

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15K076	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 05/30/2019
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NAME OF PROVIDER OR SUPPLIER HEAVEN SENT HOME HEALTH CARE LLC	STREET ADDRESS, CITY, STATE, ZIP COD 10484 N STATE ROAD 13 ELWOOD, IN 46036
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G 0000 Bldg. 00	<p>This was a federal complaint survey.</p> <p>Survey Dates: May 28, 29, 30; 2019</p> <p>Facility Number: 012612</p> <p>Provider Number: 15K076</p> <p>Coplain # IN00295777; Substantiated with state and federal deficiencies</p> <p>Unduplicated Skilled Census: 6 Home Health Aide Only Census: 49 Personal Service Only Patients: 14 Total Census: 69</p>	G 0000		
G 0754 Bldg. 00	<p>Based on record review and interview, the agency failed to ensure that home health aides (HHA) were qualified to provide personal care for 1 of 1 HHA placed on aide registry since 1/16/19.</p> <p>Findings include:</p> <p>During review of employee files on 5/29/19, the list of current employees included employee D, home health aide (HHA) hire date 2/7/19 and first patient contact date 2/9/19. The employee file failed to evidence the HHA was qualified.</p> <p>Employee D's application for employment was dated 1/31/19. A job description for home health aide was signed by employee D on 2/7/19.</p>	G 0754	<p>G-0754</p> <p>1.a Removed from field counseled on HMK job description 1.b Removed from registry 1.c All homemaking and ATTC paper work will be audited weekly for compliance of G-754 2. 100% of records were reviewed 100% compliant 3. Employee records will be reviewed every 30 days to show compliance</p> <p>Any corrective actions will be reported to QAPI Administrator shall be responsible to ensure this does not recur</p>	06/28/2019

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 other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 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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	<p>A agency document titled "Home Health-hospice Aide Written Competency assessment exam scoring sheet was completed, but not signed.</p> <p>A "competency skills check off," had the name of the employee but was not completed or signed.</p> <p>The agency document titled "Certified Home health aide check list," contained skills listed. None of the skills were checked of or completed. The document was signed by employee D, but not dated or signed by a nurse.</p> <p>A document from the Indiana State Department of Health (ISDH) contained the signature of employee D on 12/31/18. The document stated "I [director of nursing] swear and affirm under the penalties of perjury that the foregoing is true and accurate, and that the home health aide applicant named in this application has satisfactorily completed a competency evaluation program as required by 42 CFR 484.36 ...." This was signed by the director of nursing on 12/31/18. The administrator also signed the application on 12/31/18.</p> <p>During an interview on 5/29/19 at 12:07 PM, employee D, HHA stated that she was a new employee as of February of 2019. Employee D stated that her job duties were homemaking such as cleaning, running errands, shopping, changing linens. Stated she was a certified nursing assistant in Kentucky but had let her license lapse. Stated her current clients were patient #13 and #15. Employee D was asked if personal care had ever been completed. She stated that patient #13 had sores on feet and legs and is a large man. She stated she assisted him with washing, soaking, drying feet, applied lotion, and put socks on. Stated that the client had asked her to do this.</p>			

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G 0768  Bldg. 00	<p>Stated that she had never applied as a home health aide in Indiana and had never undergone any training in Indiana for that. Employee D was showed her signature as it appeared on the ISDH application for home health aide. Employee stated that it was her signature, and she had signed that when she filled out the application for employment on 1/31/19.</p> <p>During an interview on 5/28/19 at 2:15 PM, the director of nursing (DON) stated that employee D was just a homemaker not a home health aide. When told that the agency placed the aide on the registry on 12/31/18 she stated "No she didn't go on the registry, I don't remember, might ask [administrator]." When the DON was asked why the HHA was placed on the registry in December of 2018 if she wasn't hired until February of 2019 she stated "You'd have to ask [administrator]. At 2:26 PM, the administrator stated employee D had never done personal care as she is a homemaker and they did not know why she had been put on the aide registry.</p> <p>Based on record review and interview, the agency failed to ensure that home health aides were competencied prior to providing hands on care to the patient for 1 of 1 home health aides (HHA) hired after 1/16/19 (employee D).</p> <p>Findings include:</p> <p>During review of employee files on 5/29/19, the list of current employees included employee D, home health aide (HHA) hire date 2/7/19 and first patient contact date 2/9/19. The employee record failed to</p>	G 0768	G-0768 1 Employee D was removed from the field. Clinical director counseled Employee D on her what her non medical care homemaking job description is 1.a Administrator contacted Darlene Jones at ISDH explained we mistakenly registered an aide without this agency ensuring the aide was competency to do hands on care. 1.b Employee D was taken off	06/28/2019	

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	<p>evidence the HHA had been competenced.</p> <p>A agency document titled "Home Health-hospice Aide Written Competency assessment exam scoring sheet was completed, but not signed.</p> <p>A "competency skills check off," had the name of the employee but was not completed or signed.</p> <p>The agency document titled "Certified Home health aide check list," contained skills listed. None of the skills were checked of or completed. The document was signed by employee D, but not dated or signed by a nurse.</p> <p>A document from the Indiana State Department of Health (ISDH) contained the signature of employee D on 12/31/18. The document stated "I [director of nursing] swear and affirm under the penalties of perjury that the foregoing is true and accurate, and that the home health aide applicant named in this application has satisfactorily completed a competency evaluation program as required by 42 CFR 484.36 ...." This was signed by the director of nursing on 12/31/18. The administrator also signed the application on 12/31/18.</p> <p>During an interview on 5/29/19 at 12:07 PM, employee D, HHA stated that she had never applied as a home health aide in Indiana and had never undergone any training in Indiana for that.</p> <p>During an interview on 5/28/19 at 2:15 PM, the director of nursing (DON) stated that employee D was just a homemaker not a home health aide. When told that the agency placed the aide on the registry on 12/31/18 she stated "No she didn't go on the registry, I don't remember, might ask [administrator]." When the DON was asked why</p>		<p>HHA registry per E-mail from Darlene Jones.</p> <p>1.c 100% of aide HR files were reviewed for compliance of G-768</p> <p>1.d All Homemaking and ATTC paper work will be audited for compliance of G-768</p> <p>2. Employee records will be reviewed every 30 days for compliance</p> <p>Any corrective actions will be reported to QAPI Administrator shall be responsible to ensure this does not recur</p>				

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G 0772  Bldg. 00	<p>the HHA was placed on the registry in December of 2018 if she wasn't hired until February of 2019 she stated "You'd have to ask [administrator]. At 2:26 PM, the administrator stated employee D had never done personal care as she was a homemaker and they did not know why she had been put on the aide registry.</p> <p>Based on record review and interview, the agency failed to ensure proof of initial competency and test for home health aides (HHA) was obtained from the issuing agency for 1 of 1 HHA's reviewed with issued certifications from another agency.</p> <p>Findings include:</p> <p>During review of employee Files on 5/29/19, the file for employee J, HHA was reviewed. The employees date of hire 5/1/17, first patient contact 5/8/17, and HHA license issued on 6/14/11. The employee file failed to evidence the initial competency and HHA test from the issuing agency for the HHA certification.</p> <p>During an interview on 5/28/19 at 2:35 PM, the administrator stated they were unaware they had to obtain the initial competency and tests from the issuing agency. She stated if upon hire, the HHA is on the registry they did not go back and get that information.</p>	G 0772	<p>G-0772</p> <p>1. 100% of aide HR files were reviewed for compliance of G-722</p> <p>2. Employee charts will be audited upon hire and at 30 days to ensure compliance</p> <p>Any corrective actions will be reported to QAPI</p> <p>Administrator shall be responsible that this deficiency does not recur</p>	06/28/2019
G 0828  Bldg. 00	<p>Based on record review and interview, the agency</p>	G 0828	<p>G-0828</p> <p>1.a All non-registered para</p>	06/28/2019

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N 0000  Bldg. 00	<p>failed to ensure that homemaker only patients did not receive personal care for 1 of 13 homemaker only records reviewed (#13).</p> <p>Findings include:</p> <p>An agency policy dated 11/2018 titled "Home health aide: Document policy," Policy # 2.51 stated "...Care / Services provided should be in accordance with direction provided in the Home health aide care plan ...."</p> <p>The clinical record of patient #13 was reviewed on 5/29/19 and indicated a start of services date of 11/19/18. The service plan for patient #13 indicated tasks staff were to complete were: Clean / file nails and soak feet one time per week and feed / set up meals every visit. The service plan had been reviewed and signed by the director of nursing on 5/18/19. Homemaker documentation from 1/19/19-5/3/19 indicated that employees D and F had soaked and cleaned feet, and assisted patient with a body suit during homemaker visits. The agency failed to ensure that homemaker staff only completed tasks within their scope of practice.</p> <p>During an interview on 5/29/19 at 12:07 PM, employee D, HHA stated patient #13 had sores on their feet and legs and was a large person. Employee D stated she assisted with washing, soaking, drying feet, applied lotion, and put socks on when the client had asked her to do this.</p> <p>This was a state complaint survey.</p> <p>Survey Dates: May 28, 29, 30; 2019</p>	N 0000	<p>professionals will only perform non-medical care</p> <p>1.b Employee D was removed from the field educated and counseled on her non medical care job descriptions for Homemaking services and ATTC.</p> <p>2.All Homemaking and ATTC staff paperwork will be checked weekly for compliance of G828</p> <p>3. 100% of records were reviewed for compliance of G 828</p> <p>This agency is in the process of opening a PSA company once approved waiver patients will be moved over</p> <p>Any corrective actions will be reported to QAPI</p> <p>Administrator will be responsible for this correct actions</p>	

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N 0536 Bldg. 00	<p>Facility Number: 012612</p> <p>Provider Number: 15K076</p> <p>Coplain # IN00295777; Substantiated with state and federal deficiencies</p> <p>Unduplicated Skilled Census: 6 Home Health Aide Only Census: 49 Personal Service Only Patients: 14 Total Census: 69</p> <p>410 IAC 17-13-3(d) Service Plan Rule 13 Sec. 3(d) Personal care services provided by a personal services agency operated under a home health agency license must meet the requirements of IC 16-27-4.</p> <p>Based on record review and interview, the agency failed to ensure that homemaker only patients did not receive personal care for 1 of 13 homemaker only records reviewed (#13).</p> <p>Findings include:</p> <p>An agency policy dated 11/2018 titled "Home health aide: Document policy," Policy # 2.51 stated "...Care / Services provided should be in accordance with direction provided in the Home health aide care plan ...."</p> <p>The clinical record of patient #13 was reviewed on 5/29/19 and indicated a start of services date of 11/19/18. The service plan for patient #13 indicated tasks staff were to complete were: Clean / file nails and soak feet one time per week and feed / set up meals every visit. The service plan had been reviewed and signed by the director of</p>	N 0536	<p>N536</p> <p>1.a All non-registered para professionals will only perform non-medical care</p> <p>1.b Employee D was removed from the field educated and counseled on her non medical care job descriptions for Homemaking services and ATTC.</p> <p>2.All Homemaking and ATTC staff paperwork will be checked weekly for compliance</p> <p>3. 100% of records were reviewed for compliance of N-536</p> <p>This agency is in the process of opening a PSA company once approved waiver patients will be moved over</p>	06/28/2019

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N 0596 Bldg. 00	<p>nursing on 5/18/19. Homemaker documentation from 1/19/19-5/3/19 indicated that employees D and F had soaked and cleaned feet, and assisted patient with a body suit during homemaker visits. The agency failed to ensure that homemaker staff only completed tasks within their scope of practice.</p> <p>During an interview on 5/29/19 at 12:07 PM, employee D, HHA stated patient #13 had sores on their feet and legs and was a large person. Employee D stated she assisted with washing, soaking, drying feet, applied lotion, and put socks on when the client had asked her to do this.</p> <p>410 IAC 17-14-1(l)(A) Scope of Services Rule 14 Sec. 1(l) The home health agency shall be responsible for ensuring that, prior to patient contact, the individuals who furnish home health aide services on its behalf meet the requirements of this section as follows: (1) The home health aide shall: (A) have successfully completed a competency evaluation program that addresses each of the subjects listed in subsection (h) of this rule; and</p> <p>Based on record review and interview, the agency failed to ensure that home health aides (HHA) were qualified to provide personal care for 1 of 1 HHA placed on aide registry since 1/16/19.</p> <p>Findings include:</p> <p>During review of employee files on 5/29/19, the list of current employees included employee D, home health aide (HHA) hire date 2/7/19 and first patient contact date 2/9/19. The employee file failed to evidence the HHA was qualified.</p>	N 0596	<p>This will be reported to QAPI monthly for adherence to this corrective actions</p> <p>Administrator will be responsible for this correct actions</p> <p>N-0596 1.a Removed from field counseled on HMK job description 1.b Removed from registry 1.c All homemaking and ATTC paper work will be audited weekly for compliance of N-596 2. 100% of records were reviewed. 100% compliance 3. Employee records will be reviewed every 30 days to show compliance</p>	06/28/2019			



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	<p>Employee D's application for employment was dated 1/31/19. A job description for home health aide was signed by employee D on 2/7/19.</p> <p>A agency document titled "Home Health-hospice Aide Written Competency assessment exam scoring sheet was completed, but not signed.</p> <p>A "competency skills check off," had the name of the employee but was not completed or signed.</p> <p>The agency document titled "Certified Home health aide check list," contained skills listed. None of the skills were checked of or completed. The document was signed by employee D, but not dated or signed by a nurse.</p> <p>A document from the Indiana State Department of Health (ISDH) contained the signature of employee D on 12/31/18. The document stated "I [director of nursing] swear and affirm under the penalties of perjury that the foregoing is true and accurate, and that the home health aide applicant named in this application has satisfactorily completed a competency evaluation program as required by 42 CFR 484.36 ...." This was signed by the director of nursing on 12/31/18. The administrator also signed the application on 12/31/18.</p> <p>During an interview on 5/29/19 at 12:07 PM, employee D, HHA stated that she was a new employee as of February of 2019. Employee D stated that her job duties were homemaking such as cleaning, running errands, shopping, changing linens. Stated she was a certified nursing assistant in Kentucky but had let her license lapse. Stated her current clients were patient #13 and #15. Employee D was asked if personal care</p>		<p>Any corrective actions will be reported to QAPI Administrator shall be responsible to ensure this does not recur</p>	

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	<p>had ever been completed. She stated that patient #13 had sores on feet and legs and is a large man. She stated she assisted him with washing, soaking, drying feet, applied lotion, and put socks on. Stated that the client had asked her to do this. Stated that she had never applied as a home health aide in Indiana and had never undergone any training in Indiana for that. Employee D was showed her signature as it appeared on the ISDH application for home health aide. Employee stated that it was her signature, and she had signed that when she filled out the application for employment on 1/31/19.</p> <p>During an interview on 5/28/19 at 2:15 PM, the director of nursing (DON) stated that employee D was just a homemaker not a home health aide. When told that the agency placed the aide on the registry on 12/31/18 she stated "No she didn't go on the registry, I don't remember, might ask [administrator]."When the DON was asked why the HHA was placed on the registry in December of 2018 if she wasn't hired until February of 2019 she stated "You'd have to ask [administrator]. At 2:26 PM, the administrator stated employee D had never done personal care as she is a homemaker and they did not know why she had been put on the aide registry.</p>			