

# The Pulse

Hospital Education



February 2022

## Patient rights citations for federal fiscal year 2021

In federal fiscal year 2021 (Oct. 1, 2020—Sept. 30, 2021), deficiencies related to **A-0115 patient rights** were the number one cited deficiency in Iowa (7.9%) and cited first (10.9%) for Region 7 of the Centers for Medicare and Medicaid Services (CMS). CMS Region 7 oversees operations in Iowa, Nebraska, Missouri, and Kansas.

Nationally, patient rights was the fourth most frequently-cited deficiency; which includes 4.4% of all surveys conducted.

Below are a few examples of these citations cited in Iowa for FFY 2021:

- Hospital administrative staff failed to ensure that staff recognized and reported incidents of possible child abuse to the Iowa Department of Human Services (DHS) in a timely manner. Failure to recognize and report incidents of possible child abuse in a timely manner resulted in the hospital allowing staff accused of child abuse to continue to work.
- An immediate jeopardy (IJ) situation involved hospital staff failing to ensure nursing staff followed their safety check policies. Hospital patients attempted suicide without staff detection and/or

## Deficiencies and citations

### C-0277 Patient activities

Critical access hospital (CAH) staff must report all drug (medication) administration errors and all adverse drug reactions. The reporting must include two distinct steps in the reporting of drug administration errors and adverse reactions:

1. Information about care of the patient at the time of occurrence.
2. The CAH-wide quality assurance review as addressed in §485.641(b).

In the case of all adverse drug reactions (ADRs) and any medication administration error that has harmed or could potentially cause harm, a report to a practitioner must be made immediately after the staff identify the adverse reaction or potentially-harmful error, to enable a timely assessment and intervention. The report must be made directly in a manner that confirms a practitioner received the report (e.g., a phone call).

If the impact of the medication error that reached a patient is unknown, the error must be reported to a practitioner immediately. Documentation of the error or reaction, including notification to the practitioner, must be in the patient's medical record.

### Example of deficiency:

- CAH did not document the date and/or time of physician notification for all medication errors that reached the patient and could potentially cause harm.

### Tip to prevent deficiencies at C-1016:

engaged in sexual contact with other patients.

- Hospital administrative staff failed to separate a staff member from all patients prior to completing an abuse investigation.
- An immediate jeopardy (IJ) involved patients who exhibited suicidal behavior. Staff failed to remove items that patients had used to engage in suicidal behaviors on multiple occasions.

Source: CMS' [Quality, Certification, and Oversight Reports \(QCOR\)](#).

## Quarterly lunch and learn



**Topic:** Overview of the Survey Process including Staff Vaccination Requirements for COVID-19

**Presenter:** Tracy Herrick

**Date:** March 9, 2022

**Time:** 11:30 a.m.

- You can join via [Google Meets](#) to view video.
- Or, [add this meeting directly to your Google Calendar](#).

**Call-in number:** 1.573.375.5168 PIN: 794 266 048#

If there are specific topics that you would like to see featured in the future, please contact [megan.montalvo@dia.iowa.gov](mailto:megan.montalvo@dia.iowa.gov).

- Update policy and procedures to outline the process for reporting ADRs and medications that have caused harm or have the potential to cause harm. The policy should define the process for documenting notification of the provider in the medical record.

### Deficiencies cited in January 2022

- Immediate jeopardy (IJ) deficiencies: 0
- Emergency Medical Treatment and Active Labor Act (EMTALA) deficiencies: 2

### Employee spotlight



**Christopher Dunn** started with the Iowa Department of Inspections and Appeals in 2008. He worked as a health facilities surveyor for hospitals for seven years and a complaint intake specialist for four years. In 2018 he became the program coordinator for hospitals and rural health clinics. Christopher also assists with reviewing architectural plans for compliance with the guidelines issued by the Facility Guidelines Institute.

Christopher's educational background includes a bachelor's degree in genetics from Iowa State University, a bachelor's degree in nursing from the University of Nebraska Medical Center, a paramedic and critical care certification from the University of Iowa, and master's degrees in healthcare administration and nursing from the University of Phoenix.

### Contact us

## Health Facilities Division website application

In May 2021, DIA's Health Facilities Division launched a new web application. The new application features a user-friendly interface not only for accessing records for health facilities, but also for the Iowa Direct Care Worker Registry for certified nursing assistants (CNAs).

Entity administrators will need to request access to the new application to access facility information, self-reports, CNA information, etc. Once the administrator's access is approved, the administrator will be able to approve any other authorized facility users (i.e., entity delegate, entity HR) who request access for their facility.

Health facility employees, CNAs, and community college users are able to manage their own accounts, including making changes to their contact information.

Please note:

- Each facility is allowed to have **one** assigned entity administrator.
- Each user should be assigned only **one** role. If a user is assigned to multiple roles, the system may not work properly.
- Users should use the email address associated with their place of employment to create their Google or Microsoft account (see PDF guide below).

The website for the new application is [dia-hfd.iowa.gov](http://dia-hfd.iowa.gov).

### Additional resources

- [DIA Health Facilities Database User Guide \(PDF\)](#)
- [DIA's Health Facilities Database: Entity Sign-In](#)  
(YouTube video)

If you have any questions or concerns, or if there are topics you would like to see covered in this newsletter or at a future lunch-and-learn, please contact **Megan Montalvo** at [megan.montalvo@dia.iowa.gov](mailto:megan.montalvo@dia.iowa.gov) or **515.249.9648**.

- [DIA's Health Facilities Database: Approving Entity Users](#)  
(YouTube video for administrators)

The screenshot shows the user interface for the Direct Care Worker Registry & Health Facility Database. At the top, there is a navigation bar with 'Home', 'Reports', and 'Login' links. Below this is a yellow notification banner stating: 'The DIA HFD application has been upgraded and the URL has changed. Please update your bookmarks to the new URL: <https://dia.hfd.iowa.gov>. NOTE: For the best user experience, DIA recommends using the application in Chrome, Edge, or Safari browsers.'

### Direct Care Worker Registry & Health Facility Database

#### DCW SEARCH

Look up eligibility status of Direct Care Workers

Identification Number:

First Name:

Last Name:

City:

Counties:

#### ENTITY SEARCH

Look up contact details for care facilities

Name:

City:

Counties:

Entity Types:

Designation Types:

## Iowa Department of Inspections and Appeals

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