

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 02/07/2013	
NAME OF PROVIDER OR SUPPLIER WOODVIEW HOME CARE LLC				STREET ADDRESS, CITY, STATE, ZIP CODE 3417 E STATE BLVD FORT WAYNE, IN 46805			
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G0000	<p>This was an initial Home Health federal Medicaid certification survey. This was a partial extended survey.</p> <p>Survey Dates: February 6 and 7, 2013. Partial Extended Date: February 7, 2013.</p> <p>Facility Number: IN012370</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN February 8, 2013</p>	G0000					

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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G0121	<p>484.12(c) COMPLIANCE W/ ACCEPTED PROFESSIONAL STD The HHA and its staff must comply with accepted professional standards and principles that apply to professionals furnishing services in an HHA. Based on home visit observation, interview, and policy review, the agency failed to ensure staff clean equipment between each patient use for 4 of 4 home visit observations with the potential to affect all the agency's patients. (# 1, 2, 3, 4)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. During home visit observation #1 on 2/6/13 at 10:55 AM, employee B performed a manual blood pressure check using cuff and stethoscope. Employee B failed to clean the blood pressure cuff and stethoscope before and after patient care. 2. During home visit observation #2 on 2/6/13 at 11:00 AM, employee B performed a manual blood pressure check using cuff and stethoscope. Employee B failed to clean the blood pressure cuff and stethoscope before and after patient care. 3. During home visit observation #3 on 2/6/13 at 11:05 AM, employee B performed a manual blood pressure check using cuff and stethoscope. Employee B 	G0121	<p>G 0121 This plan of correction is to serve as Woodview Home Care LLC's allegation of compliance.No clients were affected by the deficient practice. It is the practice of Woodview Home Care to be in compliance with accepted Professional Standards. 1. Two new B/P cuffs have been ordered and all non-critical items such as B/P cuffs and stethoscopes have been cleaned before and after each patient use. 2. The infection control policy was updated to reflect the cleaning of "non-critical" items such as B/P cuffs and stethoscopes. P.A.W.S. cleaning wipes have been ordered and will be used to disinfect "non-critical" equipment in between clients. All personnel will be in-serviced on updated infection control policy. 3. Director of Nursing will monitor compliance on the next supervisory visit and every months x 3 months until compliance is achieved. The results will be included in QI monthly for further action if needed.4. Date of correction is February 19, 2013</p>	02/19/2013
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	<p>failed to clean the blood pressure cuff and stethoscope before and after patient care.</p> <p>4. During home visit observation #4 on 2/6/13 at 11:10 AM, employee B performed a manual blood pressure check using cuff and stethoscope. Employee B failed to clean the blood pressure cuff and stethoscope before and after patient care.</p> <p>5. On 2/6/13 at 10:40 AM, employee B indicated the long term care / assisted living facility where the home visit patients live, just got over a flu and pneumonia outbreak.</p> <p>6. The agency's policy titled "Infection Control," no number, not dated, states "Cleaning equipment in the home (i.e. dishes, thermometers, commodes, walker, wheelchair, bath seat, suction machine, oxygen equipment, etc.). Recommendations Equipment used by the patient should be cleaned daily. ... Thermometers should be wiped with alcohol after each use. Use any cleaner you can buy at the grocery store that has the word "disinfectant" on it or diluted bleach may be used to wipe off equipment."</p> <p>On 2/7/13 at 12:40 PM, employee C indicated the policy speaks only to equipment in the home used by the patient</p>						

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	<p>and does not include a blood pressure cuff or stethoscope and that a blood pressure cuff cannot be cleaned. At 1:00 PM, employee C indicated they looked on the blood pressure cuff box and stethoscope box for manufacturer recommendations of cleaning and there is nothing indicating these items have cleaning instructions.</p> <p>7. The article titled "Cleaning and Disinfection of Patient Care Equipment used in the Home Setting" states "One of the risks for transmitting infections to home care and hospice patients is the use of improperly cleaned and disinfected medical equipment. ... Non-critical items are those that come in contact with intact skin but not mucous membranes. Non-critical patient care items may include a blood pressure cuff, laptop computer keyboard, stethoscope, nursing bag taken into the home, pulse oximeter, etc. ... Disinfection of Patient Care Equipment ... Most patient care equipment used by home care and hospice staff as well as surfaces touched by staff in the home would be considered non-critical. It is called non-critical as it carries little risk of causing an infection in patients or staff. However, patient care equipment (e.g., blood pressure cuffs, stethoscopes) can become contaminated with infectious agents (e.g., MRSA) and contribute to the transmission of</p>						

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	<p>infections. Therefore, non-critical medical equipment surfaces should be disinfected with an EPA-registered low- or intermediate-level disinfectant at a minimum of when visibly soiled and on a regular basis (CDC, 2008). The term 'regular basis' is to be defined by the home care and hospice organization. It is suggested that vital sign equipment and supplies be cleaned and disinfected in the home after use and prior to placing the equipment back in the nursing bag for use on another patient. ... In the home setting, disinfection most commonly occurs by wiping a piece of equipment objects with a single-use disposable cloth or prep pad impregnated with a disinfectant. ... Bringing medical equipment and devices into the home that has not been properly cleaned and disinfected constitutes an important reservoir for transmission of infection." Reference: McGoldrick, M. (2009). Cleaning and Disinfection. Home Care Infection Prevention and Control Program. www.HomeCareandHospice.com</p>			