

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 157580	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 06/08/2015
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NAME OF PROVIDER OR SUPPLIER ADVANCED HOME HEALTH CARE INCORPORATED	STREET ADDRESS, CITY, STATE, ZIP CODE 2834 B 45TH ST HIGHLAND, IN 46322
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G 0000 Bldg. 00	<p>This was a revisit for the extended Federal recertification survey conducted on 4/16/15 to 4/21/15.</p> <p>Survey Date: 6/4/15, 6/5/15, and 6/8/15</p> <p>Facility #: 008247</p> <p>Medicaid Vendor#: N/A</p> <p>Two Conditions of Participation and nine standard level deficiencies were found corrected during this survey.</p> <p>Six new standards and two new Conditions of Participation were cited during this survey.</p> <p>Advanced Home Healthcare Inc. continues to be precluded from providing its own home health aide training and competency evaluation program for a period of 2 years beginning June 8, 2015, - June 8, 2017, due to being found out of compliance with Conditions of Participation 42 CFR 484.14 Organization, Services, and Administration and 484.11 Release of Patient Identifiable OASIS Information.</p>	G 0000		
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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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G 0120 Bldg. 00	<p>QR: JE 6/11/15</p> <p>484.12(b) DISCLOSURE OF OWNERSHIP & MANAGEMENT The HHA also must disclose the following information to the State survey agency at the time of the HHA's initial request for certification, for each survey, and at the time of any change in ownership or management:</p> <p>(1) The name and address of all persons with an ownership or control interest in the HHA as defined in §§420.201, 420.202, and 420.206 of this chapter.</p> <p>(2) The name and address of each person who is an officer, a director, an agent or a managing employee of the HHA as defined in §§420.201, 420.202, and 420.206 of this chapter.</p> <p>(3) The name and address of the corporation, association, or other company that is responsible for the management of the HHA, and the name and address of the chief executive officer and the chairman of the board of directors of that corporation, association, or other company responsible for the management of the HHA.</p> <p>Based on interview, document review, and agency policy review, the agency failed to notify the State Agency of a change in administration.</p> <p>Findings</p>	G 0120	<p>Correction of cited deficiency: Agency notified appropriate State Agency in writing of change in agency Alternate Administrator on 6/8/15. Prevention of deficiency from recurring in the future: Governing Body meeting to approve change in Administrator. Administrator/Alternate</p>	07/07/2015

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	<p>1. Interview on 6/4/15 at 1:45 PM, employee A, clinical nursing supervisor, and employee S, whose position was unclear though she indicated she was the administrator, indicated employee S had not been reported to the state because of a hold up with finger prints.</p> <p>2. Interview on 6/5/15 at 11:00 AM, employee C, administrator, indicated employee S, was the alternate administrator and an employee of the agency as of 6/1/15 and did not know why employee S would say she was the administrator. Employee C, administrator, also stated that employee T, previous alternate administrator, will remain as needed for alternate administrator for the agency.</p> <p>3. The State Agency currently has on file that employee C is the administrator and employee T is the alternate administrator.</p> <p>4. Agency policy titled "Appointment of Executive Director/Administrator", dated October 2011, states, "Purpose To define the qualifications and selection process of the Executive Director/Administrator of the organization ... Policy ... 5. The organization complies with applicable laws and regulation."</p>		<p>Administrator will notify appropriate State Agency in writing within 3 business day of Governing Body meeting for change in Administrator/Alternate Administrator. Responsible staff for compliance: Administrator/ Alternate Administrator to implement compliance with regulatory statue. Agency monitoring of compliance: Performance Improvement staff will develop tracking and trending tool using PDSA format on quarterly basis for agency compliance with regulatory statue.</p>				

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G 0122 Bldg. 00	<p>484.14 ORGANIZATION, SERVICES & ADMINISTRATION</p> <p>Based on interview, document review, and agency policy review, it was determined the agency failed to ensure the alternate administrator and administrator roles were clearly identified as to who was in which role (See G 123); failed to ensure all patient referral functions were performed by the agency, on-call duty functions were performed by the agency, and agency documents were maintained by the agency (see G 124); failed to ensure Governing Body Minutes Sign in sheets and employee documents were maintained by the agency for 1 of 1 Governing Body Minutes reviewed (see G 128); and failed to ensure the on call nurse was informed of the need to complete the transfer assessment in 1 of 1 records reviewed of patients who were hospitalized (see G 144).</p> <p>The cumulative effect of these systemic problems resulted in the agency being found out of compliance with the Condition of Participation 484.14 Organization, services, and administration.</p>	G 0122	<p>Correction of cited deficiencies: Updating of agency organizational chart to reflect Name of Administrator and Alternate Administrator for agency on 6/17/15. Clinical Management meeting held on 6/18/15 clarified individuals responsible as to Administrator and Alternate Administrator for Advanced Home Health Care, Inc. Agency is in process of restructuring of agency duties of Clinical Management Team and Intake responsibilities to comply with regulatory statues and agency policy. Governing Body minutes with sign in sheet documentation was placed in agency survey binder on 6/18/15 for correction of deficiency. Prevention of deficiencies in the future: Development of Performance Improvement processes for all identified G tag deficiencies identified in plan of correction for addition G tag deficiencies. Responsible staff for compliance: Administrator/Performance Improvement Staff/Clinical Management Team Agency monitoring of compliance: Performance Improvement team will develop tracking and trending using PDSA format for each identified G tag on</p>	07/07/2015

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G 0123 Bldg. 00	<p>484.14 ORGANIZATION, SERVICES & ADMINISTRATION Organization, services furnished, administrative control, and lines of authority for the delegation of responsibility down to the patient care level are clearly set forth in writing and are readily identifiable. Based on interview, document review, and agency policy review, the agency failed to ensure the alternate administrator and administrator roles were clearly identified as to who was in which role.</p> <p>Findings</p> <p>1. Interview on 6/4/15 at 1:45 PM, employee A, clinical nursing supervisor, and employee S, whose position was unclear though she indicated she was the administrator at the entrance conference. Employee S indicated she will be appointed as the administrator by the governing body at the next governing body meeting. Employee A, clinical</p>	G 0123	<p>monthly/quarterly basis as indicated in specific plan of correction. For the purpose of any allegation that Advanced Home Health Care, Inc. is not in substantial compliance with the regulations set forth, this plan of correction constitutes Advanced Home Health Care's credible allegation of correction and compliance.</p> <p>Correction of cited deficiency: Agency notified appropriate State Agency in writing of change in agency Alternate Administrator on 6/8/15. Agency's organizational chart to reflect the change in Alternate Administrator was updated on 6/12/15. Agency Management Team, field and office staff informed of changes in organizational chart, management team and roles/responsibilities. Prevention of deficiency from recurring in the future: Governing Body meeting for approval of Administrator/Alternate Administrator. Administrator/Alternate Administrator will notify appropriate State Agency in writing within 3 business days of</p>	07/07/2015

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	<p>nursing supervisor, did not object to the statements made by employee S during this interview.</p> <p>2. Documents provided by employee S, on 6/4/15, for employment and position verification.</p> <p>A. Document titled "Vital Home and Healthcare Inc. Job Descriptions" dated October 2011, states, "Job Title/Position: Executive Director/Administrator" signed by employee S on 4/6/15.</p> <p>B. Document titled "Vital Home & Healthcare, Inc. Application for Employment, dated 4/6/15.</p> <p>C. Document titled "Employee Eligibility Verification Form I-9" dated 3/18/13 states, "Employer's Business or Organization Name Vital Home & Healthcare" signed by employee S on 4/6/15.</p> <p>D. Document titled "Vital Home & Healthcare, Inc. General Orientation-Administrator", dated 4/6/15, signed by employee S on 4/17/15.</p> <p>E. A business card provided by employee S that states. "Vital Home & Healthcare, INC. Advanced Home & Healthcare, INC. [employee S], RN,</p>		<p>Governing Body meeting of change in administrative member. Responsible staff for compliance: Administrator/ Alternate Administrator to implement compliance with regulatory statues to prevent recurrence. Agency monitoring of compliance: Development of Performance Improvement tool for tracking and trending using PDSA format on quarterly basis for agency compliance with regulatory statue</p>		

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	<p>MBA Administrator.'</p> <p>F. Interview on 6/4/15 at 3:00 PM, employee S stated again that she is the administrator of both Advanced Home Health Care Inc. and Vital Home and Healthcare Inc. of Tinley Park, IL. Employee S also added that she is an employee of MPI which makes her an employee of both agencies. She describes MPI as a managing firm that manages these agencies. Employee A, clinical nursing supervisor, did not object to the statements made by employee S during this interview.</p> <p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, indicated he is the administrator and does not know why employee S would say she is the administrator. Employee C goes on to indicate that employee S is the alternate administrator and an employee of the agency as of 6/1/15. Employee C, administrator, also stated that employee T, previous alternate administrator, resigned her position due to retiring as of 6/1/15 but will remain as needed for alternate administrator for the agency.</p> <p>4. Agency documents provided on 6/5/15 by employee C, administrator, for employment and position verification.</p>			

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	<p>A. Document titled "Advanced Home Healthcare, Inc. Job Descriptions" states, "Job Title/Position: Interim/Alternate Administrator" signed by employee S on 6/1/15.</p> <p>B. Document titled "Management Principles, INC.", dated 4/6/15, had a box checked, "Advanced Home Healthcare Application for Employment" signed by employee S on 4/6/15.</p> <p>C. Document titled "Employee Eligibility Verification Form I-9" dated 3/18/13 states, "Employer's Business or Organization Name Advanced Home Healthcare" signed by employee S on 6/1/15.</p> <p>5. Agency document titled " Advanced Home Healthcare, INC. Organizational Chart -January 2015 Highland, IN Office" dated 1/15/14, lists employee C, as administrator and employee T, as alternate administrator.</p> <p>6. Agency policy titled "Use of Organizational Chart" dated October 2011 states, "PURPOSE To facilitate effective overall management and administration of the organization ... POLICY There will be defined lines of authority, which clearly establishes responsibility and accountability for all</p>			

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G 0124 Bldg. 00	<p>organization personnel."</p> <p>484.14 ORGANIZATION, SERVICES & ADMINISTRATION Administrative and supervisory functions are not delegated to another agency or organization. Based on interview, clinical record review, and agency document review, the agency failed to ensure all patient referral functions were performed by the agency, on-call duty functions were performed by the agency, and agency documents were maintained by the agency.</p> <p>Findings</p> <p>1. Clinical record review #3, start of care 12/20/14, certification period 4/19/15 -6/17/15, included a referral to Vital HHC (Home Health Care) dated 4/21/15 from Community Hospital.</p> <p>2. Interview on 6/5/15, at 1 PM, employee A, clinical nursing supervisor, indicated all referrals go to Vital Home & Healthcare Inc in Tinley Park, IL</p>	G 0124	<p>Correction of cited deficiencies: Agency is in process of restructuring of roles/responsibilities for Clinical Management Team, Intake and HR for compliance with regulatory statues and agency policy. Goal date for completion of restructuring process is 7/6/15 . Special Governing Body meeting scheduled for 7/6/15 for acceptance of changes in processes for centralized intake, on-call staff, agency personnel record and maintenance of agency documents. In-service education of roles/responsibility for all pertinent identified staff will be performed by Clinical Management Team with resigning of job descriptions for acceptance of duties on 7/7/15. During business hours phones will be answered by receptionist/office staff. After business hours phones are forwarded to agency answering</p>	07/07/2015

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	<p>3. Phone interview on 6/8/15 at 12:08 PM, an employee (identifier U) of Vital Home & Healthcare Inc. in Tinley Park, IL, accepts referrals for Advanced Home health Care Inc. When calling the agency's phone number 219-922-6700, an automated system, not a receptionist of Advanced Home Health Care, answered. Prompts direct to push #4 for referrals. The employee (identifier U) of Vital Home & Healthcare Inc. of Tinley Park, IL answered the line and explained that all referrals come to that agency for Advanced Home Health Care Inc.</p> <p>4. Agency policy titled "Intake Process", dated October 2011, states, "PURPOSE To establish the process for acceptance and entry of patient into the organization ... During scheduled business hours (office hours are from 8:00 a.m. to 5:00 p.m., Monday through Friday), calls will first be received by receptionist. Patient referral calls will be transferred to a staff member designated to accept referrals."</p> <p>5. Interview on 6/8/15 at 11:05 AM, clinical nursing supervisor, employee A, indicated a nurse (identifier V) from the Tinley Park office was on call for the weekend (6/5, 6/6, and 6/7).</p> <p>Related to documents</p>		<p>service. Answer service contact On Call Triage RN with patient calls and referrals. All current Governing Body minutes with sign in sheets will be maintained in agency's Survey Binder for reference when requested</p> <p>Prevention of deficiency from recurring in the future: Clinical Management Team will review all new referral for confirmation of Advanced Home Health Care, inc. to provide home care services. Staff to contact referral source of change in home care agency is Advanced Home Health Care, Inc. not identified as provider and confirmation that this is patient choice prior to implementation of home care services. On a daily basis reception/office staff will confirm that auto attendant is not in use during business hours. Agency Survey Binder will contain most current copy of Governing Body minutes with sign in sheet for timely reference when requested. Responsible staff for compliance: Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tool for tracking and trending using PDSA format on monthly/quarterly basis. Monthly monitoring of compliance to be maintained for not less than 3 months of meeting 100% threshold then quarterly for one year.</p>	

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	<p>1. Interview on 6/8/15 at 10:00 AM, employee A, clinical nursing supervisor, provided minutes for a governing body meeting without a sign in sheet. Later, at 11:15 AM, employee A provided a copy of the sign in sheet and stated, "It took so long getting the sign in sheet because I had to get it from Vital Home & Healthcare in Tinley Park, IL"</p> <p>2. Agency policy titled "Governing Body", dated October 2011, stated, "PURPOSE To outline the roles and responsibilities of the Governing Body POLICY The Governing Body will assume full legal authority, responsibility and accountability for the operation of Advanced Home Healthcare, Inc. ... Meeting Minutes will be signed, dated and retained by the organization."</p> <p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, stated, "I was able to obtain employee records for [employee S] for Advanced Home Healthcare Inc. from Vital Home & Healthcare Inc. in Tinley Park, IL."</p> <p>4. Documents for employee S, provided by employee C, administrator, from Vital Home & Healthcare Inc. in Tinley Park, IL on 6/4/15 failed to evidence employee S as a employee of Advanced Home Healthcare Inc.. The employee records</p>			

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G 0128 Bldg. 00	<p>provided on 6/5/15 evidenced employee S had been an employee of Advanced Home Healthcare Inc. as of 6/1/15.</p> <p>484.14(b) GOVERNING BODY A governing body (or designated persons so functioning) assumes full legal authority and responsibility for the operation of the agency. Based on interview, agency policy review, and document review, the agency failed to ensure Governing Body Minutes Sign in sheets and employee documents were maintained by the agency for 1 of 1 Governing Body Minutes reviewed.</p> <p>Findings</p> <p>1. Interview on 6/8/15 at 10:00 AM, employee A, clinical nursing supervisor, provided minutes for a governing body meeting without a sign in sheet. Later. at 11:15 AM. employee A provided a copy of the sign in sheet and stated, "It took so long getting the sign in sheet because i</p>	G 0128	<p>Correction of cited deficiencies: Agency Survey binder updated with most current copy of 5/1/15 Governing Body minutes which are signed, dated and attached sign in sheet on 6/15/15. Prevention of deficiency from recurring in the future: Clinical Management to assure that Governing Body meetings be placed in agency Survey binder within 10 calendar days of meeting. Sign in sheet to accompany all meeting minutes. Responsible person for compliance: Administrator/Direct or of Nursing Agency monitoring for compliance: Performance Improvement staff to develop tool to track and trend using PDSA</p>	07/07/2015

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G 0144 Bldg. 00	<p>had to get it from Vital Home & Healthcare in Tinley Park, IL"</p> <p>2. Agency policy titled "Governing Body", dated October 2011, stated, "PURPOSE To outline the roles and responsibilities of the Governing Body POLICY The Governing Body will assume full legal authority, responsibility and accountability for the operation of Advanced Home Healthcare, Inc. ... Meeting Minutes will be signed, dated and retained by the organization."</p> <p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, stated, "I was able to obtain employee records for [employee S] for Advanced Home Healthcare Inc. from Vital Home & Healthcare Inc. in Tinley Park, IL."</p> <p>4. Documents for employee S, provided by employee C, administrator, from Vital Home & Healthcare Inc. in Tinley Park, IL on 6/4/15 failed to evidence employee S as a employee of Advanced Home Healthcare Inc.. The employee records provided on 6/5/15 evidenced employee S had been an employee of Advanced Home Healthcare Inc. as of 6/1/15.</p> <p>484.14(g) COORDINATION OF PATIENT SERVICES The clinical record or minutes of case</p>		format on quarterly basis for 100% threshold for agency maintenance of meeting documentation to meet regulatory statuses.		

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE			
	<p>conferences establish that effective interchange, reporting, and coordination of patient care does occur.</p> <p>Based on interview, clinical record review, and agency document review, the agency failed to ensure the on call nurse was informed of the need to complete the transfer assessment in 1 of 1 records reviewed of patients that were hospitalized (#3).</p> <p>Findings</p> <p>1. Clinical record #3, start of care date 12/20/14, certification period 4/19/15 -6/17/15, failed to evidence the weekend on-call nurse to follow up on the patient's condition to ensure a transfer assessment was completed within 48 hours of the patient being transferred to an acute care facility.</p> <p>At a home visit on 6/5/15 at 9:15 AM for patient #3, the agency was informed the patient had been transferred to an acute care facility on 6/4/15.</p> <p>2. Interview on 6/8/15 at 11:00 AM, employee A, clinical nursing supervisor, stated, "The patient's transfer was not done within 48 hours, because the on-call nurse for the weekend was not made aware of the patient's status to follow up and complete the transfer assessment</p>	G 0144	<p>Correction of cited deficiency: Clinical Record #3 update with transfer oasis entered, clinical review on 6/8/15 and submission to CMS on 6/9/15. Call log documentation of patient hospitalized for care coordination with team members. Prevention of deficiency from recurring in the future: Clinical Management Team will complete transfer oasis within 48 hours of notification of qualifying hospital stay. On-call Triage Clinical Manager to be given a list of all hospitalized patients and the need to follow up to confirm that patient remained hospitalized. The person responsible for tracking hospitalized patients will update on call triage Clinical Manager of all hospital hold patients. Documentation in call log of intervention . Responsible person for compliance: Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tool for tracking and trending using PDSA format on weekly/monthly/quarterly basis. Weekly monitoring of compliance to be maintained for not less than 3 months of meeting 100% threshold then quarterly for one year.</p>	07/07/2015			

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G 0310 Bldg. 00	<p>within 48 hours of the patient being transferred to an acute care facility.</p> <p>3. Agency document titled "Addendum: Performance Standards", dated 10/3/13, states, "These Performance Standards are requirements of your position at Advanced Home Health Care, Inc. ... Timely submission of completed:1) OASIS (ELECTRONIC) ... Care Coordination with Team Members documented on call log."</p> <p>484.11 RELEASE OF PATIENT IDENTIFIABLE OASIS INFO The HHA and agent acting on behalf of the HHA in accordance with a written contract must ensure the confidentiality of all patient identifiable information contained in the clinical record, including OASIS data, and may not release patient identifiable information to the public. Based on interview, agency document review, and agency policy review, the agency failed to ensure OASIS data was not released to non employees.</p> <p>Findings</p>	G 0310	Correction of cited Deficiency: Human Resource staff to restrict access of patient electronic clinical record and oasis access to only Advanced Home Health Care, Inc employees. Active Advanced employees are only those who have a personnel file that contains application of	07/07/2015			

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	<p>1. Interview on 6/4/15 at 3:50 PM, employee A, clinical nursing supervisor, indicated that any support staff, nurses, administrators, and billers at Vital Home & Healthcare Inc. in Tinley Park, IL have access to patients clinical records and oasis information. Employee A indicated employee S has had access to patient clinical records and oasis information since hire in April of 2015 to Vital Home & Healthcare Inc. in Tinley Park, IL.</p> <p>2. Interview on 6/5/15 at 12:40 PM, employee C, administrator, indicated employee S has had access to patient clinical records and oasis information since 5/1/15. He indicated the date of access to patient clinical records and oasis information for Advanced Home Healthcare Inc. patients was given to employee S on 5/1/15, although employee S was not an employee of Advanced Home Healthcare until 6/1/15.</p> <p>3. Agency documents reviewed, employee records, provided by employee C, for employee S.</p> <p>A. Document titled "Advanced Home Healthcare, Inc. Job Descriptions" states, "Job Title/Position: Interim/Alternate Administrator" signed by employee S, on 6/1/15.</p>		<p>employee and all required documentation per agency policy and regulatory statutes. Human resource staff to remove access by any unauthorized individuals of patients electronic medical records and Oasis documentation for compliance with patient privacy rights by HIPAA and Home Care patient bill of rights. In-service of Human Resource Staff and Clinical Management Team by Performance Improvement Manager of patient privacy rights ,agency policy and regulatory statutes for agency compliance. Prevention of deficiencies in the future: At time of hire, Human Resource staff to delegate electronic medical record and oasis access to employees s/p submission of documentation for completion of personnel file for agency. Electronic medical record access by Human Resource staff to be limited to only appropriate agency at hire. Change in sister company staff with change in status requiring access of patient's clinical record/oasis requires completion of application for Advanced Home Health Care, Inc and completion of all documentation needed for personnel file to become active agency employee. Human Resource staff is not to assign electronic medical record access until employee is confirmed as active Advance Home Health Care, Inc. employee. Responsible</p>	

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	<p>B. Document titled "Employee Eligibility Verification Form I-9" dated 3/18/13, states, "Employer's Business or Organization Name Advanced Home Healthcare" signed by employee S on 6/1/15.</p> <p>4. Agency policy titled "SAFEGUARDING/RETRIEVAL OF CLINICAL/SERVICE RECORD", dated October 2011, states, "PURPOSE To establish a procedure for the protection of patient clinical/service record information from loss or unauthorized use ... The clinical/service record will be safeguarded in compliance with Health Insurance Portability and Accountability Act (HIPAA) requirements."</p> <p>5. Agency policy titled "HOME HEALTH PATIENT BILL OF RIGHTS", dated October 2011, states, "PURPOSE To encourage awareness of patient rights and provide guidelines ...</p> <p>Q. Patient privacy rights related to the collection of the Outcome and Assessment Information Set (OASIS) ...</p> <p>2. The right to have the information kept confidential."</p>		<p>staff for compliance: Human Resource Assistant/ Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tracking and trending using PDSA format for quarterly review of agency new employee base for compliance with completion of active patient status for agency with 100% threshold compliance for not less than three quarters to be maintained for one year. For the purpose of any allegation that Advanced Home Health Care , Inc. is not in substantial compliance with the regulations set forth, this plan of correction constitutes Advanced Home Health Care's credible allegation of correction and compliance.</p>		

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G 0341 Bldg. 00	<p>484.55(d)(3) UPDATE OF THE COMPREHENSIVE ASSESSMENT The comprehensive assessment must be updated and revised (including the administration of the OASIS) at discharge. Based on record review, interview, and policy review, the agency failed to ensure a transfer assessment was completed within 48 hours of patient being admitted to a acute care facility in 1 of 1 record reviewed of patients that were hospitalized (#3).</p> <p>Findings:</p> <ol style="list-style-type: none"> At a home visit on 6/5/15 at 9:15 AM for patient #3, the agency was informed the patient had been transferred to an acute care facility on 6/4/15. Clinical record #3, start of care date 12/20/14, certification period 4/19/15 - 6/17/15, identified the patient was transferred to an acute care facility on 6/4/15. The record failed to evidence a transfer assessment had been completed as of 6/8/15. Interview on 6/8/15 at 11:05 AM, clinical nursing supervisor, employee A, indicated she was not on call this weekend and, therefore, unable to follow up to complete a transfer assessment. She indicated the nurse (identifier V) 			G 0341	<p>Correction of cited deficiency: Clinical Record #3 update with transfer oasis entered, clinical review on 6/8/15 and submission to CMS on 6/9/15. Prevention of deficiency from recurring in the future: Clinical Management Team will complete transfer oasis within 48 hours of notification of qualifying hospital stay. On-call Triage Clinical Manager to be given a list of all hospitalized patients and the need to follow up to confirm that patient remained hospitalized. The person responsible for tracking hospitalized patients will update on call triage Clinical Manager of all hospital hold patients. Responsible persons for compliance: Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tool for tracking and trending using PDSA format on weekly/monthly/quarterly basis. Weekly monitoring of compliance to be maintained for not less than 3 months of meeting 100% threshold then quarterly for one year.</p>		07/07/2015

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N 0000 Bldg. 00	<p>from the Tinley Park office was on call and unaware of the hospitalization.</p> <p>4. Agency policy titled "Transfer/Referral Criteria and Process", dated 10/2011, states, "PURPOSE To outline the process for transferring or referring a patient ... 8. Within 48 hours of transfer, the clinician will complete a transfer summary."</p> <p>This was a revisit for the State re-licensure survey conducted on 4/16/15 to 4/21/15.</p> <p>Survey Date: 6/4/15, 6/5/15 and 6/8/15</p> <p>Facility #: 008247</p> <p>Medicaid Vendor#: N/A</p> <p>Six deficiencies were found to be corrected during this survey. Five new deficiencies were cited.</p> <p>QR: JE 6/11/15</p>	N 0000		

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N 0408 Bldg. 00	<p>410 IAC 17-10-1(d) Licensure Rule 10 Sec. 1(d) Disclosure of ownership and management information must be made to the department at the time of the home health agency's initial request for licensure, for each survey, and at the time of any change in ownership or management. The disclosure must include the names and addresses of the following:</p> <p>(1) All persons having at least five percent (5%) ownership or controlling interest in the home health agency. (2) Each person who is: (A) an officer; (B) a director; (C) a managing agent; or (D) a managing employee; of the home health agency and evidence supporting the qualifications required by this article. (3) The corporation, association, or other company that is responsible for the management of the home health agency. (4) The chief executive officer and the chairman or equivalent position of the governing body of that corporation, association, or other legal entity responsible for the management of the home health agency.</p> <p>Based on interview, document review, and agency policy review, the agency failed to notify the State Agency of a change in administration.</p> <p>Findings</p> <p>1. Interview on 6/4/15 at 1:45 PM, employee A, clinical nursing supervisor,</p>	N 0408	<p>Correction of cited deficiency: Agency notified appropriate State Agency in writing of change in agency Alternate Administrator on 6/8/15. Prevention of deficiency from recurring in the future: Governing Body meeting for approval of Administrator/Alternate Administrator. Administrator/Alternate Administrator will notify</p>	07/07/2015

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N 0440 Bldg. 00	<p>and employee S, whose position was unclear though she indicated she was the administrator, indicated employee S had not been reported to the state because of a hold up with finger prints.</p> <p>2. Interview on 6/5/15 at 11:00 AM, employee C, administrator, indicated employee S, was the alternate administrator and an employee of the agency as of 6/1/15 and did not know why employee S would say she was the administrator. Employee C, administrator, also stated that employee T, previous alternate administrator, will remain as needed for alternate administrator for the agency.</p> <p>3. The State Agency currently has on file that employee C is the administrator and employee T is the alternate administrator.</p> <p>4. Agency policy titled "Appointment of Executive Director/Administrator", dated October 2011, states, "Purpose To define the qualifications and selection process of the Executive Director/Administrator of the organization ... Policy ... 5. The organization complies with applicable laws and regulation."</p> <p>410 IAC 17-12-1(a) Home health agency administration/management Rule 12 Sec. 1(a) Organization, services</p>		<p>appropriate State Agency in writing within 3 business days of Governing Body meeting of change in administrative member. Responsible staff for compliance: Adminstrator/ Alternate Administrator to implement compliance with regulatory statue to prevent reoccurrence. Agency monitoring of compliance: Performance Improvement staff will develop tracking and trending tool using PDSA format on quarterly basis for agency compliance with regulatory statue.</p>		

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	<p>furnished, administrative control, and lines of authority for the delegation of responsibility down to the patient care level shall be:</p> <p>(1) clearly set forth in writing; and</p> <p>(2) readily identifiable.</p> <p>Based on Interview, document review, and agency policy review, the agency failed to ensure the alternate administrator and administrator roles were clearly identified as to who was in which role.</p> <p>Findings</p> <p>1. Interview on 6/4/15 at 1:45 PM, employee A, clinical nursing supervisor, and employee S, whose position was unclear though she indicated she was the administrator at the entrance conference. Employee S indicated she will be appointed as the administrator by the governing body at the next governing body meeting. Employee A, clinical nursing supervisor, did not object to the statements made by employee S during this interview.</p> <p>2. Documents provided by employee S, on 6/4/15, for employment and position verification.</p> <p>A. Document titled "Vital Home and Healthcare Inc. Job Descriptions" dated October 2011, states, "Job Title/Position: Executive Director/Administrator" signed</p>	N 0440	<p>Correction of cited deficiency:</p> <p>Agency notified appropriate State Agency in writing of change in agency Alternate Administrator on 6/8/15. Agency's organizational chart to reflect the change in Alternate Administrator was updated on 6/12/15. Agency Management Team, field and office staff informed of change in organizational chart, Management team roles and responsibilities.</p> <p>Prevention of deficiency from recurring in the future: Governing Body meeting for approval of Administrator/ Alternate Administrator.</p> <p>Administrator/Alternate Administrator will notify appropriate State Agency in writing within one week of Governing Body meeting of change in administrative member.</p> <p>Responsible staff for compliance: Administrator/ Alternate Administrator to implement compliance with regulatory statutes to prevent recurrence.</p> <p>Agency monitoring of compliance: Development of Performance Improvement tool for tracking and trending using PDSA format on quarterly basis for agency compliance with regulatory statute</p>	07/07/2015

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	<p>by employee S on 4/6/15.</p> <p>B. Document titled "Vital Home & Healthcare, Inc. Application for Employment, dated 4/6/15.</p> <p>C. Document titled "Employee Eligibility Verification Form I-9" dated 3/18/13 states, "Employer's Business or Organization Name Vital Home & Healthcare" signed by employee S on 4/6/15.</p> <p>D. Document titled "Vital Home & Healthcare, Inc. General Orientation-Administrator", dated 4/6/15, signed by employee S on 4/17/15.</p> <p>E. A business card provided by employee S that states. "Vital Home & Healthcare, INC. Advanced Home & Healthcare, INC. [employee S], RN, MBA Administrator.'</p> <p>F. Interview on 6/4/15 at 3:00 PM, employee S stated again that she is the administrator of both Advanced Home Health Care Inc. and Vital Home and Healthcare Inc. of Tinley Park, IL. Employee S also added that she is an employee of MPI which makes her an employee of both agencies. She describes MPI as a managing firm that manages these agencies. Employee A,</p>			

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	<p>clinical nursing supervisor, did not object to the statements made by employee S during this interview.</p> <p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, indicated he is the administrator and does not know why employee S would say she is the administrator. Employee C goes on to indicate that employee S is the alternate administrator and an employee of the agency as of 6/1/15. Employee C, administrator, also stated that employee T, previous alternate administrator, resigned her position due to retiring as of 6/1/15 but will remain as needed for alternate administrator for the agency.</p> <p>4. Agency documents provided on 6/5/15 by employee C, administrator, for employment and position verification.</p> <p>A. Document titled "Advanced Home Healthcare, Inc. Job Descriptions" states, "Job Title/Position: Interim/Alternate Administrator" signed by employee S on 6/1/15.</p> <p>B. Document titled "Management Principles, INC.", dated 4/6/15, had a box checked, "Advanced Home Healthcare Application for Employment" signed by employee S on 4/6/15.</p>			

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N 0441 Bldg. 00	<p>C. Document titled "Employee Eligibility Verification Form I-9" dated 3/18/13 states, "Employer's Business or Organization Name Advanced Home Healthcare" signed by employee S on 6/1/15.</p> <p>5. Agency document titled " Advanced Home Healthcare, INC. Organizational Chart -January 2015 Highland, IN Office" dated 1/15/14, lists employee C, as administrator and employee T, as alternate administrator.</p> <p>6. Agency policy titled "Use of Organizational Chart" dated October 2011 states, "PURPOSE To facilitate effective overall management and administration of the organization ... POLICY There will be defined lines of authority, which clearly establishes responsibility and accountability for all organization personnel."</p> <p>410 IAC 17-12-1(a) Home health agency administration/management Rule 12 Sec. 1(a) Administrative and supervisory responsibilities shall not be delegated to another agency or organization, and all services not furnished directly, including services provided through a branch office, shall be monitored and controlled by the parent agency. Based on interview, clinical record</p>	N 0441	Correction of cited deficiencies: Agency is in process of	07/07/2015

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	<p>review, and agency document review, the agency failed to ensure all patient referral functions were accepted by the agency, on-call duty functions were performed by the agency, and agency documents were maintained by the agency.</p> <p>Findings</p> <p>1. Clinical record review #3, start of care 12/20/14, certification period 4/19/15 -6/17/15, included a referral to Vital HHC (Home Health Care) dated 4/21/15 from Community Hospital.</p> <p>2. Interview on 6/5/15, at 1 PM, employee A, clinical nursing supervisor, indicated all referrals go to Vital Home & Healthcare Inc in Tinley Park, IL.</p> <p>3. Phone interview on 6/8/15 at 12:08 PM, an employee (identifier U) of Vital Home & Healthcare Inc. in Tinley Park, IL, accepts referrals for Advanced Home health Care Inc. When calling the agency's phone number 219-922-6700, an automated system, not a receptionist of Advanced Home Health Care, answered. Prompts direct to push #4 for referrals. The employee (identifier U) of Vital Home & Healthcare Inc. of Tinley Park, IL answered the line and explained that all referrals come to that agency for Advanced Home Health Care Inc.</p>		<p>restructuring of roles/responsibilities for Clinical Management Team, Intake and HR for compliance with regulatory statues and agency policy. Goal date for completion of restructuring process is 7/6/15 . Special Governing Body meeting scheduled for 7/6/15 for acceptance of changes in processes for centralized intake, on-call staff, agency personnel record and maintenance of agency documents. In-service education of roles/responsibility for all pertinent identified staff will be performed by Clinical Management Team with resigning of job descriptions for acceptance of duties on 7/7/15. During business hours phones will be answered by receptionist/office staff. Ater business hours phones are forward to agency answering service. Answering service contact the On Call Triage RN with patient calls and referrals. All current Governing Body minutes with sign in sheets will be maintained in agency's Survey Binder for reference when requested Prevention of deficiency from recurring in the future: Clinical Management Team will review all new referral for confirmation of Advanced Home Health Care, inc. to provide home care services. Staff to contact referral source of change in home care agency is Advanced Home Health Care, Inc. not</p>	

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NAME OF PROVIDER OR SUPPLIER ADVANCED HOME HEALTH CARE INCORPORATED	STREET ADDRESS, CITY, STATE, ZIP CODE 2834 B 45TH ST HIGHLAND, IN 46322
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	<p>4. Agency policy titled "Intake Process", dated October 2011, states, "PURPOSE To establish the process for acceptance and entry of patient into the organization ... During scheduled business hours (office hours are from 8:00 a.m. to 5:00 p.m., Monday through Friday), calls will first be received by receptionist. Patient referral calls will be transferred to a staff member designated to accept referrals."</p> <p>5. Interview on 6/8/15 at 11:05 AM, clinical nursing supervisor, employee A, indicated a nurse (identifier V) from the Tinley Park office was on call for the weekend (6/5, 6/6, and 6/7).</p> <p>Related to documents</p> <p>1. Interview on 6/8/15 at 10:00 AM, employee A, clinical nursing supervisor, provided minutes for a governing body meeting without a sign in sheet. Later. at 11:15 AM. employee A provided a copy of the sign in sheet and stated, "It took so long getting the sign in sheet because i had to get it from Vital Home & Healthcare in Tinley Park, IL"</p> <p>2. Agency policy titled "Governing Body", dated October 2011, stated, "PURPOSE To outline the roles and responsibilities of the Governing Body</p>		<p>identified as provider and confirmation that this is patient choice prior to implementation of home care services. On a daily basis reception/office staff will confirm that auto attendant is not in use during business hours. Agency Survey Binder will contain most current copy of Governing Body minutes with sign in sheet for timely reference when requested. Responsible staff for compliance: Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tool for tracking and trending using PDSA format on monthly/quarterly basis. Monthly monitoring of compliance to be maintained for not less than 3 months of meeting 100% threshold then quarterly for one year.</p>	

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N 0442 Bldg. 00	<p>POLICY The Governing Body will assume full legal authority, responsibility and accountability for the operation of Advanced Home Healthcare, Inc. ... Meeting Minutes will be signed, dated and retained by the organization."</p> <p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, stated, "I was able to obtain employee records for [employee S] for Advanced Home Healthcare Inc. from Vital Home & Healthcare Inc. in Tinley Park, IL."</p> <p>4. Documents for employee S, provided by employee C, administrator, from Vital Home & Healthcare Inc. in Tinley Park, IL on 6/4/15 failed to evidence employee S as a employee of Advanced Home Healthcare Inc.. The employee records provided on 6/5/15 evidenced employee S had been an employee of Advanced Home Healthcare Inc. as of 6/1/15.</p> <p>410 IAC 17-12-1(b) Home health agency administration/management Rule 12 Sec. 1(b) A governing body, or designated person(s) so functioning, shall assume full legal authority and responsibility for the operation of the home health agency. The governing body shall do the following:</p>			

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	<p>(1) Appoint a qualified administrator. (2) Adopt and periodically review written bylaws or an acceptable equivalent. (3) Oversee the management and fiscal affairs of the home health agency.</p> <p>Based on interview, agency policy review, and document review, the agency failed to ensure Governing Body Minutes Sign in sheets and employee documents were maintained by the agency for 1 of 1 Governing Body Minutes reviewed.</p> <p>Findings</p> <p>1. Interview on 6/8/15 at 10:00 AM, employee A, clinical nursing supervisor, provided minutes for a governing body meeting without a sign in sheet. Later, at 11:15 AM, employee A provided a copy of the sign in sheet and stated, "It took so long getting the sign in sheet because i had to get it from Vital Home & Healthcare in Tinley Park, IL"</p> <p>2. Agency policy titled "Governing Body", dated October 2011, stated, "PURPOSE To outline the roles and responsibilities of the Governing Body POLICY The Governing Body will assume full legal authority, responsibility and accountability for the operation of Advanced Home Healthcare, Inc. ... Meeting Minutes will be signed, dated and retained by the organization."</p>	N 0442	<p>Correction of cited deficiencies: Agency Survey binder updated with most current copy of 5/1/15 Governing Body minutes which are signed, dated and attached sign in sheet on 6/15/15. Prevention of deficiency from recurring in the future: Clinical Management to assure that Governing Body meetings be placed in agency Survey binder within 10 calendar days of meeting. Sign in sheet to accompany all meeting minutes. Responsible person for compliance: Administrator/Direct or of Nursing Agency monitoring for compliance: Performance Improvement staff to develop tool to track and trend using PDSA format on quarterly basis for 100% threshold for agency maintenance of meeting documentation to meet regulatory statues.</p>	07/07/2015	

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N 0484 Bldg. 00	<p>3. Interview on 6/5/15 at 12:40 PM, employee C, administrator, stated, "I was able to obtain employee records for [employee S] for Advanced Home Healthcare Inc. from Vital Home & Healthcare Inc. in Tinley Park, IL."</p> <p>4. Documents for employee S, provided by employee C, administrator, from Vital Home & Healthcare Inc. in Tinley Park, IL on 6/4/15 failed to evidence employee S as a employee of Advanced Home Healthcare Inc.. The employee records provided on 6/5/15 evidenced employee S had been an employee of Advanced Home Healthcare Inc. as of 6/1/15.</p> <p>410 IAC 17-12-2(g) Q A and performance improvement Rule 12 Sec. 2(g) All personnel providing services shall maintain effective communications to assure that their efforts appropriately complement one another and support the objectives of the patient's care. The means of communication and the results shall be documented in the clinical record or minutes of case conferences. Based on interview, clinical record review, and agency document review, the agency failed to ensure the on call nurse was informed of the need to complete the transfer assessment in 1 of 1 records reviewed of patients that were hospitalized (#3).</p> <p>Findings</p>	N 0484	<p>Correction of cited deficiency: Clinical Record #3 update with transfer oasis entered, clinical review on 6/8/15 and submission to CMS on 6/9/15. Call log documentation of patient hospitalized for care coordination with team members. Prevention of deficiency from recurring in the future: Clinical Management Team will complete transfer oasis</p>	07/07/2015

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	<p>1. Clinical record #3, start of care date 12/20/14, certification period 4/19/15 -6/17/15, failed to evidence the weekend on-call nurse to follow up on the patient's condition to ensure a transfer assessment was completed within 48 hours of the patient being transferred to an acute care facility.</p> <p>At a home visit on 6/5/15 at 9:15 AM for patient #3, the agency was informed the patient had been transferred to an acute care facility on 6/4/15.</p> <p>2. Interview on 6/8/15 at 11:00 AM, employee A, clinical nursing supervisor, stated, "The patient's transfer was not done within 48 hours, because the on-call nurse for the weekend was not made aware of the patient's status to follow up and complete the transfer assessment within 48 hours of the patient being transferred to an acute care facility.</p> <p>3. Agency document titled "Addendum: Performance Standards", dated 10/3/13, states, "These Performance Standards are requirements of your position at Advanced Home Health Care, Inc. ... Timely submission of completed:1) OASIS (ELECTRONIC) ... Care Coordination with Team Members documented on call log."</p>		<p>within 48 hours of notification of qualifying hospital stay. On-call Triage Clinical Manager to be given a list of all hospitalized patients and the need to follow up to confirm that patient remained hospitalized. The person responsible for tracking hospitalized patients will update on call triage Clinical Manager of all hospital hold patients. Documentation in call log of intervention .</p> <p>Responsible persons for compliance: Clinical Management Team Agency monitoring of Compliance: Performance Improvement staff to develop tool for tracking and trending using PDSA format on weekly/monthly/quarterly basis. Weekly monitoring of compliance to be maintained for not less than 3 months of meeting 100% threshold then quarterly for one year.</p>				

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