

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/05/2021  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>157554</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/22/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>ANGELS OF MERCY HOMECARE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1800 N WABASH AVE STE 100</b> <b>MARION, IN 46952</b>		
(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	
{G 000}	<p><b>INITIAL COMMENTS</b></p> <p>This was a second post condition revisit (PCR) for the Federal and State home health recertification survey originally completed on May 31, 2019.</p> <p>Survey Date: March 19, 22; 2021</p> <p>Facility Number: 003890</p> <p>Provider Number: 157554</p> <p>Unduplicated Admissions for Last 12 Months: 1844 Active Census: 477 Home Health Aide Only Patients: 0 Personal Service Only Patients: 0 Physical Therapy Only Patients: 70 Occupational Therapy Only Patients: 0 Medical Social Worker Only Patients: 0</p> <p>During this survey, 7 standard level deficiencies were found corrected, 1 condition level deficiency was re-cited, and 2 standard level deficiencies were re-cited.</p> <p>Angels of Mercy continues to be precluded from providing its own home health aide training and competency evaluation program for a period of 2 years beginning March 22, 2021 through March 21, 2023 for being found out of compliance with the Conditions of Participation 42 CFR 484.105 Organization and administration of services.</p> <p>These deficiencies reflects State Findings cited in accordance with 410 IAC 17. Refer to the State Form for additional State Findings.</p>	{G 000}			
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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{G 000}	Continued From page 1	{G 000}			
{G 940}	Quality review by Area 2 on 4/5/21 Organization and administration of services CFR(s): 484.105  Condition of participation: Organization and administration of services. The HHA must organize, manage, and administer its resources to attain and maintain the highest practicable functional capacity, including providing optimal care to achieve the goals and outcomes identified in the patient's plan of care, for each patient's medical, nursing, and rehabilitative needs. The HHA must assure that administrative and supervisory functions are not delegated to another agency or organization, and all services not furnished directly are monitored and controlled. The HHA must set forth, in writing, its organizational structure, including lines of authority, and services furnished. This CONDITION is not met as evidenced by: Based on record review and interview, the home health agency failed to ensure the governing body had full legal authority over the provision of services (see Tag G942); failed to enter into service agreements with agencies where a special relationship between the agencies did not exist and failed to ensure all service agreements were signed by an employee of the agency (see Tag G978). Based on record review and interview, the home health agency failed to have an organizational chart which evidenced the role of clinical manager for 2 of 2 organizational charts reviewed and failed to ensure staff were able to identify the administrator and clinical manager for 7 of 7 employees interviewed (Administrator, Alternate Administrator / Alternate Clinical Manager, RN / Clinical Director #1, RN / Clinical Director #2, RN Case Manager #1, LPN #1, PT	{G 940}			

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{G 940}	Continued From page 2 #1).  The cumulative effect of this systemic problem resulted in the agency being out of compliance with the Condition of Participation 484.105 Organization and administration of services.  Findings include:  1. An agency policy titled "Organizational responsibilities and Organizational Charts," revised 4/30/2020 and policy number 5.005, stated " ... Introductory Statement: ... The Board of Managers serves as the governing body of the [agency] ... Procedure: ... 2. The Board of Managers develops and revises changes in the organizational structure as needed by the changes in the organization. 3. This organizational chart is maintained, up to date, and defines appropriate lines of responsibility ... 7. If there are multiple branches within the provider, the Clinical Director is responsible for directing all patient care activities for the organization and ensures that patient care is organized, directed, and staffed according to the scope of care or services offered. The Clinical Director takes reasonable steps to ensure the consistency and availability of care and services advertised or presented to the public as available from the organization. The Clinical Director coordinates and integrates the care and services provided by employees and contracted staff and recommends resources needed to provide care and services. 8. The following chart delineates the organization lines of responsibilities for the Agency and branch ...." The agency policy included an organizational chart with the delineation of authority, from top to bottom, was documented as follows: "Board of Managers (Governing Body), Executive Director,	{G 940}			

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{G 940}	<p>Continued From page 3</p> <p>Clinical Director (Branch Manager), Patient Care Manager ...." The first branch of the chart started at the "Clinical Director" level, with "Business Manager" branching off to the same level of authority, and "Clerical" immediately below it. The second branch of the chart started at the "Patient Care Manager" level, and went to "RN [Registered Nurse] ... PT [Physical Therapy] ... OT [Occupational Therapy] ... ST [Speech Therapy] ... MSW [Medical Social Worker] ...."</p> <p>The third branch of the organizational chart started at the "RN" level, and went from top to bottom as follows: "RN, LPN [Licensed Practical Nurse]. HHA [Home Health Aide], Patient." The fourth branch of the organizational chart started at the "PT" level, and went from top to bottom as follows: "PT, PTA [Physical Therapy Assistant], Patient." The fifth branch of the organizational chart started at the "OT" level, and went from top to bottom as follows: "OT, COTA [Certified Occupational Therapy Assistant], Patient." The sixth branch of the organizational chart started at the "ST" level, and went from top to bottom as follows: "ST, Patient." The seventh branch of the organizational chart started at the MSW level, and went from top to bottom as follows: "MSW, Patient."</p> <p>2. An undated agency job description titled "Administrator" stated " ... Supervisor's Title: Area or Regional Vice President / Area Executive Director. Job Summary: The Administrator of the home health provider is responsible for the day-to-day operations of their assigned provider while providing oversight and support to one or more additional providers, as allowed by state-specific regulations ... Essential Functions: ... Ensures that the Clinical Director is available during all operating hours or directly provides</p>	{G 940}			

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{G 940}	<p>Continued From page 4 coverage for those duties ... Responsible for directing day to day operations of the provider / or providers assigned ...."</p> <p>3. An undated agency job description titled "Clinical Director" stated " ... Supervisor's Title: Executive Director. Job Summary: The Clinical Director is responsible for overseeing and directing the patient care operations of the home care facility. This includes: ... planning for the services to be provided to patients and supervising their total home health care ... Essential Functions: Oversees all patient care services and personnel at the agency to include coordinating referrals and patient care, assuring that patient needs are continually assessed, and assuring the development, implementation, and updates to the patient's individual plan of care ... Provides and oversees orientation for personnel. Provides timely performance evaluation of personnel ... Assists with staff recruitment to ensure that adequate staffing is maintained ... Ensures that only qualified personnel are hired ... Reviews weekly Operations Spreadsheet, weekly Metrics Report, weekly Productivity Report, and agency financial statements to ensure the organization is on target with budgeted goals ...."</p> <p>4. An agency document titled "Angels of Mercy Home Care - Marion IN. Organizational Chart" was reviewed on 3/19/21. The organizational chart indicated the delineation of authority, from top to bottom, was as follows: "Executive Director: Marion [Administrator / Clinical Manager], Clinical Director: Marion [RN #1]. Clinical Director: Warsaw [RN #2]. Clinical Director: Logansport [Alternate Administrator / Alternate Clinical Manager]." The organization chart's first branch indicated a line of authority,</p>	{G 940}			

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{G 940}	<p>Continued From page 5</p> <p>from top to bottom, as follows: "Clinical Director: Marion ..., Business Manager: Marion ... Clerical. Patient Care Manager: Marion ..., Field Staff, Patient." The organization chart's second branch indicated a line of authority from top to bottom, as follows: "Clinical Director: Warsaw ..., Business Manager: Warsaw ... Clerical. Patient Care Manager: Warsaw ..., Field Staff, Patient." The organization chart's third branch indicated a line of authority from top to bottom as follows: "Clinical Director: Logansport ..., Business Manager: Logansport ..., Clerical, Patient Care Managers ..., Field Staff, Patient." The organization chart failed to evidence the role of clinical manager, alternate clinical manager, and alternate administrator.</p> <p>5. The survey's Entrance Conference was conducted on 3/19/21 at 10:32 AM with the Administrator / Clinical Manager and RN/Clinical Director #1. During the Entrance Conference, the Administrator indicated her title was "Executive Director," and she performed the roles of administrator and clinical manager yet the agency's clinical manager was RN #1.</p> <p>6. An interview was conducted on 3/19/21 at 2:47 PM with RN / Clinical Director #2. During the interview, RN/Clinical Director #2 was unable to name the employee under the role of alternate clinical manager.</p> <p>7. An interview was conducted on 3/19/21 at 2:56 PM with the Alternate Administrator / Alternate Clinical Manager. During the interview, the employee indicated the agency did not have a clinical manager role, and stated "that's not a title that we [the agency] have." The employee indicated the duties of a clinical manager "fall to</p>	{G 940}			

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{G 940}	<p>Continued From page 6</p> <p>me and the Patient Care Managers." The Alternate Administrator / Alternate Clinical Manager was also unable to name the employee in the alternate clinical manager role.</p> <p>8. An interview was conducted on 3/22/21 at 11:39 AM with the Clinical Director/RN #1. During the interview, the Clinical Director/RN #1 indicated the agency did not have a job description for the role of clinical manager.</p> <p>9. An interview was conducted on 3/22/21 at 12:22 PM with RN Case Manager #1. During the interview, the employee was unable to name the employee in the role of alternate administrator. The RN Case Manager #1 indicated the Alternate Administrator / Alternate Clinical Manager was the clinical manager, and named Patient Care Manager #1 was the alternate clinical manager.</p> <p>10. An interview was conducted on 3/22/21 at 1:57 PM with PT #1. During the interview, PT #1 was unable to name the employees in the roles of administrator, alternate administrator, and alternate clinical manager. PT #1 indicated RN / Clinical Director #2 as both their immediate supervisor and the clinical manager.</p> <p>11. An interview was conducted on 3/22/21 at 2:10 PM with LPN #1. During the interview, LPN #1 indicated the administrator's name was "Debbie [no last name given]." LPN #1 was unable to name the employee in the roles of alternate administrator, clinical manager, and alternate clinical manager.</p> <p>17-12-1(a)(1) 17-12-1(a)(2)</p>	{G 940}			

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{G 946}	Continued From page 7	{G 946}			
{G 946}	<p>Administrator appointed by governing body CFR(s): 484.105(b)(1)(i)</p> <p>(i) Be appointed by and report to the governing body; This ELEMENT is not met as evidenced by: Based on record review and interview, the home health agency failed to ensure the administrator reported to the governing body, was appropriately evidenced in the administrator's job description and did not conflict the organizational chart (s).</p> <p>Findings include:</p> <p>1. An agency policy titled "Organizational Responsibilities and Organizational Charts," revised 4/30/2020 and policy number 5.005, stated " ... Introductory Statement: ... The Board of Managers serves as the governing body of the [agency] ... Procedure: ... 2. The Board of Managers develops and revises changes in the organizational structure as needed by the changes in the organization. 3. This organizational chart is maintained, up to date, and defines appropriate lines of responsibility. 4. Supervising and reporting relationships and the relationship of the Executive Director and the Board of Managers are clearly defined in these documents. 5. The Executive Director, [sic] is appointed by the Board of Managers. Subject to the Board of Manager authority, the Executive Director thus assumes day-to-day oversight, management and responsibility for the agency's overall operations, including provision of all home health services, fiscal operations, review of the agency's budget and operational plans and its quality assessment &amp; performance improvement (QAPI) program. 6. The Executive Director of the agency is appointed in writing by the Board of</p>	{G 946}			



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{G 946}	<p>Continued From page 8</p> <p>Managers ...." The agency policy included an organizational chart with the delineation of authority, from top to bottom, was documented as follows: "Board of Managers (Governing Body), Executive Director, Clinical Director (Branch Manager), Patient Care Manager ...."</p> <p>2. An undated agency job description titled "Administrator" stated " ... Supervisor's Title: Area or Regional Vice President / Area Executive Director ...."</p> <p>3. The survey's Entrance Conference was conducted on 3/19/21 at 10:32 AM with the Administrator / Clinical Manager and RN/Clinical Director #1. During the Entrance Conference, the Administrator indicated her title was "Executive Director," and she performed the roles of administrator and clinical manager.</p> <p>4. An agency document titled "Angels of Mercy Home Care - Marion IN. Organizational Chart" was reviewed on 3/19/21. The organizational chart indicated the delineation of authority, from top to bottom, was as follows: "Executive Director: Marion [Administrator / Clinical Manager], Clinical Director: Marion [RN #1]. Clinical Director: Warsaw [RN #2]. Clinical Director: Logansport [Alternate Administrator / Alternate Clinical Manager]." The organization chart's first branch indicated a line of authority, from top to bottom, as follows: "Clinical Director: Marion ..., Business Manager: Marion ... Clerical. Patient Care Manager: Marion ..., Field Staff, Patient." The organization chart's second branch indicated a line of authority from top to bottom, as follows: "Clinical Director: Warsaw ..., Business Manager: Warsaw ... Clerical. Patient Care Manager: Warsaw ..., Field Staff, Patient."</p>	{G 946}			

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{G 946}	Continued From page 9 The organization chart's third branch indicated a line of authority from top to bottom as follows: "Clinical Director: Logansport ..., Business Manager: Logansport ..., Clerical, Patient Care Managers ..., Field Staff, Patient." The organization chart failed to evidence the administrator reported to the governing body.  5. The agency's Governing Body minutes were reviewed on 3/19/21. The governing body minutes included a document titled "Ownership," which included a list of the owners of the home health agency and an organizational chart r/t the ownership. The ownership organizational chart indicated the delineation of ownership, and thus authority, from top to bottom, as follows: "[Great Grandparent Owner Entity A] ... [Grandparent Owner Entity B] ... [Parent Owner Entity C] ... IN Homecare Network North, LLC [d/b/a Angels of Mercy Homecare], Board of Managers, Executive Director / Administrator."	{G 946}			
{G 978}	17-12-1(b)(1) Must have a written agreement CFR(s): 484.105(e)(2)(i-iv)	{G 978}			

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{G 978}	<p>Continued From page 10</p> <p>An HHA must have a written agreement with another agency, with an organization, or with an individual when that entity or individual furnishes services under arrangement to the HHA's patients. The HHA must maintain overall responsibility for the services provided under arrangement, as well as the manner in which they are furnished. The agency, organization, or individual providing services under arrangement may not have been:</p> <p>(i) Denied Medicare or Medicaid enrollment; (ii) Been excluded or terminated from any federal health care program or Medicaid; (iii) Had its Medicare or Medicaid billing privileges revoked; or (iv) Been debarred from participating in any government program.</p> <p>This ELEMENT is not met as evidenced by: Based on record review and interview, the home health agency failed to enter into service agreements with agencies where a special relationship between the agencies did not exist for 2 of 2 service agreements with agencies providing home health aide training services (Home Health Entity E, Home Health Entity F), and failed to maintain responsibility for the all contracted agreements and ensure contracted agreements were authorized by the administrator for 4 of 6 service agreements reviewed (Home Health Entity G, Home Health Entity I, Staffing Entity J, Staffing Entity K).</p> <p>Findings include:</p> <p>1. An agency policy titled "Organizational Responsibilities and Organizational Charts," revised 4/30/2020 and policy number 5.005, stated " ... Introductory Statement: ... The Board of Managers services as the governing body of</p>	{G 978}			

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{G 978}	<p>Continued From page 11</p> <p>the [agency] ... Procedure: ... 5. The Executive Director, is appointed by the Board of Managers ... the Executive Director thus assumes day-to-day oversight, management and responsibility for the agency's overall operations, including provision of all home health services, fiscal operations, reviewed of the agency's budget and operational plans ... 7 ... The Clinical Director coordinates and integrates the care and services provided by employees and contracted staff ...."</p> <p>2. An undated agency job description titled "Administrator" stated " ... Job Summary: The Administrator of the home health provider is responsible for the day-to-day operations of their assigned provider while providing oversight and support to one or more additional providers ... This includes: coordinating and completing assigned projects to effectively support the immediate and long range objectives of the company ... planning for the services to be provided to patients ... implementing and maintaining administrative practices ... Essential Functions: ... Responsible for directing day to day operations of the provider/or providers assigned ... External Customer Interaction: ... Vendors / Suppliers: Frequently ... Consultants / Contractors: Frequently ...."</p> <p>3. The agency's Governing Body minutes were reviewed on 3/19/21. The governing body minutes included a document titled "Ownership," which included a list of the owners of the home health agency and an organizational chart r/t the ownership. The ownership organizational chart indicated the delineation of ownership, and thus authority, from top to bottom, as follows: "[Great Grandparent Owner Entity A] ... [Grandparent</p>	{G 978}			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>157554</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/22/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>ANGELS OF MERCY HOMECARE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1800 N WABASH AVE STE 100</b> <b>MARION, IN 46952</b>		
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{G 978}	<p>Continued From page 12</p> <p>Owner Entity B] ... [Parent Owner Entity C] ... [Entity D d/b/a Angels of Mercy Homecare], Board of Managers, Executive Director / Administrator."</p> <p>4. A service agreement titled "Arrangement for Services Agreement," dated 10/29/2020 and signed by the Administrator / Clinical Manager, indicated the home health agency had contracted Home Health Entity E to conduct "home health aide training and competency evaluation services."</p> <p>A service agreement titled "Arrangement for Services Agreement," dated 10/29/2020 and signed by the Administrator / Clinical Manger, indicated the home health agency had contracted Home Health Entity F to conduct "home health aide training and competency evaluation services."</p> <p>An interview was conducted on 3/22/21 at 12:45 PM with the Administrator/Clinical Manager and Clinical Director/RN #1. During the interview, the Administrator/Clinical Manager indicated Home Health Entity E and Home Health Entity F were owned by Great Grandparent Owner Entity A. The Administrator and Clinical Director/RN #1 also indicated they were unable to name any members of Home Health Entity E and Home Health Entity F's governing body. The home health agency failed to enter into service agreements with agencies where a special relationship did not exist.</p> <p>5. A service agreement titled "Entity Therapy Services Agreement" dated 1/13/2020, indicated the home health agency contracted Home Health Entity G to provide physical therapy services to the agency's patients as requested by the</p>	{G 978}			

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

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NAME OF PROVIDER OR SUPPLIER  <b>ANGELS OF MERCY HOMECARE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1800 N WABASH AVE STE 100</b> <b>MARION, IN 46952</b>		
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{G 978}	<p>Continued From page 13</p> <p>agency. The agreement was signed on behalf of Angels of Mercy by Great Grandparent Employee H. The agreement failed to evidence the administrator signed the service agreement.</p> <p>6. A service agreement titled "Entity Therapy Services Agreement" dated 12/1/2020, indicated the home health agency contracted Home Health Entity I to provide "skilled nursing services and other therapeutic services" to the agency's patients as requested by the agency. The agreement was signed on behalf of Angels of Mercy by Great Grandparent Employee H. The agreement failed to evidence the administrator signed the service agreement.</p> <p>7. A service agreement titled "Staffing Services Agreement," dated 12/1/13, indicated the home health agency had contracted Staffing Entity J to provide contracted employees as requested by the home health agency. The agreement stated it was between Staffing Entity J and Great Grandparent Owner Entity A, and was signed by Great Grandparent Employee L. The home health agency failed to evidence an agreement directly between the agency and Staffing Entity J, and failed to evidence the agreement was signed by the administrator of the agency.</p> <p>8. A service agreement titled "Agreement for Temporary Allied Services," dated 1/15/08, indicated the home health agency had contracted Staffing Entity K to provide contracted employees as requested by the home health agency. The agreement stated it was between Staffing Entity J and Great Grandparent Owner Entity A, and was signed by Great Grandparent Employee L. The home health agency failed to evidence an agreement directly between the agency and</p>	{G 978}			

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{G 978}	<p>Continued From page 14</p> <p>Staffing Entity J, and failed to evidence the agreement was signed by the administrator of the agency.</p> <p>9. The agency's Governing Body minutes were reviewed on 3/19/21. The Governing Body minutes failed to evidence the Governing Body had discussed or approved the service agreements with Home Health Entity G, Home Health Entity I, Staffing Entity J, or Staffing Entity K.</p> <p>10. An interview was conducted on 3/22/21 at 12:45 PM with the Administrator/Clinical Manager and Clinical Director/RN #1. During the interview, the Administrator/Clinical Manager indicated the Governing Body had not approved the contracts with Home Health Entity G or Home Health Entity I. The Administrator also indicated the Governing Body had "discussed the need to update" all service agreements, but had not implemented a plan to review and/or update the contracts.</p> <p>17-12-2(d)</p>	{G 978}			