

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  150051	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  11/12/2019
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NAME OF PROVIDER OR SUPPLIER  IU HEALTH BLOOMINGTON HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 601 W SECOND ST BLOOMINGTON, IN 47403
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S 0000  Bldg. 00	<p>This visit was for investigation of a state licensure hospital complaint.</p> <p>Complaint Number: IN00291898</p> <p>Substantiated: Deficiency related to the allegations is cited.</p> <p>Date of Survey: 11/12/2019</p> <p>Facility Number: 005047</p> <p>QA: 11/14/19</p>	S 0000		
S 1804  Bldg. 00	<p>410 IAC 15-1.6-5 PSYCHIATRIC SERVICES 410 IAC 15-1.6-5(a)</p> <p>(a) If the hospital provides psychiatric services, the service shall meet the needs of the patients served, within the scope of the service offered, in accordance with acceptable standards of practice.</p> <p>Based on document review and interview, the facility failed to follow its policies regarding family involvement in patient care for 1 of 5 (patient #2) medical records reviewed.</p> <p>1 Policy/procedure review: A. Policy #5442816, Standards of Care, Behavioral Care Unit, last revised 03/2017, indicated: Patient and, if appropriate, family involvement is encouraged to ensure an atmosphere of dignity, realism and respect. Patient/family education is provided to include,</p>	S 1804	<p>Complaint number IN00291898 Facility number 005047 ISDH tag S1804:</p> <p><b><u>1.How are you going to correct the deficiency? If already corrected, include the steps taken and the date of correction.</u></b></p> <p>1.Standard work was created for the management of incoming calls that require a call back to the</p>	12/18/2019

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 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>but not limited to options for treatment, risks and benefits of options or choices, and available resources.</p> <p>B. Policy #5452735, Patient Rights, Responsibilities and Delivery of Patient Care, last revised 09/2018, indicated: Families are an integral part of the patient's hospitalization and recovery and our efforts for education will include them as well as the patient.</p> <p>2. Medical Record Review</p> <p>A. It was documented on 4/5/2019 (Friday) that patient #2's family members #1 and #2 would like to speak to a doctor or therapist tomorrow. Oncoming charge nurse (CN) to be notified of families request.</p> <p>B. It was documented on 4/6/2019 (Saturday) that patient would like to go home, would like to have a family session, feels like family don't understand what is going on with him/her.</p> <p>C. It was documented on 4/8/2019 (Monday) that therapist spoke with patient's parents, who voiced complaints of the patient still being in the hospital. Do not understand why since patient doing ok. Expressed frustrations that no one would talk to them over the weekend about patient's progress. Therapist empathized with this frustration. Family requested a family meeting. Told them that this may not happen, due to doctor's schedule. Voiced frustration with this. Therapist contacted doctor, who agreed to a family meeting at 1400 hours. Therapist and patient's family discussed that patient's discharge would happen after this.</p> <p>D. Family was unable to speak to a doctor or therapist on 4/6-7/2019.</p> <p>3. Interview: On 11/12/2019 at 1330 hours, QMP #6, MD, Psychiatrist, indicated in interview that ideally the care should be the same every day of</p>		<p>individual. This standard work includes communication of family needs for a return call and documentation of conversations with family. This process was shared with the behavioral health team members in a department meeting on 12/10/2019 and 12/12/2019. Make up meetings are in the process of being held for those who could not attend on the previously stated dates and will be completed by 12/18/2019.</p> <p>2. Standard work includes:</p> <ol style="list-style-type: none"> <li>1. The person answering the call will               <ol style="list-style-type: none"> <li>1. Ensure there is an Release of Information for the caller</li> <li>2. Ask what the call is regarding, to ensure the message gets to the proper team member</li> <li>3. Provide an expected time frame for a returned called</li> <li>4. Physically hand the message to the appropriate team member</li> <li>5. Complete a call log that details the caller's name and phone number, the patient involved, and the date and time of the call.</li> </ol> </li> <li>2. The person returning the call will               <ol style="list-style-type: none"> <li>1. Return the call in the expected time frame</li> <li>2. Document a RETURN CALL TO FAMILY note in clinical notes in the electronic medical record (EMR)</li> </ol> </li> </ol>	

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	the week, but at times we have not been able to have enough counseling/therapy staff on weekends.		<p>3. In the department meetings on 12/10/2019 and 12/12/2019, Behavioral health team members were engaged in a discussion with the clinical manager and director regarding the vital role that families and support systems can have during the hospitalization and recovery of a patient. Team members watched the IU Health video <i>Every Person Has A Story</i>. This video reminds us that every individual we encounter deserves our understanding and compassion. The video links our daily interactions to the IU Health Values and Promise and sets the expectation of each of us.</p> <p>4. Patient Rights, Responsibilities, and Delivery of Patient Care policy and Standards of Care, Behavioral Care Unit policy are being sent to the behavioral health team members for review via the units weekly correspondence, "Friday's Facts" on 12/20/2019.</p> <p>e. Staffing has been adjusted to ensure two providers and one therapist is available seven days a week to mitigate variances in care from weekdays to weekends.</p> <p><b><u>2. How are you going to prevent the deficiency from</u></b></p>	

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			<p><b><u>recurring in the future?</u></b></p> <p>1. Moving forward, IU Health Bloomington Behavioral Health team members will follow the standard process of the management of incoming calls by:</p> <p>1. Using a call log to track incoming calls that require a call back. This log will ensure that messages are being given to the appropriate individual and calls are returned in an expected time frame.</p> <p>2. Consistently documenting a Return Call to Family note in the EMR.</p> <p>2. Manager will audit the call log daily to ensure</p> <p>1. Return calls are being made</p> <p>2. Return calls are being documented in the EMR</p> <p>3. If the process is not being followed, the manager will</p> <p>1. Have real time, coaching conversation to identify barriers and explain this requirement</p> <p>2. If there continues to be noncompliance, a verbal warning will be issued</p> <p>3. If further noncompliance occurs, corrective action will occur.</p> <p>4. The manager will share data with the director weekly to evaluate the set goal of 90% compliance in the first 30 days of implementation. The manager will then share data with the director</p>	

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

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			<p>monthly to ensure sustainment of the goal and continual improvement.</p> <p><b>3. Who is going to be responsible for numbers 1 and 2 above; i.e., director, supervisor, etc.?</b> 1. Clinical Manager of Inpatient Behavioral Health</p> <p><b>By what date are you going to have the deficiency corrected?</b> 1. December 18, 2019</p>		