

## Medical Staff Corrective Actions from UCMC CMS Survey

The Office of Healthcare Quality, on behalf of CMS, completed a survey at UCMC on May 15-16, 2109. During the survey, several condition-level deficiencies were identified under the CMS conditions of participation for Patient Rights & Discharge Planning.

The deficiencies resulted in removal of our “Deemed Status” by The Joint Commission and we are under the regulatory jurisdiction of the Maryland State Department of Health, on behalf of CMS.

These deficiencies require immediate corrective actions. The State will conduct an unannounced re-survey in mid-July to ensure correction of all deficiencies.

To maintain our CMS Conditions of Participation deemed status, all regulatory standards must be met.

CMS Survey Deficiencies	CMS Standard	Medical Staff Corrective Action
<b>1. Restraint Findings</b>		
Failed to obtain MD restraint orders within required timeframe.	<p><u>Non-Violent Restraint</u> Order every calendar day.</p> <p><u>Violent Restraint</u> New order based on patient’s continued behaviors and age. <b>New order</b> must be entered:</p> <ul style="list-style-type: none"> <li>• Age &gt;18yrs = within 4 hrs.</li> <li>• 9-17 yrs.’ = within 2 hrs.</li> <li>• &lt;9 yrs. = within 1 hr.</li> </ul>	<p><u>Non-Violent Restraint</u> Provider must <b>EDIT</b> Non-violent restraint order every calendar day.</p> <p><u>Violent Restraint</u> <b>DO NOT EDIT</b> Violent restraints <b>NO PRN ORDERS</b></p>
<p>Failed to document:</p> <ul style="list-style-type: none"> <li>• Reasons to promote medical healing for the Non-violent restraint</li> </ul> <ul style="list-style-type: none"> <li>• Behaviors justifying Violent restraint</li> </ul>	<p><u>Non-Violent Restraint</u> Used to protect medical device or support healing.</p> <p><u>Violent Restraint</u> Used when patient behavior threatens the physical safety of the patient, staff, or others.</p>	<p><u>Non-Violent Restraint</u> Order documentation to include the following:</p> <ul style="list-style-type: none"> <li>• Reason for restraint</li> <li>• Alternatives</li> <li>• Criteria for discontinuation</li> <li>• Current behaviors</li> <li>• Type of restraint</li> </ul> <p><u>Violent Restraint</u> Order documentation to include the following:</p> <ul style="list-style-type: none"> <li>• Threatening physical harm</li> <li>• Combative or violent behavior posing a threat</li> <li>• Self-mutilation or self-harm</li> <li>• Spitting</li> </ul>

CMS Survey Deficiencies	CMS Standard	Medical Staff Corrective Action
Failed to complete Face-to-Face assessment for Violent restraints within required timeframes	<p><u>Violent Restraint</u>  <b>Initial Order</b> – Face-to-Face within 1 hour</p> <p><b>Renewal Order</b> – Face-to-Face within 24 hrs.</p>	<p>Review documentation and assess for continued Violent behaviors.</p> <p>Communicate with primary RN</p>
<b>2. Discharge Planning Findings</b>		
Failed to execute a safe discharge for a vulnerable patient	<p>The hospital must plan and evaluate patients for a safe discharge.</p> <p>The placement of the patient is sufficient to maintain the health and care needs of the patient.</p>	<ol style="list-style-type: none"> <li>1. Plan for a safe discharge: <ul style="list-style-type: none"> <li>• Care Transition Rounds</li> <li>• Communication/coordination with interdisciplinary teams</li> <li>• Consult CRM (Case Management) if there is a question regarding safety of discharge plan.</li> </ul> </li> <li>2. Consider the following: <ul style="list-style-type: none"> <li>• Patient’s consent</li> <li>• Patient’s capacity for decision making</li> <li>• Functional limitations and needs before discharge</li> <li>• Evidence of improvement</li> <li>• OT/PT evaluation for functional and cognitive barriers to post-discharge placement</li> <li>• Placement/location can support patient’s care needs.</li> <li>• Engage patient/family/POA in discharge planning</li> </ul> </li> <li>3. Support staff “<i>Stopping-the-Line</i>” for a safe discharge.</li> </ol>