

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 06/05/2012
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NAME OF PROVIDER OR SUPPLIER  INTEGRITY HOME CARE PLUS, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 5508 E 16TH STREET, SUITE C13 INDIANAPOLIS, IN 46218
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N0000	<p>This visit was for a home health initial state licensure survey.</p> <p>Survey dates: 6/4/12-6/5/12</p> <p>Facility # 012827</p> <p>Survey Team:</p> <p>Dawn Snider, RN, PHNS</p> <p>Census Service Type: 0 Skilled Patients: 0 Home Health Aide Only Patients: 0 Personal Service/Hmk: 0 Total: 0</p> <p>The agency had not started services on any patients, but had performed comprehensive assessments on two patients.</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN June 8, 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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N0458	<p>410 IAC 17-12-1(f) Home health agency administration/management Rule 12 Sec. 1(f) Personnel practices for employees shall be supported by written policies. All employees caring for patients in Indiana shall be subject to Indiana licensure, certification, or registration required to perform the respective service. Personnel records of employees who deliver home health services shall be kept current and shall include documentation of orientation to the job, including the following: (1) Receipt of job description. (2) Qualifications. (3) A copy of limited criminal history pursuant to IC 16-27-2. (4) A copy of current license, certification, or registration. (5) Annual performance evaluations.</p> <p>Based on personnel record review and interview, the agency failed to ensure all personnel files evidenced receipt of a job description for 3 of 4 records reviewed (B, C, and D) with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <p>1. Personnel file B, the alternate administrator and director of clinical services, date of hire 1/20/12, failed to evidence the employee had a signed job description for job responsibilities as the alternate administrator and director of clinical services.</p>	N0458	<p>The Administrator/designee will have the Director of Clinical Services sign/date the job description for Director of Clinical Services. Signed job description will be placed in employee's file. The Administrator/designee will have the Director of Clinical Services sign/date the job description for Alternate Administrator. Signed job description will be placed in employee's file. The Administrator will sign/date the job description for Administrator. Signed job description will be placed in employee's file. The Administrator will sign/date the job description for Alternate Director of Clinical Services. Signed job description will be placed in employee's file. During</p>	06/29/2012			

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	<p>2. Personnel file C, the administrator and alternate director of clinical services, date of hire 1/20/12, failed to evidence the employee had a signed job description for job responsibilities as the administrator and alternate director of clinical services.</p> <p>3. Personnel file D, the home health aide, date of hire 9/2/11, failed to evidence the employee had a signed job description for job responsibilities as the home health aide.</p> <p>4. On 6/5/12 at 5:15 PM, the director of clinical services indicated there were no signed job descriptions for personnel B, C, and D.</p>		<p>orientation of new employees, the Administrator/designee will have new employees sign/date the job description for the position they were hired for and place signed copy in employee's file. On-going Before new employees start working, the Administrator/designee will audit all new employee files to ensure the employee has a signed/dated job description. On-going Administrator/Director of Clinical Services/designee will audit 20% of employee files each quarter to ensure there is a signed/dated job description in the employee's file. On-going</p>				

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N0460	<p>410 IAC 17-12-1(g) Home health agency administration/management Rule 12 Sec. 1(g) As follows, personnel records of the supervising nurse, appointed under subsection (d) of this rule, shall:</p> <p>(1) Be kept current. (2) Include a copy of the following: (A) Limited criminal history pursuant to IC 16-27-2. (B) Nursing license. (C) Annual performance evaluations. (D) Documentation of orientation to the job. Performance evaluations required by this subsection must be performed every nine (9) to fifteen (15) months of active employment.</p> <p>Based on personnel record review and interview, the agency failed to ensure the administrator, alternate administrator, director of clinical services, and alternate director of clinical services evidenced receipt of a job description prior to assignment of job responsibilities for 2 of 2 records reviewed (B and C) of supervising nurses with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <p>1. Personnel file B, the alternate administrator and director of clinical services, date of hire 1/20/12, failed to evidence the employee had a signed job description for job responsibilities as the alternate administrator and director of clinical services.</p>	N0460	<p>The Administrator/designee will have the Director of Clinical Services sign/date the job description for Director of Clinical Services. Signed job description will be placed in employee's file. The Administrator/designee will have the Director of Clinical Services sign/date the job description for Alternate Administrator. Signed job description will be placed in employee's file. The Administrator will sign/date the job description for Administrator. Signed job description will be placed in employee's file. The Administrator will sign/date the job description for Alternate Director of Clinical Services. Signed job description will be placed in employee's file. The Administrator/Director of Clinical Services/designee will have the home health aide sign/date the job description for home health</p>	06/29/2012			

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	<p>2. Personnel file C, the administrator and alternate director of clinical services, date of hire 1/20/12, failed to evidence the employee had a signed job description for job responsibilities as the administrator and alternate director of clinical services</p> <p>3. On 6/5/12 at 5:15 PM, the director of clinical services indicated there were no signed job descriptions for personnel B and C.</p>		<p>aide. The signed job description will be placed in the employee's file. During orientation of new employees, the Administrator/designee will have new employees sign/date the job description for the position they were hired for and place signed copy in employee file. On-going Before new employees start working, the Administrator/designee will audit all new employee files to ensure the employee has a signed/dated job description. On-going Administrator/Director of Clinical Services/designee will audit 20% of employee files each quarter to ensure there is a signed/dated job description in the employee's file. On-going</p>				

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N0462	<p>410 IAC 17-12-1(h) Home health agency administration/management Rule 12 Sec. 1(h) Each employee who will have direct patient contact shall have a physical examination by a physician or nurse practitioner no more than one hundred eighty (180) days before the date that the employee has direct patient contact. The physical examination shall be of sufficient scope to ensure that the employee will not spread infectious or communicable diseases to patients.</p> <p>Based on personnel file review and interview, the agency failed to ensure all employees with patient contact had a physical exam that identified the employee was free from communicable disease for 2 of 4 files reviewed (B, and C ) with the potential to affect all the agency's patients.</p> <p>Findings include:</p> <p>1. Personnel file B, the director of clinical services and alternate administrator, date of hire 1/20/12 failed to evidence a physical exam that indicated the employee was free from communicable disease.</p> <p>2. Personnel file C, the administrator and alternate director of clinical services, date</p>	N0462	<p>Administrator will have a physical done. The physical form will indicate the employee is free of infectious and communicable diseases. Administrator will not make any home visits until physical is done. Director of Clinical Services will have a physical done. The physical form will indicate the employee is free of infectious and communicable diseases. Director of Clinical Services will not make any home visits until physical is done. Administrator/Director of Clinical Services/designee will make sure all new employees, who will have patient contact, have a physical indicating they are free of infectious and communicable diseases before seeing their first patient. On-goingThe Administrator/designee will ensure that obtaining completed physical forms with the appropriate working is part of the orientation process for all new employees providing patient</p>	06/29/2012			

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	<p>of hire 1/20/12 failed to evidence a physical exam that indicated the employee was free from communicable disease.</p> <p>3. On 6/5/12 at 4:15 PM, the director of clinical services indicated she could not locate a physical exam for herself and the administrator, employee C.</p>		care. On-going	

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N0520	<p>410 IAC 17-13-1(a) Patient Care Rule 13 Sec. 1(a) Patients shall be accepted for care on the basis of a reasonable expectation that the patient's health needs can be adequately met by the home health agency in the patient's place of residence.</p> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure physician orders for services to meet the patient's health needs by the home health agency in the patient's place of residence for 2 of 3 records reviewed (#1 and 2) with the potential to affect all the patient's of the agency.</p> <p>Findings include:</p> <p>1. Clinical record #1, with a comprehensive nursing assessment dated 5/31/12, failed to evidence signed physician's orders for home care services. The authorization / agreement for services, signed by the patient on 5/15/02, documented skilled nursing and home health aide services were needed. No services had been provided.</p> <p>Documentation on Nurse's Notes dated 5/8/12 and signed by the registered nurse states, "Client informed DOC's that daughter from Atlanta will be here for a month et. Will not need services until after June 4, 2012."</p>	N0520	<p>Administrator/Director of Clinical Services/designee will obtain a physician order (verbal/written) to evaluate patient for home health care before the evaluation visit is conducted.</p> <p>On-going Administrator/Director of Clinical Services/designee will review patient documentation to ensure there is a physician order (verbal/written) to evaluate patient before the nurse conducts the initial evaluation.</p> <p>On-going Orientation for newly hired nurses, conducted by Administrator/Director of Clinical Services/designee, will include information on ensuring nurse sees order (verbal/written) to evaluate patient prior to assessing patient.</p> <p>On-going Administrator/Director of Clinical Services/designee will review the agreement for services once patient is admitted.</p> <p>On-going Administrator/Director of Clinical Services/designee will schedule the appropriate staff.</p> <p>On-going Administrator/Director of Clinical Services/designee will be responsible to check schedules weekly to ensure all patients are scheduled according to physician's orders. On-going Administrator/Director of Clinical</p>	06/29/2012			

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	<p>2. Clinical record #2 contains a skilled nursing plan of care for the "cert period 5/3/12-7/3/12" failed to evidence signed physician's orders. The authorization / agreement for services signed by the patient on 5/9/02 documented skilled nursing and home health aide. No services had been provided.</p> <p>Documentation on page 1 of Oasis-C Home Health Patient Tracking Sheet on M OO30 indicated the start of care is 06/04/2012. A second Oasis-C Home Health Patient Tracking Sheet indicated the start of care is 06/06/12.</p> <p>3. The agency policy dated 2/1/12 titled "INTAKE SERVICE" states, "There is a preferred physician taking medical responsibility for the patient's care, i.e., the physician will establish and periodically review the plan of care ... Obtain physician's orders for home health services."</p> <p>4. The agency policy dated 2/1/12 titled "ACCEPTANCE/ADMISSION OF PATIENTS" states, "The patient must be under a physician's care and the physician must be willing to provide the required written orders for care and/or services."</p> <p>5. On 6/5/12 at 1:50 PM, the director of</p>		<p>Services/designee will review each referral. Evaluation visit will be scheduled as appropriate. On-going If patient/caregiver wants services to start at a later date, Administrator/Director of Clinical Services/designee will discuss with MD and obtain an order to evaluate patient at that time for home care needs and document conversation. On-going Administrator/Director of Clinical Services/designee will review completed admission paperwork to ensure the Start of Care date matches on all paperwork. On-going Administrator/Director of Clinical Services/designee will train newly hired nurses, during the orientation process, that an order (verbal/written) is needed to evaluate patient for home care prior to making assessment visit. Nurses will be instructed to look at order before making assessment visit. On-going Administrator/Director of Clinical Services/designee will train newly hired nurses, during the orientation process, dates must match on all admission paperwork. They will be instructed to review paperwork prior to submitting it to office. On-going Orientation for Director of Clinical Services, done by Administrator/designee will include training on the need to obtain an order (verbal/written) from MD to evaluate patient prior to making assessment visit.</p>				

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	clinical services (DCS) indicated physician's orders were not obtained prior to assessment of patients #1 and #2. The DCS indicated a misunderstanding of the process for obtaining physician's orders and she thought she had time to obtain orders since patients had not started service.		On-going	

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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"> <li>(A) Be developed in consultation with the home health agency staff.</li> <li>(B) Include all services to be provided if a skilled service is being provided.</li> <li>(B) Cover all pertinent diagnoses.</li> <li>(C) Include the following: <ul style="list-style-type: none"> <li>(i) Mental status.</li> <li>(ii) Types of services and equipment required.</li> <li>(iii) Frequency and duration of visits.</li> <li>(iv) Prognosis.</li> <li>(v) Rehabilitation potential.</li> <li>(vi) Functional limitations.</li> <li>(vii) Activities permitted.</li> <li>(viii) Nutritional requirements.</li> <li>(ix) Medications and treatments.</li> <li>(x) Any safety measures to protect against injury.</li> <li>(xi) Instructions for timely discharge or referral.</li> <li>(xii) Therapy modalities specifying length of treatment.</li> <li>(xiii) Any other appropriate items.</li> </ul> </li> </ul> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure there was a medical plan of care signed by the physician for 2 of 3 patients (#1 and #2) with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <p>1. Clinical record #1, with a</p>	N0524	<p>Administrator/Director of Clinical Services/designee will obtain a physician order (verbal/written) to evaluate patient for home health care before the evaluation visit is conducted.</p> <p>On-going Administrator/Director of Clinical Services/designee will review patient documentation to ensure there is a physician order (verbal/written) to evaluate patient before the nurse conducts the initial evaluation.</p> <p>On-going Orientation for newly hired nurses, conducted by</p>	06/29/2012			

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	<p>comprehensive nursing assessment dated 5/31/12, failed to evidence physician's orders for home care services. The authorization / agreement for services, signed by the patient on 5/15/02, documented skilled nursing and home health aide services were needed. No services had been provided.</p> <p>2. Clinical record #2 contained a skilled nursing plan of care dated "cert period 5/3/12-7/3/12" failed to evidence physician's orders. The authorization / agreement for services signed by the patient on 5/9/02 documented skilled nursing and home health aide. No services had been provided.</p> <p>3. The agency policy dated 2/1/12 and titled "INTAKE SERVICE" states, "There is a preferred physician taking medical responsibility for the patient's care, i.e., the physician will establish and periodically review the plan of care .. .Obtain physician's orders for home health services."</p> <p>4. The agency policy dated 2/1/12 titled "ACCEPTANCE/ADMISSION OF PATIENTS" states, "The patient must be under a physician's care and the physician must be willing to provide the required written orders for care and/or services."</p>		<p>Administrator/Director of Clinical Services/designee, will include information on ensuring nurse sees order (verbal/written) to evaluate patient prior to assessing patient.</p> <p>On-going Administrator/Director of Clinical Services/designee will review the agreement for services once patient is admitted.</p> <p>On-going Administrator/Director of Clinical Services/designee will schedule the appropriate staff.</p> <p>On-going Administrator/Director of Clinical Services/designee will be responsible to check schedules weekly to ensure all patients are scheduled according to physician's orders.</p> <p>On-going Administrator/Director of Clinical Services/designee will review each referral. Evaluation visit will be scheduled as appropriate. On-going if patient/caregiver wants services to start at a later date, Administrator/Director of Clinical Services/designee will discuss with MD and obtain an order to evaluate patient at that time for home care needs and document conversation.</p> <p>On-going Administrator/Director of Clinical Services/designee will review completed admission paperwork to ensure the Start of Care date matches on all paperwork.</p> <p>On-going Administrator/Director of Clinical Services/designee will train newly hired nurses, during the orientation process, that an</p>				

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	5. On 6/5/12 at 1:50 PM, the director of clinical services (DCS) indicated physician's orders were not obtained. The DCS indicated a misunderstanding of the process for obtaining physician's orders and that she thought she had time to obtain orders since patients had not started service.		order (verbal/written) is needed to evaluate patient for home care prior to making assessment visit. Nurses will be instructed to look at order before making assessment visit. On-going Administrator/Director of Clinical Services/designee will train newly hired nurses, during the orientation process, dates must match on all admission paperwork. They will be instructed to review paperwork prior to submitting it to office. On-going Orientation for Director of Clinical Services, done by Administrator/designee will include training on the need to obtain an order (verbal/written) from MD to evaluate patient prior to making assessment visit. On-going				

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N0597	<p>410 IAC 17-14-1(l)(1)(B) Scope of Services Rule 14 Sec. (1)(l)(1) The home health aide shall: (B) be entered on and be in good standing on the state aide registry.</p> <p>Based on personnel file review and interview, the agency failed to ensure the aide was entered on and in good standing on the state aide registry for 2 of 2 home health aide personnel records reviewed (A and D) with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <p>1. Personnel file A, date of hire 5/1/12, failed to evidence the agency had checked to ensure the aide was entered on and in good standing on the home health aide registry.</p> <p>2. Personnel file D, date of hire 9/2/11, failed to evidence the agency had checked to ensure the aide was entered on and in good standing on the home health aide registry.</p> <p>2. On 6/5/12 at 3:40 PM, the director of clinical services (DCS) indicated the two employees who were to provide home health services were certified nursing assistants. The DCS indicated her understanding was that if aides were</p>	N0597	<p>Every newly hired aide will be checked against the State Home Health Aide Registry to see if they are on the registry and in good standing. This will be done by the Administrator/Director of Clinical Services/designee. The aide will not be permitted to see patients until it has been verified they are on the registry and in good standing. A copy of the certification verification will be placed in the employee's file. On-going Administrator/Director of Clinical Services/designee will check the home health aide registry status of currently employed home health aides to ensure they are on the registry and in good standing. The aide will not be permitted to see patients until it has been verified they are on the registry and in good standing. A copy of the certification verification will be placed in the employee's file. If after checking the home health aide registry, an aide is not on the home health aide registry; Administrator/Director of Clinical Services/designee will complete the home health aide registry form and send it to the State Department of Health within 5 business days. On-going Every two (2) years, when the aide is</p>	06/29/2012			

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 06/05/2012
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	certified nursing assistants and licensed through the state that was sufficient.		due to renew their certification, the Administrator/Director of Clinical Services/designee will run each home health aide name thru the State Home Health Aide data base to ensure the aide is still in good standing with the State. A copy of certification verification will be placed in the employee's file. On-going		