



January 20, 2011

Mary Wood, MN, BSN, RN
Department of Health
20435 72nd Ave. South, Suite 200
Kent, Washington 98032

Re: SCH Statement of Deficiencies (SOD)

Dear Ms. Wood:

Thank you for the opportunity to respond to your letter and the Department of Health (DOH) Statement of Deficiencies (SOD) dated January 10, 2011. As explained in the attached Plan of Correction (POC), Seattle Children's Hospital (SCH) has taken a number of actions designed to address the DOH's concerns. These actions include policy review and revision, as needed, education, improvements in the supervisory structure and process, and monitoring to ensure continued compliance with DOH requirements.

While we have implemented, and will continue to implement, our plan of correction, we disagree with several of the DOH surveyors' findings. Specifically:

1. The SOD appears to imply, perhaps inadvertently, that SCH was responsible for the care of patients at sending/referring hospitals. As DOH knows, this is not correct. While SCH operates a transport service, Medicare Conditions of Participation and other applicable laws place the responsibility for the patient's care and treatment on the hospital where the patient is located.
2. The hospital disagrees with DOH's statement that the lack of clear written guidelines describing the SCH's transport team's processes and responsibilities may have contributed to Patient #1's death, and the statement that lack of a clearly defined RN supervisory structure led to confusion with negative outcomes for patients. The King County medical examiner has determined that this patient died of natural causes. Neither SCH transport guidelines nor our supervisory structure contributed to this patient's death.
3. The hospital has a supervisory structure in place for its ground transport nurses. These nurses are evaluated and supervised by SCH's NICU nurse manager, not a respiratory therapist, as alleged in the SOD.

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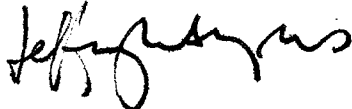
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4. SCH acknowledges that transport service policies, procedures, supervision, training and education require improvement consistent with the SOD. However, we want to note for the record that many of the surveyors' primary concerns resulted from the actions of a single SCH nurse, who acted inappropriately and failed to comply with the hospital's established policies and procedures. This nurse's actions are not in any way indicative of the care that we normally provide. To the contrary, SCH is committed to compliance with applicable laws, regulations, and administrative standards.

While we do not intend to formally appeal the above findings at this time, we do wish to document our disagreement as part of the hospital's plan of correction.

Thank you for your review of the hospital's submission. If you have any questions regarding the hospital's plan of correction, please contact me or Susan Heath, RN, MN, Chief Nursing Officer.

Sincerely,



Jeffrey M. Sconyers
Senior Vice President and General Counsel

Enclosure: Plan of Correction