

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 10/31/2012
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NAME OF PROVIDER OR SUPPLIER BRIGHTSTAR HEALTHCARE	STREET ADDRESS, CITY, STATE, ZIP CODE 9292 N MERIDIAN ST STE 308 INDIANAPOLIS, IN 46240
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N0000	<p>This visit was for a home health state licensure survey.</p> <p>Survey Dates: October 30-31, 2012</p> <p>Facility Number: 011449</p> <p>Surveyors: David Eric Moran, BSN, RN, Public Health Nurse Surveyor - Team Leader Kelly Ennis, BSN, RN, Public Health Nurse Surveyor</p> <p>Census Service Type: Skilled: 20 Home Health Aide Only: 0 Personal Care Only: 144 Total: 164</p> <p>Sample: RR w/HV: 0 RR w/o HV: 8 Total: 8</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN November 2, 2012</p>	N0000		

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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N0522	<p>410 IAC 17-13-1(a) Patient Care Rule 13 Sec. 1(a) Medical care shall follow a written medical plan of care established and periodically reviewed by the physician, dentist, chiropractor, optometrist or podiatrist, as follows:</p> <p>Based on policy review, record review, and interview, the home health agency failed to ensure visits and treatments were provided as ordered in 2 of 8 records reviewed with the potential to affect all patient's of the agency who receive Skilled Nursing services (#1 and 2).</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Facility policy titled "Standards of Practice" policy number 02.02 dated 5/11 states, "Visits are performed as ordered by the physician on the Home Health Certification Plan of Care." 2. Facility policy titled "Skilled Nursing Services" policy number 02.10 dated 5/11 states, "Skilled nursing care is performed in accordance with doctor's orders in a medically approved plan of care." 3. Facility policy titled "Scope of Services" policy number 2.01 undated states, "Any 	N0522	The Administrator has inserviced the nursing staff on Regulation 410 IAC 17-13-1(a) Patient Care. All HHA records will be audited quarterly for evidence that 410 IAC 17-13-1(a) has been met. The Administrator will be responsible for monitoring this corrective action to ensure these deficiencies are corrected and do not recur.	11/09/2012			

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	<p>skilled nursing performed shall be under the direction of a physician and according to the patient's plan of care."</p> <p>4. Clinical record #1, start of care 10/10/11, contained a plan of care for the certification periods dated 8/20/12 - 10/18/12 and 10/19/12 - 12/17/12 with orders for Skilled Nursing 12 hours per week for 9 weeks for respite care. The record evidenced Skilled Nursing visits were made on 8/22, 9/20, and 10/4.</p> <p>During and interview on 10/30/12 at 5:00 PM, employee G, Registered Nurse (RN), indicated there were missed visits resulting in 'gaps' in the chart because the agency was trying to find a LPN to match the mother's preferences. Employee G indicated she should have written a note explaining the 'gap' between 8/22/12 to 10/4/12. Employee G also indicated the physician was not notified of such 'gaps.'</p> <p>5. Clinical record #2, start of care 11/2/10, contained a plan of care for the certification period dated 8/22/12 - 10/20/12 with orders that state,"RN or LPN [licensed practical nurse] to see patient 3x/ [times per] week and PRN [as necessary] as family requests X [for] 9 weeks for assessment, medication</p>			

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	<p>administration, suctioning via tracheostomy, and assistance with ADL's [Activities of Daily Living]. RN to also perform supervisory LPN visits every 30 days. RN/LPN to monitor mentation, skin integrity and medication compliance. RN to regularly reevaluate the nursing needs of the patient in the home setting." Review of the Nursing Clinical Progress Notes evidenced Catheter Care was provided on 9/16/12, 9/18/12, 9/20/12, 9/23/12, 9/25/12, 9/27/12, 9/30/12, 10/2/12,10/4/12, 10/7/12, 10/9/12, 10/11/12, 10/14/12, 10/16/12, and 10/18/12. The record failed to evidence an order for Catheter Care.</p> <p>On 10/30/12 at 5:10 PM, employee G, RN, indicated there was no order for catheter care.</p>			

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N0524	<p>410 IAC 17-13-1(a)(1) Patient Care Rule 13 Sec. 1(a)(1) As follows, the medical plan of care shall:</p> <ul style="list-style-type: none"> (A) Be developed in consultation with the home health agency staff. (B) Include all services to be provided if a skilled service is being provided. (B) Cover all pertinent diagnoses. (C) Include the following: <ul style="list-style-type: none"> (i) Mental status. (ii) Types of services and equipment required. (iii) Frequency and duration of visits. (iv) Prognosis. (v) Rehabilitation potential. (vi) Functional limitations. (vii) Activities permitted. (viii) Nutritional requirements. (ix) Medications and treatments. (x) Any safety measures to protect against injury. (xi) Instructions for timely discharge or referral. (xii) Therapy modalities specifying length of treatment. (xiii) Any other appropriate items. <p>Based on policy review, record review, and interview, the agency failed to ensure the plan of care included all medications in 1 of 8 records reviewed with the potential to affect all the agency's patients. (#5)</p> <p>The findings include:</p> <ol style="list-style-type: none"> 1. Facility policy titled "Medication Orders and Administration," policy 	N0524	The Administrator has inserviced the staff on Regulation 410 IAC 17-13-1(a)(1). Patient Care.All HHA records will be audited quarterly for evidence that 410 IAC 17-13-1(a)(1) has been met.The administrator will be responsible for monitoring these corrective actions to ensure that these deficiencies are corrected and do not recur.	11/09/2012			

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	<p>number 02.17 date 5/11, states, "All medications including herbals and over the counters medications will be included on the medical plan of care and signed by the physician that will contain the medication name, dosage, route and frequency."</p> <p>2. Clinical record #5, start of care 9/28/11, included a Home Health Certification and Plan of Treatment for the Certification Period from 7/12/12 to 9/9/12 that included the medications Folbic, Mirazepine, Spiriva, Omeprazole, Allopurinol, Benadryl, Metoprolol, Tylenol, Albuterol, and Oxygen.</p> <p>On 8/29/12, employee D, Licensed Practical Nurse (LPN), noted, "Lidoderm patch applied. 1/2 vicodin pill taken at 5:30." The plan of care failed to evidence an order for Lidoderm patient or vicodin.</p> <p>3. On 10/31/12 at 6:00 PM, employee G, RN, indicated the LPN did not inform RN of the new medications. Employee G indicated the plan of care should have been updated when the new medications orders were received by the physician.</p>			

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N0527	<p>410 IAC 17-13-1(a)(2) Patient Care Rule 13 Sec. 1.(a)(2) The health care professional staff of the home health agency shall promptly alert the person responsible for the medical component of the patient's care to any changes that suggest a need to alter the medical plan of care.</p> <p>Based on policy review, record review, and interview, the home health agency failed to ensure physician was notified regarding changes in the patient's condition for 1 of 8 patient records reviewed with the potential to affect all patients of the agency. (#8)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Facility policy titled "Skilled Nursing Services" policy number 02.10 dated 5/11 states, "Registered Nurses do the following: Ensure that the physician is contacted when there are changes in the patient's condition." 2. Facility policy titled "Standards of Practice" policy number 02.02 dated 5/11 states, "Skilled observation and assessment of the patient's condition is performed upon each nursing visit and reported to the physician as indicated." 3. Clinical record #8, start of care 10/1/12, contained a Home Health 	N0527	The Administrator has inserviced the staff on Regulation 410 IAC 17-13-1(a)(2). Patient Care.All HHA records will be audited quarterly for evidence that 410 IAC 17-13-1(a)(2) has been met.The administrator will be responsible for monitoring these corrective actions to ensure these deficiencies are corrected and do not recur.	11/08/2012			

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	<p>Certification and Plan of Care for the certification period dated 10/1/12 - 11/30/12. The Initial Skilled Client Assessment completed on 10/1/12 by employee H, Registered Nurse (RN), indicated the patient had a pain rating of 3 out of 10 for the patient's head pain, and the pain was managed with Fentanyl and Oxycodone.</p> <p>A. On 10/4/12, employee B, licensed practical nurse (LPN), documented the patient had a pain rating of 7 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>B. On 10/5/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the physician was notified of the increased pain.</p> <p>C. On 10/8/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>D. On 10/9/12, employee B, LPN, documented the patient had a pain</p>			

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	<p>rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>E. On 10/10/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the physician was notified of the increased pain.</p> <p>F. On 10/11/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>G. On 10/12/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>H. On 10/15/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>I. On 10/16/12, employee B, LPN,</p>			

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	<p>documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>J. On 10/17/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>K. On 10/18/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>L. On 10/19/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>4. During an interview on 10/31/12 at 6:45 PM, employee G, RN, indicated there was no evidence in the record that the severe headache was reported to the physician.</p>			

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N0532	<p>410 IAC 17-13-1(d) Patient Care Rule 13 Sec. 1(d) Home health agency personnel shall promptly notify a patient's physician or other appropriate licensed professional staff and legal representative, if any, of any significant physical or mental changes observed or reported by the patient. In the case of a medical emergency, the home health agency must know in advance which emergency system to contact.</p> <p>Based on policy review, record review, and interview, the home health agency failed to ensure physician was notified regarding changes in the patient's condition for 1 of 8 patient records reviewed with the potential to affect all patients of the agency. (#8)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Facility policy titled "Skilled Nursing Services" policy number 02.10 dated 5/11 states, "Registered Nurses do the following: Ensure that the physician is contacted when there are changes in the patient's condition." 2. Facility policy titled "Standards of Practice" policy number 02.02 dated 5/11 states, "Skilled observation and assessment of the patient's condition is performed upon each nursing visit and 	N0532	The Administrator has inserviced all staff on Regulation 410 IAC 17-13-1(d). Patient Care.All HHA records will be audited quarterly for evidence that 410 IAC 17-13-1(d) has been met.The Administrator will be responsible for monitoring these corrective actions to ensure these deficiencies are corrected and do not recur.	11/08/2012			

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	<p>reported to the physician as indicated."</p> <p>3. Clinical record #8, start of care 10/1/12, contained a Home Health Certification and Plan of Care for the certification period dated 10/1/12 - 11/30/12. The Initial Skilled Client Assessment completed on 10/1/12 by employee H, Registered Nurse (RN), indicated the patient had a pain rating of 3 out of 10 for the patient's head pain, and the pain was managed with Fentanyl and Oxycodone.</p> <p>A. On 10/4/12, employee B, licensed practical nurse (LPN), documented the patient had a pain rating of 7 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>B. On 10/5/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the physician was notified of the increased pain.</p> <p>C. On 10/8/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the physician was</p>			

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	<p>notified of the increased pain.</p> <p>D. On 10/9/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>E. On 10/10/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the physician was notified of the increased pain.</p> <p>F. On 10/11/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>G. On 10/12/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>H. On 10/15/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record</p>			

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	<p>failed to evidence the physician was notified of the increased pain.</p> <p>I. On 10/16/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>J. On 10/17/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>K. On 10/18/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>L. On 10/19/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the physician was notified of the increased pain.</p> <p>4. During an interview on 10/31/12 at 6:45 PM, employee G, RN, indicated</p>			

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NAME OF PROVIDER OR SUPPLIER BRIGHTSTAR HEALTHCARE	STREET ADDRESS, CITY, STATE, ZIP CODE 9292 N MERIDIAN ST STE 308 INDIANAPOLIS, IN 46240
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	there was no evidence in the record that the severe headache was reported to the physician.			

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N0559	<p>410 IAC 17-14-1(a)(2)(G) Scope of Services Rule 14 Sec. 1(a) (2) (G) For purposes of practice in the home health setting, the licensed practical nurse shall do the following: (G) Inform the physician, dentist, chiropractor, podiatrist, or optometrist of changes in the patient's condition and needs after consulting with the supervising registered nurse.</p> <p>Based on record and policy review and interview, the agency failed to ensure the licensed practical nurse informed the physician of changes in the patients condition after consulting with the registered nurse in 1 of 8 records reviewed of those receiving LPN services with the potential to affect all patients of the agency who receive LPN services. (# 8)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Facility policy titled "Standards of Practice" policy number 02.02 dated 5/11 states, "Skilled observation and assessment of the patient's condition is performed upon each nursing visit and reported to the physician as indicated." 2. Clinical record #8, start of care 10/1/12, contained a Home Health Certification and Plan of Care for the 	N0559	The Administrator has inserviced all nursing staff on Regulation 410 IAC 17-14-1(a)(2)(G). Scope of Services.All HHA records will be audited quarterly for evidence that 410 IAC 17-14-1(a)(2)(G) has been met.The Administrator will be responsible for monitoring these corrective actions to ensure these deficiencies are corrected and do not recur.	11/08/2012			

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	<p>certification period dated 10/1/12 - 11/30/12. The Initial Skilled Client Assessment completed on 10/1/12 by employee H, Registered Nurse (RN), indicated the patient had a pain rating of 3 out of 10 for the patient's head pain, and the pain was managed with Fentanyl and Oxycodone.</p> <p>A. On 10/4/12, employee B, licensed practical nurse (LPN), documented the patient had a pain rating of 7 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the Registered Nurse (RN) and notified the physician of the increased pain.</p> <p>B. On 10/5/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>C. On 10/8/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p>			

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	<p>D. On 10/9/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>E. On 10/10/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 for headache. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>F. On 10/11/12, employee B, LPN, documented the patient had a pain rating of 8 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>G. On 10/12/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>H. On 10/15/12, employee B, LPN, documented the patient had a pain</p>			

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	<p>rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>I. On 10/16/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>J. On 10/17/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>K. On 10/18/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>L. On 10/19/12, employee B, LPN, documented the patient had a pain rating of 9 out of 10 that was not</p>			

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	<p>relieved with medication. The record failed to evidence the LPN consulted with the RN and notified the physician of the increased pain.</p> <p>3. During an interview on 10/31/12 at 6:45 PM, employee G, RN, indicated there was no evidence in the record that the severe headache was reported to the RN or the physician.</p>			