

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 01/14/2014
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NAME OF PROVIDER OR SUPPLIER HOMETOWN HOME HEALTHCARE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 302 E NORTH B STREET GAS CITY, IN 46933
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G000000	<p>This was a home health initial Medicaid certification survey.</p> <p>Survey Dates: January 9, 10, 13, and 14, 2014</p> <p>Facility #: 013349</p> <p>Medicaid #: N/A</p> <p>Surveyor: Tonya Tucker, RN, PHNS</p> <p>Census by Service Type</p> <table> <tr> <td>Skilled Patients</td> <td>11</td> </tr> <tr> <td>Home Health Aide Patients</td> <td>1</td> </tr> <tr> <td>Personal Service Only Patients</td> <td>0</td> </tr> <tr> <td>Total</td> <td>12</td> </tr> </table> <p>Quality Review: Joyce Elder, MSN, BSN, RN January 17, 2014</p>	Skilled Patients	11	Home Health Aide Patients	1	Personal Service Only Patients	0	Total	12	G000000		
Skilled Patients	11											
Home Health Aide Patients	1											
Personal Service Only Patients	0											
Total	12											
G000121	<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 clinical record and agency policy review and interview, the agency</p>	G000121	Director of nursing in-serviced staff on 1/24/14 on Dr orders	02/14/2014								

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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	<p>failed to ensure the registered nurse had followed the agency's own policy regarding physician orders in 1 of 7 active patient records reviewed creating the potential to affect all the agency's 7 patients.</p> <p>Findings include:</p> <p>1. Clinical record #6, start of care 12/27/13, evidenced a document dated 12/19/13 titled "Doctor Authorization" that states, "Doctor Order: assess & [and] treat for home health SN [skilled nursing] for medication set. Patient to continue Home Health Aide w/[with] [other agency name] per client request admit after holidays 12/27/13."</p> <p>A. On 1/14/13 at 1:04 PM, employee B (registered nurse) indicated employee A (administrator) wrote the physicians order. Employee B indicated he/she later signed the order, but never read it.</p> <p>B. On 1/14/13 at 1:05 PM, employee A admitted to writing the physicians order and having employee B sign.</p> <p>C. Review of personnel file for employee A failed to evidence credentials to support the employee was</p>		<p>policy. DON will be responsible for correcting this deficiency. Verbal Dr orders will only be taken by licensed personnel. 10 % of all clinical records will be audited quarterly to ensure Dr orders are taken only by licensed personnel. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur</p>				

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	<p>a registered nurse or qualified therapist.</p> <p>2. The undated agency policy titled "Physicians Orders" states, "Policy ... Verbal orders may be taken by licensed personnel designated by the agency in accordance with applicable state and federal law and organization policy. ... Special instructions ... 1. When the nurse or therapist receives a verbal order from the physician, he/she shall write the order as given and then read the order back to the physician ... The verbal order shall verify that the order was taken and verified by documenting this on the form and signing the form. the order must include the date, specific order, be signed with the full name and title of the person receiving the order and be sent to the physician for signature. ... 3. Verbal orders are accepted by authorized, licensed agency personnel in accordance with applicable law and agency policy."</p>			

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G000143	<p>484.14(g) COORDINATION OF PATIENT SERVICES All personnel furnishing services maintain liaison to ensure that their efforts are coordinated effectively and support the objectives outlined in the plan of care. Based on clinical record review, agency policy review, and interview, the agency failed to ensure all personnel furnishing services maintained liaison to ensure their efforts were coordinated effectively and supported the objectives outlined in the plan of care in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. On 1/9/14 during the survey entrance conference with employee A, the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p> <p>A. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. The record evidenced a</p>	G000143	<p>Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. QualityImprovement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.</p>	02/14/2014

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	<p>physicians order, signed on 12/19/13 by employee B, for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with hitch he/she was currently an active patient. The record failed to evidence all the services maintained liaison to ensure their efforts were coordinated with the other agency and supported the plan of care.</p> <p>B. On 1/14/14 at 1:04 PM, employee B indicated the administrator had wrote the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency. The employee denied he/she had made contact with the home health aide or any personnel from the other agency for coordination of patient care.</p> <p>2. The undated agency policy titled "Coordination of Patient Services" states, "POLICY All personnel furnishing services shall maintain a liaison to assure that their efforts are coordinated effectively and support the objectives outlined in the Plan of Care. This may be done through formal care conferences; maintaining complete, current care plans; and written and verbal interaction. PURPOSE To</p>						

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	<p>ensure services are coordinated between members of the interdisciplinary team. To ensure appropriate , quality care is being provided to patients. To establish effective interchange, reporting, and coordination of patient care does occur. ... To ensure continuity of care.</p> <p>SPECIAL INSTRUCTIONS ... 1. Care conferences will be held as necessary to establish interchange, reporting, and coordinated evaluation between all disciplines involved in the patient's care. ... a. each staff registered nurse shall meet with the nursing supervisor/team leader weekly or as necessary to review all areas of patient needs. ... 8. All caregivers, including any contracted services, shall have access to the patient plan of care and will be expected to participate in care conferences and other coordination activities, as appropriate.</p> <p>..."</p>			

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G000144	<p>484.14(g) COORDINATION OF PATIENT SERVICES The clinical record or minutes of case conferences establish that effective interchange, reporting, and coordination of patient care does occur. Based on clinical record review, agency policy review, and interview, the agency failed to ensure all personnel furnishing services maintained liaison to ensure their efforts were coordinated effectively and supported the objectives outlined in the plan of care in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. On 1/9/14 during the survey entrance conference with employee A, the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p> <p>A. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. The record evidenced a</p>	G000144	Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. QualityImprovement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.	02/14/2014			

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	<p>physicians order, signed on 12/19/13 by employee B, for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with hitch he/she was currently an active patient. The record failed to evidence all the services maintained liaison to ensure their efforts were coordinated with the other agency and supported the plan of care.</p> <p>B. On 1/14/14 at 1:04 PM, employee B indicated the administrator had wrote the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency. The employee denied he/she had made contact with the home health aide or any personnel from the other agency for coordination of patient care.</p> <p>2. The undated agency policy titled "Coordination of Patient Services" states, "POLICY All personnel furnishing services shall maintain a liaison to assure that their efforts are coordinated effectively and support the objectives outlined in the Plan of Care. This may be done through formal care conferences; maintaining complete, current care plans; and written and verbal interaction. PURPOSE To</p>			

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	<p>ensure services are coordinated between members of the interdisciplinary team. To ensure appropriate , quality care is being provided to patients. To establish effective interchange, reporting, and coordination of patient care does occur. ... To ensure continuity of care.</p> <p>SPECIAL INSTRUCTIONS ... 1. Care conferences will be held as necessary to establish interchange, reporting, and coordinated evaluation between all disciplines involved in the patient's care. ... a. each staff registered nurse shall meet with the nursing supervisor/team leader weekly or as necessary to review all areas of patient needs. ... 8. All caregivers, including any contracted services, shall have access to the patient plan of care and will be expected to participate in care conferences and other coordination activities, as appropriate.</p> <p>..."</p>			

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G000157	<p>484.18 ACCEPTANCE OF PATIENTS, POC, MED SUPER</p> <p>Patients are accepted for treatment on the basis of a reasonable expectation that the patient's medical, nursing, and social needs can be met adequately by the agency in the patient's place of residence.</p> <p>Based on clinical record and document review, agency policy review, and interview, the agency failed to ensure all the patient's needs were met by the agency in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. On 1/9/14 at 9:20 AM during the survey entrance conference with employee A (administrator), the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p>	G000157	<p>Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. QualityImprovement Coordinator will be responsible for monitoring these corrective actions to ensure that this</p>	02/14/2014

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	<p>2. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification.</p> <p>A. The record evidenced a physicians order, signed on 12/19/13 by employee B (Director of Nursing/alternate Administrator), for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with which he/she was currently an active patient.</p> <p>On 1/14/14 at 1:04 PM, employee B indicated the administrator had written the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency.</p> <p>B. The record evidenced a document signed and dated by employee B on 12/27/13 titled "Admission Consent" stating, "Have you been seen by a home care agency within the last 2 months? 'YES' ... If so what was the Reason 'HH [home health] aide' What Agency? '[name of other agency]'."</p>		deficiency is corrected and will recur.				

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G000159	<p>3. The undated agency policy titled "Services Provided" states, "Agency will provide intermittent, part-time or extended hours of skilled nursing and home health aide services to patients in their places of residence. ... Services will be coordinated by the Registered Nurse/Therapist managing the care. ... "</p> <p>484.18(a) PLAN OF CARE The plan of care developed in consultation with the agency staff covers all pertinent diagnoses, including mental status, types of services and equipment required, frequency of visits, prognosis, rehabilitation potential, functional limitations, activities permitted, nutritional requirements, medications and treatments, any safety measures to protect against injury, instructions for timely discharge or referral, and any other appropriate items. Based on clinical record review, policy review, and interview, the agency failed to ensure the plan of care contained a clear and accurate frequency of visits in 1 of 7 active patient records reviewed creating the potential to affect all the 7 patients of the agency. (#5)</p>	G000159	Director of nursing in-serviced staff on 1/24/14 on Plan of Care policy. DON will be responsible for correcting this deficiency. Plan of care to be completed with correct information. 10 % of all clinical records will be audited quarterly to ensure Plan of Cares are being completed with correct information. Quality Improvement	02/14/2014

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	<p>Findings include:</p> <p>1. Clinical record #5, start of care 12/27/13, contained a physicians plan of care for certification period 12/27/13 to 2/24/14 which states, "21. Orders for discipline and treatments (specify amount/frequency/duration) SN [skilled nursing]: To assess and evaluate at recert [recertification] for health and safety issue. Meds [medication] set due to depression and anxiety Summary: SN: med set weekly. ... SN: 1 hr[hour]/day x [times] qowx [every other week] x 9 wks [weeks] med set."</p> <p>A. On 1/9/14, employee C presented surveyor with a document of the patients scheduled visits for January 2014. The document evidenced a frequency for skilled nursing services of "1xmo[month]" that had a single line through it and then a separate frequency of "1xw." The employee indicated he/she was unsure of the correct frequency for skilled nursing visits. The January 2014 calendar included one scheduled skilled nursing visit to be conducted on 1/24/14.</p> <p>B. On 1/13/14 at 11:34 AM, employee A (administrator) indicated the physicians plan of care contained 2 different frequency dates but indicated</p>		Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur				

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G000166	<p>the accurate frequency was 1 time per week.</p> <p>2. The undated agency policy titled "Plan of Care" states, "PURPOSE to provide guidelines for agency staff to develop a plan of care individualized to meet specific identified needs. ... SPECIAL INSTRUCTIONS ... 2. The plan of care shall be completed in full to include: ... c. Type, frequency, and duration of all visits/services"</p> <p>484.18(c) CONFORMANCE WITH PHYSICIAN ORDERS Verbal orders are put in writing and signed and dated with the date of receipt by the registered nurse or qualified therapist (as defined in section 484.4 of this chapter) responsible for furnishing or supervising the ordered services. Based on clinical record review, agency policy review, and interview, the agency failed to ensure verbal orders were put in writing and signed and dated with the date of receipt by the registered nurse or qualified therapist responsible for furnishing or supervising the ordered services in 1 of 11 patients reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. Clinical record #6, start of care</p>	G000166	<p>Director of nursing in-serviced staff on 1/24/14 on Dr orders policy. DON will be responsible for correcting this deficiency. Verbal Dr orders will only be taken by licensed personnel. 10 % of all clinical records will be audited quarterly to ensure Dr orders are taken only by licensed personnel. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur</p>	02/14/2014

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	<p>12/27/13, evidenced a document dated 12/19/13 titled "Doctor Authorization" that states, "Doctor Order: assess & [and] treat for home health SN [skilled nursing] for medication set. Patient to continue Home Health Aide w/[with] [other agency name] per client request admit after holidays 12/27/13."</p> <p>A. On 1/14/13 at 1:04 PM, employee B (registered nurse) indicated employee A (administrator) wrote the physicians order. Employee B indicated he/she later signed the order, but never read it.</p> <p>B. On 1/14/13 at 1:05 PM, employee A admitted to writing the physicians order and having employee B sign.</p> <p>C. Review of personnel file for employee A failed to evidence credentials to support the employee was a registered nurse or qualified therapist.</p> <p>2. The undated agency policy titled "Physicians Orders" states, "Policy ... Verbal orders may be taken by licensed personnel designated by the agency in accordance with applicable state and federal law and organization policy. ... Special instructions ... 1. When the nurse or therapist receives a verbal order</p>						

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G000176	<p>from the physician, he/she shall write the order as given and then read the order back to the physician ... The verbal order shall verify that the order was taken and verified by documenting this on the form and signing the form. the order must include the date, specific order, be signed with the full name and title of the person receiving the order and be sent to the physician for signature. ... 3. Verbal orders are accepted by authorized, licensed agency personnel in accordance with applicable law and agency policy."</p> <p>484.30(a) DUTIES OF THE REGISTERED NURSE The registered nurse prepares clinical and progress notes, coordinates services, informs the physician and other personnel of changes in the patient's condition and needs. Based on clinical record review, agency policy review, and interview, the agency failed to ensure the registered nurse coordinated services in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p>	G000176	<p>Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be</p>	02/14/2014

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	<p>1. On 1/9/14 during the survey entrance conference with employee A, the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p> <p>A. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. The record evidenced a physicians order, signed on 12/19/13 by employee B, for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with hitch he/she was currently an active patient. The record failed to evidence all the services maintained liaison to ensure their efforts were coordinated with the other agency and supported the plan of care.</p> <p>B. On 1/14/14 at 1:04 PM, employee B indicated the administrator had wrote the order and then employee B signed but failed to read the order so was unaware the patient had home</p>		<p>reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. QualityImprovement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.</p>				

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	<p>health aide services with another agency. The employee denied he/she had made contact with the home health aide or any personnel from the other agency for coordination of patient care.</p> <p>2. The undated agency policy titled "Coordination of Patient Services" states, "POLICY All personnel furnishing services shall maintain a liaison to assure that their efforts are coordinated effectively and support the objectives outlined in the Plan of Care. This may be done through formal care conferences; maintaining complete, current care plans; and written and verbal interaction. PURPOSE To ensure services are coordinated between members of the interdisciplinary team. To ensure appropriate , quality care is being provided to patients. To establish effective interchange, reporting, and coordination of patient care does occur. ... To ensure continuity of care. SPECIAL INSTRUCTIONS ... 1. Care conferences will be held as necessary to establish interchange, reporting, and coordinated evaluation between all disciplines involved in the patient's care. ... a. each staff registered nurse shall meet with the nursing supervisor/team leader weekly or as necessary to review all areas of patient needs. ... 8. All caregivers, including any contracted</p>			

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G000300	<p>services, shall have access to the patient plan of care and will be expected to participate in care conferences and other coordination activities, as appropriate. ..."</p> <p>484.18(c) CONFORMANCE WITH PHYSICIANS ORDERS Verbal orders are only accepted by personnel authorized to do so by applicable State and Federal laws and regulations as well as by the HHA's internal policies. Based on clinical record review, agency policy review, and interview, the agency failed to ensure verbal orders were put in writing and signed and dated with the date of receipt by the registered nurse or qualified therapist responsible for furnishing or supervising the ordered services in 1 of 11 patients reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. Clinical record #6, start of care 12/27/13, evidenced a document dated 12/19/13 titled "Doctor Authorization" that states, "Doctor Order: assess & [and] treat for home health SN [skilled nursing] for medication set. Patient to continue Home Health Aide w/[with] [other agency name] per client request admit after holidays 12/27/13."</p>	G000300	Director of nursing in-serviced staff on 1/24/14 on Dr orders policy. DON will be responsible for correcting this deficiency. Verbal Dr orders will only be taken by licensed personnel. 10 % of all clinical records will be audited quarterly to ensure Dr orders are taken only by licensed personnel. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.	02/14/2014			

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	<p>A. On 1/14/13 at 1:04 PM, employee B (registered nurse) indicated employee A (administrator) wrote the physicians order. Employee B indicated he/she later signed the order, but never read it.</p> <p>B. On 1/14/13 at 1:05 PM, employee A admitted to writing the physicians order and having employee B sign.</p> <p>C. Review of personnel file for employee A failed to evidence credentials to support the employee was a registered nurse or qualified therapist.</p> <p>2. The undated agency policy titled "Physicians Orders" states, "Policy ... Verbal orders may be taken by licensed personnel designated by the agency in accordance with applicable state and federal law and organization policy. ... Special instructions ... 1. When the nurse or therapist receives a verbal order from the physician, he/she shall write the order as given and then read the order back to the physician ... The verbal order shall verify that the order was taken and verified by documenting this on the form and signing the form. the order must include the date, specific order, be signed with the full name and</p>						

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G000332	<p>title of the person receiving the order and be sent to the physician for signature. ... 3. Verbal orders are accepted by authorized, licensed agency personnel in accordance with applicable law and agency policy."</p> <p>484.55(a)(1) INITIAL ASSESSMENT VISIT The initial assessment visit must be held either within 48 hours of referral, or within 48 hours of the patient's return home, or on the physician-ordered start of care date. Based on clinical record and document review, agency policy review, and interview, the agency failed to ensure the initial assessment visit was held within 48 hours of referral or on the physician ordered start of care date in 1 of 11 patient records reviewed creating the potential to affect all new patients of the agency. (#7)</p> <p>Findings include:</p> <p>1. Clinical record #7 evidenced a physicians plan of care for certification period 12/5/13 to 2/2/14 for skilled nursing services 1 time per week for 9 weeks for medication set-ups. The plan of care was signed by employee B (director of nursing/alternate administrator) with the verbal start of</p>	G000332	<p>Director of nursing in-serviced staff on 1/24/14 on Admission Process. DON will be responsible for correcting this deficiency. All initial assessments will be completed within 48 hours of referral or within 48 hrs of patient's return home or on the physicians ordered Start of Care date. 10 % of all clinical records will be audited quarterly to ensure all initial assessments will be completed within 48 hours of referral or within 48 hrs of patient's return home or on the physicians ordered Start of Care date. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.</p>	02/14/2014

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	<p>care date as 12/1/13.</p> <p>A. The record contained a physicians order to evaluate and treat for home health care services signed by employee B and dated 12/2/13.</p> <p>B. On 1/13/14 at 10:08 AM, employee C was unable to find documentation to support the patient wanted the initial visit on 12/5/13.</p> <p>C. On 1/13/14 at 10:10 AM, employee A (administrator) indicated the physician's verbal order for start of care was 12/1/13, as shown on the plan of care.</p> <p>2. The undated agency policy titled "Patient admission Process" states, "SPECIAL INSTRUCTIONS 1. Admission criteria are standards by which a patient can be deemed appropriate for admission. These standards include: ... 7. Each patient referred to the agency shall be evaluated by a registered nurse/therapist to determine the immediate care and support needs of the patient... The initial assessment will be completed within forty-eight (48) hours of referral"</p>						

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G000337	<p>484.55(c) DRUG REGIMEN REVIEW</p> <p>The comprehensive assessment must include a review of all medications the patient is currently using in order to identify any potential adverse effects and drug reactions, including ineffective drug therapy, significant side effects, significant drug interactions, duplicate drug therapy, and noncompliance with drug therapy.</p> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure the comprehensive assessment included a review of all medications to identify significant drug interactions in 1 of 11 patient records reviewed creating the potential to affect all future patients of the agency. (#4)</p> <p>Findings include:</p> <p>1. Clinical record #1, start of care 11/18/13, contained a physicians plan of care for certification period 11/18/13 to 1/16/14 with orders for skilled nursing services 1 time per month for diabetic foot care and to assess and evaluate at recertification for health and safety issues.</p> <p>A. The record evidenced a comprehensive assessment and medication profile dated 11/18/13 but failed to evidence significant drug interactions were reviewed upon admission.</p>	G000337	Director of nursing in-serviced staff on 1/24/14 on Medication Profile. DON will be responsible for correcting this deficiency. All drugs interactions will be reviewed at admission and as needed, and reported to physician in a timely manner. 10 % of all clinical records will be audited quarterly to ensure all drugs interactions will be reviewed at admission and as needed, and reported to physician in a timely manner. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.	02/14/2014			

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	<p>B. The document signed and dated on 1/3/14, almost 2 months after the comprehensive assessment was completed, by employee B (director of nursing/alternate administrator) titled "Report of Concern" states, "Concern: Drug interactions Lovastatin-Fish oil Trazadone-fish oil Nabumetone-fish oil-calcium-aspirin Metoprolol-aspirin-fish oil-vit D Dexilant-aspirin-fish oil-lisinopril-metformin-tramadol-and trazadone Lisinopril-aspirin-fish oil-metoprolol Arimidex-aspirin-calcium D-fish oil-lisinopril-metformin Aspirin-Calcium D-fish oil-tramadol-lisinopril Tramadol-fish oil-aspirin Xopenex HFA-lisinopril Fluticasone-aspirin-fish oil Buspirone-aspirin-fish oil Fish oil-aspirin-calcium D-lisinopril-metformin-metoprolol-mult ivitamin Calcium-Aspirin-fish oil Metformin-aspirin-fish oil-metoprolol Magnesium-aspirin-calcium D-fish oil." A fax receipt to the physician was dated 1/3/14.</p> <p>C. On 1/14/14 at 1:45 PM, employee B indicated drug interactions are included in the medication review upon admission.</p>						

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N000000	<p>2. The undated agency policy titled "Medication Profile" states, "POLICY The registered nurse or therapist will complete a medication profile for each patient at the time of admission. ... PURPOSE ... To identify possible ineffective drug therapy, adverse reactions, significant side effects, drug allergies, and contraindicated medications. ... SPECIAL INSTRUCTIONS 1. At the time of admission, the admission professional shall check all medications a patient may be taking to identify possible ineffective drug therapy or adverse reactions, significant side effects, drug allergies, and contraindicated medication. The clinician shall promptly report any identified problems to the physician. ..."</p> <p>This was a home health initial state licensure survey.</p> <p>Survey Dates: January 9, 10, 13, and 14, 2014</p>	N000000		

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N000486	<p>Facility #: 013349</p> <p>Medicaid #: N/A</p> <p>Surveyor: Tonya Tucker, RN, PHNS</p> <p>Census by Service Type</p> <table> <tr> <td>Skilled Patients</td> <td>11</td> </tr> <tr> <td>Home Health Aide Patients</td> <td>1</td> </tr> <tr> <td>Personal Service Only Patients</td> <td>0</td> </tr> <tr> <td>Total</td> <td>12</td> </tr> </table> <p>Quality Review: Joyce Elder, MSN, BSN, RN January 17, 2014</p> <p>410 IAC 17-12-2(h) Q A and performance improvement Rule 12 Sec. 2(h) The home health agency shall coordinate its services with other health or social service providers serving the patient.</p> <p>Based on clinical record review, agency policy review, and interview, the agency failed to ensure all personnel furnishing services maintained liaison to ensure their efforts were coordinated effectively and supported the objectives outlined in the plan of care in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p>	Skilled Patients	11	Home Health Aide Patients	1	Personal Service Only Patients	0	Total	12	N000486	<p>Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all</p>	02/14/2014
Skilled Patients	11											
Home Health Aide Patients	1											
Personal Service Only Patients	0											
Total	12											

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	<p>1. On 1/9/14 during the survey entrance conference with employee A, the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p> <p>A. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. The record evidenced a physicians order, signed on 12/19/13 by employee B, for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with hitch he/she was currently an active patient. The record failed to evidence all the services maintained liaison to ensure their efforts were coordinated with the other agency and supported the plan of care.</p> <p>B. On 1/14/14 at 1:04 PM, employee B indicated the administrator had wrote the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency.</p>		disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. QualityImprovement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.				

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	<p>The employee denied he/she had made contact with the home health aide or any personnel from the other agency for coordination of patient care.</p> <p>2. The undated agency policy titled "Coordination of Patient Services" states, "POLICY All personnel furnishing services shall maintain a liaison to assure that their efforts are coordinated effectively and support the objectives outlined in the Plan of Care. This may be done through formal care conferences; maintaining complete, current care plans; and written and verbal interaction. PURPOSE To ensure services are coordinated between members of the interdisciplinary team. To ensure appropriate , quality care is being provided to patients. To establish effective interchange, reporting, and coordination of patient care does occur. ... To ensure continuity of care. SPECIAL INSTRUCTIONS ... 1. Care conferences will be held as necessary to establish interchange, reporting, and coordinated evaluation between all disciplines involved in the patient's care. ... a. each staff registered nurse shall meet with the nursing supervisor/team leader weekly or as necessary to review all areas of patient needs. ... 8. All caregivers, including any contracted services, shall have access to the patient</p>						

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N000520	<p>plan of care and will be expected to participate in care conferences and other coordination activities, as appropriate. ..."</p> <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 and document review, agency policy review, and</p>	N000520	Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting	02/14/2014

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	<p>interview, the agency failed to ensure all the patient's needs were met by the agency in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <ol style="list-style-type: none"> On 1/9/14 at 9:20 AM during the survey entrance conference with employee A (administrator), the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. <ul style="list-style-type: none"> A. The record evidenced a physicians order, signed on 12/19/13 by employee B (Director of Nursing/alternate Administrator), for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with which 		<p>this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.</p>				

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	<p>he/she was currently an active patient.</p> <p>On 1/14/14 at 1:04 PM, employee B indicated the administrator had written the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency.</p> <p>B. The record evidenced a document signed and dated by employee B on 12/27/13 titled "Admission Consent" stating, "Have you been seen by a home care agency within the last 2 months? 'YES' ... If so what was the Reason 'HH [home health] aide' What Agency? '[name of other agency]'."</p> <p>3. The undated agency policy titled "Services Provided" states, "Agency will provide intermittent, part-time or extended hours of skilled nursing and home health aide services to patients in their places of residence. ... Services will be coordinated by the Registered Nurse/Therapist managing the care. ... "</p>						

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N000524	<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> <p>(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:</p> <p>(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> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure the plan of care contained a clear and accurate frequency of visits in 1 of 7 active patient records reviewed creating the potential to affect all the 7 patients of the agency. (#5)</p> <p>Findings include:</p> <p>1. Clinical record #5, start of care 12/27/13, contained a physicians plan of</p>	N000524	Director of nursing in-serviced staff on 1/24/14 on Plan of Care policy. DON will be responsible for correcting this deficiency. Plan of care to be completed with correct information. 10 % of all clinical records will be audited quarterly to ensure Plan of Cares are being completed with correct information. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur.	02/14/2014			

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	<p>care for certification period 12/27/13 to 2/24/14 which states, "21. Orders for discipline and treatments (specify amount/frequency/duration) SN [skilled nursing]: To assess and evaluate at recert [recertification] for health and safety issue. Meds [medication] set due to depression and anxiety Summary: SN: med set weekly. ... SN: 1 hr[hour]/day x [times] qowx [every other week] x 9 wks [weeks] med set."</p> <p>A. On 1/9/14, employee C presented surveyor with a document of the patients scheduled visits for January 2014. The document evidenced a frequency for skilled nursing services of "1xmo[month]" that had a single line through it and then a separate frequency of "1xw." The employee indicated he/she was unsure of the correct frequency for skilled nursing visits. The January 2014 calendar included one scheduled skilled nursing visit to be conducted on 1/24/14.</p> <p>B. On 1/13/14 at 11:34 AM, employee A (administrator) indicated the physicians plan of care contained 2 different frequency dates but indicated the accurate frequency was 1 time per week.</p> <p>2. The undated agency policy titled</p>			

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N000545	<p>"Plan of Care" states, "PURPOSE to provide guidelines for agency staff to develop a plan of care individualized to meet specific identified needs. ... SPECIAL INSTRUCTIONS ... 2. The plan of care shall be completed in full to include: ... c. Type, frequency, and duration of all visits/services" 410 IAC 17-14-1(a)(1)(F) Scope of Services Rule 14 Sec. 1(a) (1)(F) Except where services are limited to therapy only, for purposes of practice in the home health setting, the registered nurse shall do the following: (F) Coordinate services.</p> <p>Based on clinical record review, agency policy review, and interview, the agency failed to ensure the registered nurse coordinated services in 1 of 7 active patient records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. On 1/9/14 during the survey entrance conference with employee A, the employee indicated the current services the agency provided was skilled nursing services and home health aide services, the agency currently had no shared patients with another agency, and the agency had no contract services.</p>	N000545	<p>Director of nursing in-serviced staff on 1/24/14 on Coordination of Patient Services policy. DON will be responsible for correcting this deficiency. Patients will be asked upon admission " Have you been seen by a Home Care Agency within the last 2 months?" Answers will be reported on the Admission Consent form. Upon Recertification this will be reported on the Recertification Oasis if any changes have occurred. Case Conferences will be held as necessary to coordinate care between all disciplines involved in patients care. 10 % of all clinical records will be audited quarterly to ensure coordination of care is being completed. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this</p>	02/14/2014

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	<p>A. Clinical record #6, start of care 12/27/13, evidenced a physicians plan of care for certification period 12/27/13 to 2/24/14 with orders for skilled nursing services 1 time per week for 9 weeks for medication set-ups and every 60 days for recertification. The record evidenced a physicians order, signed on 12/19/13 by employee B, for skilled nursing services to assess and treat for medication set-ups and for the patient to continue home health aide services with another agency with hitch he/she was currently an active patient. The record failed to evidence all the services maintained liaison to ensure their efforts were coordinated with the other agency and supported the plan of care.</p> <p>B. On 1/14/14 at 1:04 PM, employee B indicated the administrator had wrote the order and then employee B signed but failed to read the order so was unaware the patient had home health aide services with another agency. The employee denied he/she had made contact with the home health aide or any personnel from the other agency for coordination of patient care.</p> <p>2. The undated agency policy titled "Coordination of Patient Services" states, "POLICY All personnel</p>		deficiency is corrected and will recur.				

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	<p>furnishing services shall maintain a liaison to assure that their efforts are coordinated effectively and support the objectives outlined in the Plan of Care. This may be done through formal care conferences; maintaining complete, current care plans; and written and verbal interaction. PURPOSE To ensure services are coordinated between members of the interdisciplinary team. To ensure appropriate , quality care is being provided to patients. To establish effective interchange, reporting, and coordination of patient care does occur. ... To ensure continuity of care. SPECIAL INSTRUCTIONS ... 1. Care conferences will be held as necessary to establish interchange, reporting, and coordinated evaluation between all disciplines involved in the patient's care. ... a. each staff registered nurse shall meet with the nursing supervisor/team leader weekly or as necessary to review all areas of patient needs. ... 8. All caregivers, including any contracted services, shall have access to the patient plan of care and will be expected to participate in care conferences and other coordination activities, as appropriate. ..."</p>			

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N000547	<p>410 IAC 17-14-1(a)(1)(H) Scope of Services Rule 14 Sec. 1(a) (1)(H) Except where services are limited to therapy only, for purposes of practice in the home health setting, the registered nurse shall do the following: (H) Accept and carry out physician, chiropractor, podiatrist, dentist and optometrist orders (oral and written). Based on clinical record review, agency policy review, and interview, the agency failed to ensure the registered nurse accepted the verbal orders in 1 of 11 records reviewed creating the potential to affect all 7 active patients of the agency. (#6)</p> <p>Findings include:</p> <p>1. Clinical record #6, start of care 12/27/13, evidenced a document dated 12/19/13 titled "Doctor Authorization" that states, "Doctor Order: assess & [and] treat for home health SN [skilled nursing] for medication set. Patient to continue Home Health Aide w/[with] [other agency name] per client request admit after holidays 12/27/13."</p> <p>A. On 1/14/13 at 1:04 PM, employee B (registered nurse) indicated employee A (administrator) wrote the physicians order. Employee B indicated he/she later signed the order, but never read it.</p>	N000547	Director of nursing in-serviced staff on 1/24/14 on Dr orders policy. DON will be responsible for correcting this deficiency. Verbal Dr orders will only be taken by licensed personnel. 10 % of all clinical records will be audited quarterly to ensure Dr orders are taken only by licensed personnel. Quality Improvement Coordinator will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will recur	02/14/2014			

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	<p>B. On 1/14/13 at 1:05 PM, employee A admitted to writing the physicians order and having employee B sign.</p> <p>C. Review of personnel file for employee A failed to evidence credentials to support the employee was a registered nurse or qualified therapist.</p> <p>2. The undated agency policy titled "Physicians Orders" states, "Policy ... Verbal orders may be taken by licensed personnel designated by the agency in accordance with applicable state and federal law and organization policy. ... Special instructions ... 1. When the nurse or therapist receives a verbal order from the physician, he/she shall write the order as given and then read the order back to the physician ... The verbal order shall verify that the order was taken and verified by documenting this on the form and signing the form. the order must include the date, specific order, be signed with the full name and title of the person receiving the order and be sent to the physician for signature. ... 3. Verbal orders are accepted by authorized, licensed agency personnel in accordance with applicable law and agency policy."</p>						

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