2-19-2020 at 1835 hours and 1905 hours, the ED Nurse Manager A3 confirmed the above findings and confirmed no other documentation was available.	S1522		