

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 02/08/2013	
NAME OF PROVIDER OR SUPPLIER LIFESPAN HOME HEALTH LLC				STREET ADDRESS, CITY, STATE, ZIP CODE 800 BELL TRACE CIR BLOOMINGTON, IN 47408			
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N0000	<p>This visit was for a home health state relicensure survey</p> <p>Survey Dates: 2-6 through 8-2013</p> <p>Facility Number: 011592</p> <p>Medicaid Number: N/A</p> <p>Survey Team: Marty Coons, RN,</p> <p>Census Skilled: 67 Home Health Aide Only: 0 Personal Care Only: 68 Total: 135</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN February 12, 2013</p>			N0000	<p>This plan of correction is to serve as the Lifespan Home Health LLC's credible allegation of compliance. Submission of this plan of correction does not constitute an admission by Lifespan Home Health LLC or its management company that the allegations contained in the survey report are a true and accurate portrayal of the provision of nursing care and other services in this facility. Nor does this submission constitute an agreement or admission of the survey allegations.</p>		

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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N0484	<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.</p> <p>Based on clinical record and agency policy review, the agency failed to ensure effective communication and care coordination between disciplines occurred in 2 of 8 (# 2 and 6) records reviewed creating the potential to affect all of the agency's patients that receive skilled nurse (SN) services.</p> <p>The findings include:</p> <p>1. Clinical record # 2 included a plan of care (POC) for the certification period 1-10-13 to 3-12-13 with an order on 1-24-13 to cleanse wound on left ankle every day for 7 days then reevaluate. The record failed to evidence the SN reevaluated the</p>	N0484	<p>N484 QA and Performance Improvement</p> <p>Clinical record #2's wound was reassessed by our skilled nurse on 2/8/13 and the physician was updated. Treatment order was clarified by the physician and the order remained the same.</p> <p>The physician for clinical record #6 was given a verbal report over the phone on the effects of the medication Elavil on 2/8/13.</p> <p>All nursing staff will be in-serviced by the RN Administrator or designee on following through on all physician orders and to document the communication with the physician to ensure coordination of care.</p> <p>The RN Administrator or designee will audit ten (10) client records each month for a period of three (3) months to assure coordination of care. This audit process will be incorporated into our QA and Performance Program on a quarterly basis.</p>	03/01/2013			

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	<p>wound or notified the physician.</p> <p>2. Clinical record #6 included a POC for the certification period 11-21-12 to 1-17-13 with an order on 1-15-13 for the medication Elavil 25 milligrams by mouth every night at bedtime. The order continued to state, "Call back in 7 days to report effects of medication." The record failed to evidence the SN had communicated the effects of the medication to the physician.</p> <p>3. The policy titled "HOME CARE COORDINATION OF CLIENT SERVICES" states, "All personnel providing services shall maintain contact to assure their efforts are coordinated effectively and support the objectives ... Purpose: To make sure services are coordinated between members of the interdisciplinary teams. To ensure that appropriate, quality care is being provided to clients. To establish that effective interchange, reporting, and coordination of</p>		Completion Date: March 1, 2013				

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	<p>client care does occur between members of the Interdisciplinary team. To ensure Agency personnel effectively work together to support the objectives outlined in the Plan of Care and provide quality care to clients. To provide the attending physician with an ongoing assessment of the client and the client's response to the services provided"</p>			
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N0522	<p>410 IAC 17-13-1(a) Patient Care Rule 13 Sec. 1(a) Medical care shall follow a written medical plan of care established and periodically reviewed by the physician, dentist, chiropractor, optometrist or podiatrist, as follows:</p> <p>Based on clinical record review, the agency failed to ensure the skilled nursing provided services as ordered on the plan of care for 2 of 8 (# 2 and 6) records reviewed creating the potential to affect all of the agency's patients that receive skilled nurse (SN) services.</p> <p>The findings include:</p> <ol style="list-style-type: none"> Clinical record # 2 included a plan of care (POC) for the certification period 1-10-13 to 3-12-13 with an order on 1-24-13 to cleanse wound on left ankle every day times 7 days then reevaluate. The record failed to evidence the SN reevaluated the wound or notified the physician. Clinical record #6 included a POC for the certification period 	N0522	<p>N522 Patient Care</p> <p>Clinical record #2's wound was reassessed by our skilled nurse on 2/8/13 and the physician was updated. Treatment order was clarified by the physician and the order remained the same.</p> <p>The physician for clinical record #6 was given a verbal report over the phone on the effects of the medication Elavil on 2/8/13.</p> <p>All nursing staff will be in-serviced by the RN Administrator or designee on the importance of providing services as ordered on the plan of care.</p> <p>The RN Administrator or designee will audit ten (10) client records each month for a period of three (3) months to assure coordination of care. This audit process will be incorporated into our QA and Performance Program on a quarterly basis.</p> <p>Completion Date: March 1, 2013</p>	03/01/2013			

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N0537	<p>410 IAC 17-14-1(a) Scope of Services Rule 1 Sec. 1(a) The home health agency shall provide nursing services by a registered nurse or a licensed practical nurse in accordance with the medical plan of care as follows:</p> <p>Based on clinical record review, the agency failed to ensure the skilled nursing provided services as ordered on the plan of care for 2 of 8 (# 2 and 6) records reviewed creating the potential to affect all of the agency's patients that receive skilled nurse (SN) services.</p> <p>The findings include:</p> <ol style="list-style-type: none"> Clinical record # 2 included a plan of care (POC) for the certification period 1-10-13 to 3-12-13 with an order on 1-24-13 to cleanse wound on left ankle every day times 7 days then reevaluate. The record failed to evidence the SN reevaluated the wound or notified the physician. Clinical record #6 included a POC for the certification period 	N0537	<p>N537 Scope of Services</p> <p>Clinical record #2's wound was reassessed by our skilled nurse on 2/8/13 and the physician was updated. Treatment order was clarified by the physician and the order remained the same.</p> <p>The physician for clinical record #6 was given a verbal report over the phone on the effects of the medication Elavil on 2/8/13.</p> <p>All nursing staff will be in-serviced by the RN Administrator or designee on the importance of providing services as ordered on the plan of care..</p> <p>The RN Administrator or designee will audit ten (10) client records each month for a period of three (3) months to assure coordination of care. This audit process will be incorporated into our QA and Performance Program on a quarterly basis</p> <p>Completion Date: March 1, 2013</p>	03/01/2013			

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