

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 02/20/2012
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NAME OF PROVIDER OR SUPPLIER  FIVE STAR HOME HEALTH INC	STREET ADDRESS, CITY, STATE, ZIP CODE 8505 WOODFIELD CROSSING INDIANAPOLIS, IN 46250
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N0000	<p>This visit was for a home health initial licensure survey.</p> <p>Survey Dates: February 16,17 and 20, 2012</p> <p>Facility #: 012597</p> <p>Surveyor: Dawn Snider, RN, BSN, PHNS</p> <p>Census Service Type: Skilled: 19 Home Health Only: 18 Personal Care Only: N/A Total: 37</p> <p>Sample: RR w/HV: 2 HV w/o RR: 1 RR w/o HV 2 Total: 5</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN February 21, 2012</p>	N0000	The creation and submission of this Plan of Correction does not constitute an admission by this provider of any conclusion set forth in the statement of deficiencies, or of any violation of regulation.	
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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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N0462	<p>Rule 12 Sec. 1(h) Each employee who will have direct patient contact shall have a physical examination by a physician or nurse practitioner no more than one hundred eighty (180) days before the date that the employee has direct patient contact. The physical examination shall be of sufficient scope to ensure that the employee will not spread infectious or communicable diseases to patients.</p> <p>Based on personnel file review, interview, and policy review, the agency failed to ensure all employees had a physical exam that identified the employee was free from communicable disease for 3 of 9 files reviewed (A, E, and H) with the potential to affect all the agency's patients.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>Personnel file A, date of hire 11/7/11 and first patient contact 11/11/11, failed to evidence a physical exam that identified the employee was free of communicable disease.</li> <li>Personnel file E, date of hire 11/4/09 and first patient contact 11/5/09, failed to evidence a physical exam that identified the employee was free of communicable disease.</li> <li>Personnel file H, date of hire 6/23/11 and first patient contact 6/19/11, failed to</li> </ol>	N0462	<p><b>N462 Home Health Agency Administration/Management</b></p> <p>It is the practice of this agency to ensure that all employees with direct patient contact have a physical examination within 180 days of patient contact that indicates that the employee is free of any infectious or communicable disease.</p> <ol style="list-style-type: none"> <li>The Administrator/Director of Nursing/designee will audit all employee health files for evidence of a Physical Examination that indicates that the employee is free and clear of any infectious and communicable disease. <b>2/29/12</b></li> <li>Any employee who is identified as not having a physical meeting this criteria will be sent for a new physical so that the Physician can indicate and document that employee is in fact free and clear of any infectious or communicable disease. <b>2/29/12</b></li> <li>All new employee health files will be audited for proper documentation within the required</li> </ol>	02/29/2012			

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	<p>evidence a physical exam that identified the employee was free of communicable disease.</p> <p>4. On 2/20/2012 2:30 PM, the administrator indicated there were no more documents available for the personnel records.</p> <p>5. The policy # CL-HH-3017 and dated 6/1/2011 titled, "HH Employee TB Testing" states, "3. All employees, staff members, persons providing care on behalf of the agency and contractors having direct client contact shall be evaluated for tuberculosis and documented ... Home Health employees shall be free of communicable diseases."</p>		<p>physical before the employee is permitted to see clients. <b>Immediately and On-Going</b></p>				

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N0464	<p>Rule 12 Sec. 1(i) The home health agency shall ensure that all employees, staff members, persons providing care on behalf of the agency, and contractors having direct patient contact are evaluated for tuberculosis and documentation as follows:</p> <p>(1) Any person with a negative history of tuberculosis or a negative test result must have a baseline two-step tuberculin skin test using the Mantoux method or a quantiferon-TB assay unless the individual has documentation that a tuberculin skin test has been applied at any time during the previous twelve (12) months and the result was negative.</p> <p>(2) The second step of a two-step tuberculin skin test using the Mantoux method must be administered one (1) to three (3) weeks after the first tuberculin skin test was administered.</p> <p>(3) Any person with:</p> <p>(A) a documented:</p> <p>(i) history of tuberculosis;</p> <p>(ii) previously positive test result for tuberculosis; or</p> <p>(iii) completion of treatment for tuberculosis;</p> <p>or</p> <p>(B) newly positive results to the tuberculin skin test;</p> <p>must have one (1) chest radiograph to exclude a diagnosis of tuberculosis.</p> <p>(4) After baseline testing, tuberculosis screening must:</p> <p>(A) be completed annually; and</p> <p>(B) include, at a minimum, a tuberculin skin test using the Mantoux method or a quantiferon-TB assay unless the individual was subject to subdivision (3).</p> <p>(5) Any person having a positive finding on a tuberculosis evaluation may not:</p> <p>(A) work in the home health agency; or</p> <p>(B) provide direct patient contact;</p>			
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	<p>unless approved by a physician to work. (6) The home health agency must maintain documentation of tuberculosis evaluations showing that any person: (A) working for the home health agency; or (B) having direct patient contact; has had a negative finding on a tuberculosis examination within the previous twelve (12) months.</p> <p>Based on personnel file review, interview, and policy review, the agency failed to ensure all employees had been tested for tuberculosis for 1 of 9 files reviewed (C) with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>Personnel file C, date of hire 10/6/11, failed to evidence a two step TB test had been completed or that the employee had a negative TB test within the last 12 months prior to hire.</li> <li>On 2/20/2012 at 2:20 PM, Employee A, the administrator, indicated there was not a two step TB test for Employee C.</li> <li>The policy dated 6/1/2011 and numbered CL-HH-3017 titled " HH Employee TB Testing" states, "1. Any employee with a negative history of tuberculosis or a negative test result must have a baseline two-step tuberculosis skin test using a Mantoux method or a</li> </ol>	N0464	<p><b>N464 Home Health Agency Administration/Management</b> It is the practice of this agency to ensure that all employees, staff members, persons providing care on behalf of the agency and contractors having direct patient contact are evaluated for tuberculosis and have documentation of a negative tuberculin skin test at any time during the past twelve months or proof of a two step tuberculin test.</p> <ol style="list-style-type: none"> <li>Administrator/Director of Nursing/designee will audit all employee files for evidence of proper PPD or chest x-ray documentation. <b>2/29/12</b></li> <li>Any employee who does not documentation of a current PPD or chest x-ray will not be allowed to see residents until they have proof of current PPD or chest x-ray. <b>Immediately</b></li> <li>All new employee health files will be audited for documentation of current PPD or chest x-ray before the employee is permitted to see clients. <b>Immediately and On-Going</b></li> </ol>	02/29/2012			

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	<p>quantiferon-TB assay unless the individual has documentation that tuberculin skin test has been applies at any time during the previous twelve (12) months and the result was negative.</p>			
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N0470	<p>Rule 12 Sec. 1(m) Policies and procedures shall be written and implemented for the control of communicable disease in compliance with applicable federal and state laws.</p> <p>Based on personnel file review, interview, and policy review, the agency failed to ensure all personnel were free of communicable disease in 3 of 9 personnel files reviewed (A,E, and H) with the potential to affect all the agency's patients.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>The physical exam for Employee A, date of hire 11/7/11 and first patient contact 11/11/11 did not indicate the employee was free of communicable disease disease.</li> <li>The physical exam for Employee E, date of hire 11/4/09 and first patient contact 11/5/09 did not indicate the employee was free of communicable disease.</li> <li>The physical exam for Employee H, date of hire 6/23/11 and first patient contact 6/19/11 did not indicate the employee was free of communicable disease.</li> <li>On 2/20/2012 at 2:30 PM, interview</li> </ol>	N0470	<p><b>N470 Home Health Agency Administration/Management</b> It is the practice of this agency that policies and procedures are written and implemented for the control of communicable disease in compliance with applicable federal and state laws.</p> <ol style="list-style-type: none"> <li>The Administrator/Director of Nursing/designee will audit all employee health files for evidence of a Physical Examination that indicates that the employee is free and clear of any infectious and communicable disease. <b>2/29/12</b></li> <li>Any employee who is identified as not having a physical meeting this criteria will be sent for a new physical so that the Physician can indicate and document that employee is in fact free and clear of any infectious or communicable disease. <b>2/29/12</b></li> <li>All new employee health files will be audited for proper documentation within the required physical before the employee is permitted to see clients. <b>Immediately and On-Going</b></li> </ol>	02/29/2012			

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	<p>with the administrator indicated all documents available were in the personnel files.</p> <p>5. The policy # CL-HH-3017 and dated 6/1/2011 titled, "HH Employee TB Testing" states, "3. All employees, staff members, persons providing care on behalf of the agency and contractors having direct client contact shall be evaluated for tuberculosis and documented ... Home Health employees shall be free of communicable diseases."</p>			
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