

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	X3) DATE SURVEY COMPLETED 02/08/2012
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NAME OF PROVIDER OR SUPPLIER AMERICAN SENIOR HOME CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 6900 S GRAY RD INDIANAPOLIS, IN 46237
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N0000	<p>This was a home health agency state complaint investigation survey</p> <p>Complaint # IN0010345 - Substantiated: State deficiencies related to the allegation are cited. Unrelated deficiencies are also cited.</p> <p>Survey dates 2/7-2/8/12</p> <p>Facility# 007934</p> <p>Surveyor: Dawn Snider, RN, PH Nurse Surveyor</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN February 16, 2012</p>	N0000	The creation and submission of this Plan of Correction does not constitute an admission by this provider of any conclusion set forth in the statement of deficiencies, or any violation of regulation.	

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 that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days 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 disclosable 14 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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N0447	<p>Rule 12 Sec. 1(c)(4) The administrator, who may also be the supervising physician or registered nurse required by subsection (d), shall do the following: (4) Ensure the accuracy of public information materials and activities.</p> <p>Based on observation; interview; and review of clinical records, policy, and the agency marketing brochure, the administrator failed to ensure the agency's actual phone number was provided to the Indiana State Department of Health for 1 of 1 agency reviewed.</p> <p>Findings include:</p> <p>1. Before entering the agency on 2/7/12, a phone call was made, at 11:00 AM, to American Senior Home Care at 317-788-2500, the home care contact number as listed on the Indiana State Department of Health documents. The receptionist, employee E, answered the phone. A request was made to speak to the administrator of the home care agency. The phone call was transferred and went into a voice mail message response. The recorded message indicated it was the voice mail of employee B, Regional Director. Instructions were to leave a message or contact her at a number recorded. Another phone call was made to employee E who was informed of the voice mail message response.</p>	N0447	N447 Home health agency administration/managementIt is the practice of this agency to ensure the accuracy of public information materials and activities.Corrective Action for alleged deficient practice:The Administrator has taken action to ensure the accuracy of public infomation and activities.The Administrator has changed the voice mail to indicate a message can be left or to call business cell phone directly effective 2/10/12. The Client's cover sheet inside the client's handbook will be changed to include the telephone number to the American Senior Home Care Agency effective February 29, 2012.The Administrator ensured that the voice mail has the correct message and telephone number by calling into the office and listening to the voicemail.The Administrator has educated the Human Resources department as to the calls coming into the facility to be routed to American Senior Home Care Agency.The front desk at 6900 S. Gray Rd has been given Administrator cell phone number for direct assistance if needed.The Administrator will remove the old client cover sheet from the client	02/29/2012			

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	<p>Instructions by employee E were to leave employee B a voicemail message and employee B would return the call. Again, contact was made with the voice mail message of employee E. A message was left for employee B. Employee B had not returned the call as of 1 PM. Entrance to the corporate address was made on 2/7/2012 at 1:05 PM. The Human Resources Director, employee F, provided a conference room area to wait for employee A, Administrator /Clinical Director. At 1:55 PM employee A arrived at the conference room.</p> <p>2. On 2/8/2012 at 3:10 PM, employee G indicated she answers the calls for the corporate office number and has been employed there for two years. She indicted when someone asked to speak to the administrator for home care, the call is routed into an extension number for Home Health Care. This process has always been followed. The extension used to be answered by the previous administrator, but it now gives instructions to contact employee B's cell phone. Employee G indicated she does not have any knowledge of the actual home care operations or any of the departments. "I simply direct the calls." She indicated that if there were a home care problem, she could contact employee A or employee B on their cell phone. She</p>		<p>handbook and place a revised copy of the client cover sheet. The revised client cover sheet will include the contact telephone number to American Senior Home Care Agency. The Administrator will provide updated copies of client handbook to current clients on February 2/29/2012 that includes change of telephone number for home care. Prevention of alleged deficient practice: The Administrator will check voice mail every 2 hours throughout the day and in checking voicemail will ensure that greeting is up to date and accurate. The Administrator will destroy all old client handbooks. The new client handbook will have a date that it has been revised listed on the front cover. Who is responsible for the correction: The Administrator will be responsible to ensure that the voicemail is accurate and checked daily. The Administrator will be responsible for correcting the client cover sheet for client handbook. Completion Date: February 10, 2012 for voicemail, February 29, 2012 for client handbook.</p>				

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	<p>indicated that, in the past two years, there had been two phone calls when a request was made to speak to the home care agency. One of those two calls was made yesterday.</p> <p>3. Upon entering the Rosegate Commons location at 3:10 PM on 2/7/12, employee B indicated patients nor families call the corporate office phone number. They are instructed to contact 317-889-4877, the agency's actual number, which is available 24/7.</p> <p>3. Clinical Record #1, start of care 4/6/11, had evidence of receipt of the Client Handbook which included a listing of "IMPORTANT PHONE NUMBERS" The number 889-4877 was identified as the Home Health Aide's Office which is open 24 hours a day.</p> <p>4. Clinical Record #2, start of care 2/1/11, had evidence of receipt of the Client Handbook which included a listing of "IMPORTANT PHONE NUMBERS" The number 889-4877 was identified as the Home Health Aide's Office which is open 24 hours a day.</p> <p>5. Clinical Record #3, start of care 5/9/2009, had evidence of receipt of the Client Handbook which included a listing of "IMPORTANT PHONE NUMBERS"</p>			

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	<p>The number 889-4877 was identified as the Home Health Aide's Office which is open 24 hours a day.</p> <p>6. The policy, revision date 1/10, titled "Client Handbook" states, "POLICY: American Senior Home Care will provide a "Client Handbook" to all Home Health Agency clients/legal representative or other individual responsible for the client's care. PROCEDURE: ... 3. The client handbook will include information on the following: a. American Senior Home Contact Information."</p> <p>7. The agency brochure contains an insert area for the business card of the Clinical Director, employee A. It contains the agency number 317-889-4887, cell number of employee A, and a fax number.</p>			
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N0614	<p>Rule 15 Sec. 1(c) Clinical record information shall be safeguarded against loss or unauthorized use. Written procedures shall govern use and removal of records and conditions for release of information. Patient's written consent shall be required for release of information not authorized by law. Current service files shall be maintained at the parent or branch office from which the services are provided until the patient is discharged from service. Closed files may be stored away from the parent or branch office provided they can be returned to the office within seventy-two (72) hours. Closed files do not become current service files if the patient is readmitted to service.</p> <p>Based on observation, interview and review of policy and Indiana State Department of Health documents, the agency failed to ensure the clinical records were maintained at the agency address provided to the Indiana State Department of Health for 1 of 1 home care agencies.</p> <p>Findings include:</p> <p>1. The Indiana State Department of Health documentation identifies the agency address is 6900 S. Gray Road, Indianapolis, IN.</p> <p>1. On 2/7/2012 at 2:15 PM, employee A, the administrator/clinical director, indicated the clinical records for the home care patients were at 7525 Rosegate</p>	N0614	N614 Clinical RecordsIt is the practice of this agency to ensure that the clinical record be safeguarded against loss or unauthorized use. Current service files shall be maintained at the parent or branch office from which the services are provided. Corrective Action for alleged deficient practice: The Administrator has taken action to ensure that all clinical records are maintained at the corporate office at 6900 S. Gray Road, Indianapolis, IN 46237. The clinical records were boxed up and transported to 6900 S. Gray Road, Indianapolis, IN 46237 by the Administrator and Assistant and placed in Administrator's locked file cabin on 2/10/12. The Administrator has taken the clinical records and placed them in the Administrator office where they are kept in a locked filed drawer. The Administrator has	02/10/2012			

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	<p>Drive, Indianapolis, IN, an assisted living facility known as Rosegate Commons.</p> <p>2. On 2/7/2012 at 2:40 PM, employee B, the regional director, indicated the clinical records for the home care patients were located at 7525 Rosegate Drive, Indianapolis IN. She indicated the clinical records had been there for two weeks.</p> <p>3. On 2/7/2012 at 2:45 PM, employee B accessed the location where the clinical records had been maintained at 6900 S Gray Road. No active clinical records were observed.</p> <p>4. On 2/7/2012 at 3: 15 PM, clinical records were observed in the home care office at 7525 Rosegate Drive. The clinical records were located in file boxes and file cabinets. The office is secured by a lock.</p> <p>5. On 2/8/2012 at 1:35 PM, employee D, the assistant clinical director, indicated staff used to go to the corporate office to audit the charts, but, due to staffing problems, it was necessary to bring the clinical records to the home care agency at 7525 Rosegate Drive.</p> <p>6. The policy dated revised 1/10 titled "Clinical Records" states, "4. The Administrator is responsible for</p>		<p>incorporated the following action plan concerning clinical records: Any client documentation/paperwork that is to be filed in the clinical records is placed in a file folder and transported back to 6900 S. Gray Road, Indianapolis, IN 46237 every 48-72 hours and filed into clinical records. The Adminstrator will transport documentation/paperwork.Prevention for alleged deficient practice:The Administrator has educated Assistant about the policy concerning the clinical records on 2/9/2012, that all clinical records will remain at 6900 S. Gray Road. That any documentation/paperwork recieved for a client shall be placed in a file folder located in Adminstrator office and be transported to by Administrator to 6900 S.Gray Road every 48-72hrs to be filed in clinical record. The Administrator will ensure that the clinical records remain at 6900 S.Gray Road by transporting any paperwork/documentation recieved evry 48-72 hours.Who will be responsible for correction:The Adminstrator will be responsible to ensure that the client clinical records remain at 6900 S. Gray Road. The Administrator will be responsible for transporting any paperwork/documentaion to 6900 S. Gray Road.The Administrator will approve or deny any request</p>				

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	safekeeping of each client's Clinical Record, for securing it from loss, destruction or use by unauthorized people, and for assuring that it is stored in a central file ... 5. The Administrator shall assure that the Clinical Record is only removed from within the Agency's jurisdiction in accordance with court order, subpoena or statute."		made to remove clinical records from 6900 S. Gray Road.Completion Date: February 10, 2012	