

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15K074	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 05/01/2013
NAME OF PROVIDER OR SUPPLIER SAFE AT HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 1017 14TH STREET BEDFORD, IN 47421		
(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	
G000000	<p>This was a home health federal complaint investigation survey.</p> <p>Complaint #: IN00126475 - Substantiated: No federal deficiencies related to the allegations are cited.</p> <p>Survey date: 5/1/2013</p> <p>Facility #: 012617</p> <p>Medicaid Vendor: 201044850</p> <p>Surveyor: Dawn Snider, RN, PHNS</p> <p>Safe at Home was found to be in compliance with the Conditions of Participation 42 CFR 484.10, 484.18, and 484.30 as related to this complaint.</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN May 3, 2013</p>	G000000			

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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N000000	<p>This was a home health state complaint investigation survey.</p> <p>Complaint #: IN00126475 - Substantiated: State deficiencies related to the allegation are cited.</p> <p>Survey date: 5/1/2013</p> <p>Facility #: 012617</p> <p>Medicaid Vendor: 201044850</p> <p>Surveyor: Dawn Snider, RN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN May 3, 2013</p>	N000000			

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N000464	<p>410 IAC 17-12-1(i) Home health agency administration/management 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: (A) a documented: (i) history of tuberculosis; (ii) previously positive test result for tuberculosis; or (iii) completion of treatment for tuberculosis; or (B) newly positive results to the tuberculin skin test; must have one (1) chest radiograph to exclude a diagnosis of tuberculosis.</p> <p>(4) After baseline testing, tuberculosis screening must: (A) be completed annually; and (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</p>			

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	<p>a tuberculosis evaluation may not: (A) work in the home health agency; or (B) provide direct patient contact; 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 and policy review and interview, the agency failed to ensure all employees had the second step of the PPD (purified protein derivative) within 1 to 3 weeks after the first tuberculin (TB) skin test was administered upon hire and the agency policy was congruent with the state rules for 8 of 12 files reviewed (A, D, G, H, I, J, K, and L) with the potential to affect all the patients of the agency</p> <p>Findings include:</p> <p>1. Personnel file A, date of hire 10/5/12 and first patient contact 10/11/12, evidenced a TB test administered on 10/5/12 with results read on 10/7/12. The file failed to evidence a second TB test was administered as required.</p> <p>2. Personnel file D, date of hire 11/10/12 and first patient contact 11/12/12,</p>	N000464	<p>1. All employee files will be reviewed for evidence of either a two-step tuberculin skin test, or if they previously received a baseline tuberculin test within the previous 12 months. Based upon these findings, the necessary tuberculin skin test will be administered. 2. Our company policy was corrected to meet the State requirements. It now states that, "If skin test develops no induration or the induration area is less than 10 mm, the employee will return no earlier than (7) days and no later than 21 days to receive second dose. If the applicant has had a negative Tuberculin skin test within the previous 12 months, and the current skin test develops no induration or the induration area is less than 10 mm, no further testing is required. The results within the previous 12 months, as well as the new test results will be kept in the employee's personnel file." 3. The Human Resources Director will be responsible for ensuring that all employees have</p>	05/31/2013

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	<p>evidenced a TB test administered on 11/10/12 with results read on 11/12/12. The file failed to evidence a second TB test was administered as required.</p> <p>3. Personnel file G, date of hire 4/17/13 and first patient contact 4/27/13, evidenced a TB test administered on 4/17/13 with results read on 4/20/13. The file failed to evidence a second TB test was administered as required.</p> <p>4. Personnel file H, date of hire 4/7/13 and first patient contact 4/11/13, evidenced a TB test administered on 7/27/12 and on 8/8/12 with results read on 7/29/12. The file failed to evidence the results of the second TB test as required.</p> <p>5. Personnel file I, date of hire 4/2/13 and first patient contact 4/18/13, evidenced a TB test was administered on 7/3/12 with results read on 7/5/12. The file failed to evidence a second TB test was administered as required.</p> <p>6. Personnel file J, date of hire 11/16/12 and first patient contact 12/10/12, evidenced a TB test was administered on 1/7/13 with results read on 1/9/13. The file failed to evidence a second TB test was administered as required.</p> <p>7. Personnel file K, date of hire 11/15/12</p>		<p>everything required in their employee file before their date of first patient contact. This includes a two-step tuberculin skin test - if proof of a negative tuberculin skin test within the past 12 months is not provided. 4. This plan of correction will be completed by 5/31/13.</p>				

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	<p>and first patient contact 11/19/12, evidenced a TB test was administered on 11/13/12 with results read on 11/16/12. The file failed to evidence a second TB test was administered as required.</p> <p>8. Personnel file L, date of hire 5/2/12 and first patient contact 5/9/12, evidenced a TB test was administered on 5/3/12 with results read on 5/5/12. The file failed to evidence a second TB test was administered as required.</p> <p>9. The agency policy dated 6/17/11 titled "Tuberculosis Screening Program" states, "Pre-Employment Screening: Applicant with no known history of Tuberculosis and no previous significant Mantoux (PPD) Tuberculin skin test. Testing method will include: Intermediate tuberculin skin test (5 TU): If skin test causes a reaction with greater than 10 mm induration, employees will return no earlier than seven (7) days and no later than 21 days to receive second dose. If skin test develops no induration or the induration area is less than 10 mm, no additional testing is required."</p> <p>10. On 5/1/13 at 2:30 PM, the owner/administrator indicated the agency policy was not in compliance with the state regulation.</p>			

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