

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 157155	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 08/05/2013
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NAME OF PROVIDER OR SUPPLIER SCHNECK MEDICAL CENTER HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 411 W TIPTON ST SEYMOUR, IN 47274
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G000000	<p>This visit was for a home health federal recertification survey. This was a partial extended survey.</p> <p>Survey dates: 7/31, 8/1, 8/2, & 8/5/2013</p> <p>Facility #: 005330</p> <p>Medicaid #: 100264320A</p> <p>Survey Team: Dawn Snider, RN, PHNS</p> <p>Census Service Type:</p> <p>Skilled Patients: 400 Home Health Aide Only Patients: 0 Personal Service Only Patients: NA Total: 400</p> <p>Sample:</p> <p>RR w HV: 6 RR w/o HV: 6 Total RR: 12</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: center;">August 7, 2013</p>	G000000		
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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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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.</p> <p>Based on observation, policy review, and interview, the agency failed to ensure all employees followed agency policy regarding infection control for 1 of 6 (Employee I) home visit observations resulting in the potential to spread infectious diseases to other patients and staff.</p> <p>The findings include:</p> <ol style="list-style-type: none"> 1. On 8/1/13 at 11:15 AM, the physical therapist, employee I, was observed to use ultrasound equipment on patient #2. After the treatment was finished, Employee I placed the ultrasound equipment back into the bag without cleaning it. 2. The policy dated 3/12 titled "Care of Field Bags and Contents" states, " 2. The main interior section of the field bag is considered a clean area; therefore: ... b. Place equipment that comes in contact with patient(s) in a separate bag or clean with a disinfectant before returning it to the field bag. 3. On 8/5/13 at 9:45 AM, the clinical 	G000121	<p>G 121 The home health agency will ensure all employees follow proper infection control technique.</p> <p>A mandatory in-service will be conducted August 15, 2013 to review the policy, "Care of Field Bags and Contents". A copy of the procedures, "Bag technique" and "Cleaning and Disinfecting Equipment" will be distributed to each attendee for reference. A competency examination for all employees will be conducted following the in-service and 100% correct response will be required for a passing score.</p> <p>Effective August 14, 2013, each equipment bag will be stocked continuously with EPA approved disinfectant wipes and a clean trash bag. Per procedure above, employees will be accountable to keep bags stocked with these items after each use.</p> <p>A 10% random sample of employees will be observed in the home by the Director or Nurse Manager for compliance with the policy titled, "Care of Field Bags & Contents".</p>	08/30/2013	

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	manager, employee E, present during the home visit, indicated the physical therapist had not cleaned the equipment prior to placing in the bag as indicated in the agency policy.		This plan of correction will be completed by August 30, 2013. The home health administrator is responsible for ensuring this deficiency is corrected and will not recur.		

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G000225	<p>484.36(c)(2) ASSIGNMENT & DUTIES OF HOME HEALTH AIDE</p> <p>The home health aide provides services that are ordered by the physician in the plan of care and that the aide is permitted to perform under state law.</p> <p>Based on observation, clinical record review, and interview, the agency failed to ensure the home health aide followed the aide care plan in 1 of 2 observations (patient #3) of home health aide services with the potential to affect all the patients receiving home health aide services.</p> <p>The findings include:</p> <ol style="list-style-type: none"> 1. On 8/1/2013 at 11:50 AM, employee F, the home health aide, was observed to give a bath to patient #3 while the patient was sitting on a motorized scooter. The aide assignment sheet indicated the patient was to have oral hygiene every visit. The aide was not observed to provide oral hygiene care. 2. The aide visit note dated 8/1/2013 failed to evidence the oral hygiene had been provided. 3. On 8/5/2013 at 2:35 PM, the clinical manager, employee E, indicated the aide care plan needed to be updated / individualized for the patient. 	G000225	<p>G225</p> <p>The home health agency will ensure all home health aides follow the aide care plan (aide assignment sheet).</p> <p>A mandatory home health aide in-service will occur on August 14, 2013 to review the regulation, the documentation requirements of the home health aide and the process of communication to update the aide care plan. Cheat sheets of this content will be provided for future reference. A competency examination requiring 100% correct responses will be conducted.</p> <p>All current aide care plans will be reviewed by the nurse and aide team for alignment with the patient needs. During this review updates to the aide assignment sheet will be performed as needed.</p> <p>A 10% random sample of aide care plans will be audited for documentation that the aide is following the aide care plan/assignment sheet.</p> <p>This plan of correction will be completed by August 30, 2013.</p>	08/30/2013			

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N000000	<p>This visit was for a state home health relicensure survey.</p> <p>Survey dates: 7/31, 8/1, 8/2, & 8/5/2013</p> <p>Facility#: 005330</p> <p>Medicaid #: 100264320A</p> <p>Survey Team: Dawn Snider, RN, PHNS</p> <p>Census Service Type:</p> <p>Skilled Patients: 400 Home Health Aide Only Patients: 0 Personal Service Only Patients: NA Total: 400</p> <p>Sample:</p> <p>RR w HV: 6 RR w/o HV: 6 Total RR: 12</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN August 7, 2013</p>	N000000					

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N000470	<p>410 IAC 17-12-1(m) Home health agency administration/management 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 observation, policy review, and interview, the agency failed to ensure all employees followed proper infection control technique for 1 of 6 (Employee I) home visit observations resulting in the potential to spread infectious diseases to other patients and staff.</p> <p>The findings include:</p> <p>1. On 8/1/13 at 11:15 AM, the physical therapist, employee I, was observed to use ultrasound equipment on patient #2. After the treatment was finished, Employee I placed the ultrasound equipment back into the bag without cleaning it.</p> <p>2. The policy dated 3/12 titled "Care of Field Bags and Contents" states, " 2. The main interior section of the field bag is considered a clean area; therefore: ... b. Place equipment that comes in contact with patient(s) in a separate bag or clean with a disinfectant before returning it to the field bag.</p>	N000470	<p>N 470 The home health agency will ensure all employees follow proper infection control technique.</p> <p>A mandatory in-service will be conducted August 15, 2013 to review the policy, "Care of Field Bags and Contents". A copy of the procedures, "Bag technique" and "Cleaning and Disinfecting Equipment" will be distributed to each attendee for reference. A competency examination for all employees will be conducted following the in-service and 100% correct response will be required for a passing score.</p> <p>Effective August 14, 2013, each equipment bag will be stocked continuously with EPA approved disinfectant wipes and a clean trash bag. Per procedure above, employees will be accountable to keep bags stocked with these items after each use.</p> <p>A 10% random sample of employees will be observed in the home by the Director or Nurse Manager for compliance with the policy titled, "Care of Field Bags & Contents".</p>	08/30/2013			

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