

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15K009	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  04/27/2012
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NAME OF PROVIDER OR SUPPLIER  HOME CARE WITH A HEART INC	STREET ADDRESS, CITY, STATE, ZIP CODE 104 GRANBY DR STE D CUMBERLAND, IN 46229
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(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
G0000	<p>This visit was for a home health federal recertification survey. This visit resulted in a partial extended survey.</p> <p>Survey dates: April 25 - 27, 2012</p> <p>Facility #: IN002640</p> <p>Medicaid Vendor #: 200305630</p> <p>Surveyor: Ingrid Miller, PHNS, RN</p> <p>Skilled unduplicated census: 16 skilled patients</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN May 2, 2012</p>	G0000		

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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G0121	<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 home visit observation, interview, and policy review, the agency failed to ensure 1 of 5 clinical staff (Employee B) observed at 1 of 5 home visits followed infection control agency policy with the potential to affect all the agency's patients.</p> <p>Findings</p> <ol style="list-style-type: none"> <li>1. At a home visit on 4/27/12 at 10 AM, Employee B, licensed practical nurse, was observed to perform a wound vac dressing change with patient #5. Employee B used an opened bottle of normal saline, with no open date on the opened bottle, to cleanse the wound. The bottle's expiration date was 4/18/12.</li> <li>2. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</li> <li>3. On 4/28/12 at 12 noon, Employee A, the director of nursing, indicated the normal saline used should have been</li> </ol>	G0121	<p>G 0121 The Agency will comply with accepted professional standards and principals to professionals furnishing services in a HHA. The Director of Nursing will be responsible to educate staff to the standard as to continue to meet requirements in the future. Monitoring actions will include to check expiration dates of saline prior to use, and include this step in plan of care. The Director of nursing will be responsible to ensure the deficiency does not recur. 1.)In reponse to findings the agency has reviewed policies with Employee B regarding normal saline and expiration dates as recommended. 2.) The agency policy for normal saline will be reviewed with all nurses who utilize solutions for patient care. 3.) Employee A will be responsible to educate nurses regarding agency policies for normal saline.</p>	04/28/2012			

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	discarded and a new bottle used.			

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G0159	<p>484.18(a) PLAN OF CARE</p> <p>The plan of care developed in consultation with the agency staff covers all pertinent diagnoses, including mental status, types of services and equipment required, frequency of visits, prognosis, rehabilitation potential, functional limitations, activities permitted, nutritional requirements, medications and treatments, any safety measures to protect against injury, instructions for timely discharge or referral, and any other appropriate items.</p> <p>Based on home visit observation, manufacturer procedures, clinical record review, policy review, and interview, the agency failed to ensure the plan of care specified the complete wound care procedure and the frequency of the dressing change for 1 of 3 skilled nursing visits observed at home visits (Clinical file 5).</p> <p>Findings</p> <p>1. Clinical record #5, start of care 2/1/06 with a certification period of 3/1/12 - 4/29/12, failed to evidence the skilled nurse had complete orders for the wound vac procedure as evidenced by the following:</p> <p>a. On 4/27/12 at 10 AM, Employee B, licensed practical nurse, was observed to complete a wound vac dressing change by first removing the old dressing,</p>	G0159	<p>G 0159 1.) The agency has obtained amended Doctor's orders and plan of care to include complete wound care including the procedure and the frequency of the dressing change. The Director of Nursing will be responsible to review plan of care in the future to meet this standard. In the future manufacturer guidelines will be included in doctor's orders. The agency will monitor doctor's orders with monthly chart audits to ensure the deficiency does not recur. a.) Employee B followed the manufacturer guidelines for wound vac dressing changes. Employee B and Employee A recieved an inservice from the wound vac representative on 4/13/2012. b.) Employee A obtained amended Doctor's orders to include manufacurer guidelines, agency policy and current orders from Doctor. This order also includes instructions to remove the old dressing, cleanse the wound, and to re-apply the</p>	04/27/2012			

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	<p>cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. After the dressing was applied, the tubing was connected with the wound vac machine. Pressure was applied continuously with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm for 20 minutes alternating.</p> <p>b. The initial order dated 4/6/12 signed by Employee A, director of nursing, stated, "Begin wound therapy next week: negative pressure 80 mm for 10 minutes and 40 mm for 20 minutes." There were no instructions for removing the old dressing or cleansing the wound and reapplying the new dressing except for the pressure readings noted above. This was signed by the physician on 4/11/12.</p> <p>c. Clinical documents titled "Skilled nursing visit note" completed on 4/13/12, 4/16/12, 4/18/12, and 4/20/12 and signed by Employee B evidenced wound vac dressing changes without the complete written procedure for the dressing change on the physician's order.</p>		<p>new dressing. c.) Employee B followed manufacturer guidelines, Doctor was contacted by agency and agreed that this is an acceptable procedure for wound care and did sign amended orders to include instructions listed in item b. for removal of old dressing cleansing wound and re-application of dressing and manufacturer guidelines.</p>	

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	<p>2. The manufacturer procedure titled "Wound Pro Dressing Set Instructions for Use" stated, "Before you begin, inspect the kit for completeness, verify the physician orders and read all instructions. ... [Steps 1 - 7 included debriding, cutting petroleum gauze, saturating gauze in normal saline, trimming the drain, applying more saturated gauze, laying drain made of stoma paste under the drain which is applied from wound and out, applying adherent dressing and turning on wound pro according to directions.] Step 8 Monitor the dressing to ensure the dressing maintains a vacuum ... the volume of exudate being removed is within the physician's expectation. Caution: if exudate volumes exceed physician's expectations notify physician."</p> <p>3. The agency policy titled "Negative Pressure Wound Therapy" stated, "To prevent contamination of the wound, to cleanse the wound, to observe the condition of the wound and surrounding tissue ... equipment ... Procedure 1. wash hands, 2. Gather equipment ... 9. put on sterile or clean gloves per physician's order 10. Cleanse periwound as ordered 11. Open kit provided ... Cut nonadherent petroleum gauze to the shape of the wound ... Saturate one of the antimicrobial gauze sponges with saline,</p>			
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	wring out excess and place in wound bed ... Apply skin prep ... Place transparent dressing over dressing and tubing."  4. On 4/27/12 at 12 noon, Employee A, Director of Nursing, indicated the skilled nurse did not have a plan of care which furnished a detailed wound vac procedure for the wound care treatment including frequency of wound care dressing change, removal of old dressing, cleansing of the wound, and materials for dressing the wound.				

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G0179	<p>484.30(b) DUTIES OF THE LICENSED PRACTICAL NURSE The licensed practical nurse furnishes services in accordance with agency policy.</p> <p>Based on home visit observation, clinical record review, policy review, and interview, the agency failed to ensure that 1 of 1 licensed practical nurse (Employee B) observed at 1 of 1 home visit(clinical record #5) with a licensed practical nurse furnished services in accordance with agency policy.</p> <p>Findings</p> <p>1. On 4/27/12 at 10 AM, Employee B, licensed practical nurse (LPN), was observed to complete a wound vac dressing change by first removing the old dressing, cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. Pressure applied is continuous with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm for 20 minutes alternating continuously. The normal saline bottle was not marked</p>	G0179	<p>G 179 1.) In response to findings: the agency has complete a review of policies regarding normal saline and wound care with nurses. The Director of Nursing will be responsible to monitor corrective actions and ensure education is provided to nurses to meet this standard in the future. The agency will include corrective actions of checking expiration dates on Normal Saline prior to use on plan of care to ensure this deficiency does not recur. 2.) Employee A contacted Doctor's office to request and recieved amended orders for complete wound care including removal of old dressing to cleanse wound, and to re-apply new dressing.3.) The ameded orders requested and recieved from the Doctor were acceptable to amend to the date of the initial wound care per Doctor.4.) The nurses responsible for the care of this patient and wound recieved an inservice from the manufacturer for proper wound care for this "wound pro dressing set" also known as a wound vac.5.) The agency policy includes instructions as listed from the manufacturer for the wound vac therapy as well as Doctors orders and home care setting.6.) The agency policy was</p>	04/27/2012	

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	<p>with an open date and had an expiration date of 4/18/12. This is the saline which was used for the cleansing of the wound.</p> <p>2. The initial order dated 4/6/12 signed by Employee A, director of nursing, stated, "Begin wound therapy next week: negative pressure 80 mm for 10 minutes and 40 mm for 20 minutes." There were no instructions for removing the old dressing or cleansing the wound and reapplying the new dressing except for the pressure readings noted above. This was signed by the physician on 4/11/12.</p> <p>3. Clinical documents titled "Skilled nursing visit note" completed on 4/13/12, 4/16/12, 4/18/12, and 4/20/12 and signed by Employee B evidenced wound vac dressing changes had been completed.</p> <p>4. The manufacturer procedure titled "Wound Pro Dressing Set Instructions for Use" stated, "Before you begin, inspect the kit for completeness, verify the physician orders and read all instructions. ... [Steps 1 - 7 included debriding, cutting petroleum gauze, saturating gauze in normal saline, trimming the drain, applying more saturated gauze, laying drain made of stoma paste under the drain which is applied from wound and out, applying adherent dressing and turning on wound pro according to directions.] Step</p>		<p>reviewed again with nursing staff responsible for the use of normal saline solution. and the importance of discarding expired items. 7.) Employee A is responsible to provide education to nursing staff in the future regarding normal saline for patient care. to date the bottle when it is opened and to discard the bottle a week after it is opened and to educate family or patient that this is the current policy and it must be followed by nursing staff.8.) To ensure physicians orders are complete a check list has been created that requires the writer to check both the agency's written procedure and the manufacturers recommendations against the order to ensure that the orders are complete and covers all steps to be done.</p>				

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	<p>8 Monitor the dressing to ensure the dressing maintains a vacuum ... the volume of exudate being removed is within the physician's expectation. Caution: if exudate volumes exceed physician's expectations notify physician."</p> <p>5. The agency policy titled "Negative Pressure Wound Therapy" stated, "To prevent contamination of the wound, to cleanse the wound, to observe the condition of the wound and surrounding tissue ... equipment ... Procedure 1. wash hands, 2. Gather equipment ... 9. put on sterile or clean gloves per physician's order 10. Cleanse periwound as ordered 11. Open kit provided ... Cut nonadherent petroleum gauze to the shape of the wound ... Saturate one of the antimicrobial gauze sponges with saline, wring out excess and place in wound bed ... Apply skin prep ... Place transparent dressing over dressing and tubing."</p> <p>6. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</p> <p>7. On 4/27/12 at 12 noon Employee A, Director of Nursing, indicated the LPN lacked complete procedural orders for the wound care and used normal saline which</p>			

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	was beyond its expiration date and had been opened without an open date on the bottle.				

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G0182	<p>484.30(b) DUTIES OF THE LICENSED PRACTICAL NURSE The licensed practical nurse prepares equipment and materials for treatments, observing aseptic technique as required.</p> <p>Based on home visit observation, policy review, and interview, the agency failed to ensure that 1 of 1 licensed practical nurse (Employee B) observed at 1 of 1 home visit(clinical record #5) with a licensed practical nurse used normal saline that was dated and not expired.</p> <p>Findings</p> <p>1. On 4/27/12 at 10 AM, Employee B, licensed practical nurse (LPN), was observed to complete a wound vac dressing change by first removing the old dressing, cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. Pressure applied is continuous with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm for 20 minutes alternating 24 hours a day. The normal saline bottle was not marked with an open date and had an expiration</p>	G0182	<p>G 0182 In response to findings; the agency will assist patients to provide adequate normal saline for patient care, in order to provide aseptic technique. The agency will monitor saline supply prior to procedures as included in the plan of care to check for expiration date on saline. Nurses will receive education not to utilize products which are past the recommended expiration dates. the nurse supervisor will be responsible to ensure the deficiency does not recur. 1.) Education provided to employee B regarding policy for normal saline to be discarded after one week and a new bottle available and to be opened for patient care. 2.) Education provided regarding current policy for normal saline provided to nurses and to discard after one week after opening. 3.) The agency will assist patients to provide adequate normal saline required for care within policy. Example: Phone calls to pharmacy to explain that nurses are required to follow policy.</p>	04/30/2012			

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	<p>date of 4/18/12. This is the saline which was used for the cleansing of the wound.</p> <p>2. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</p> <p>3. On 4/28/12 at 12 noon, Employee A, the director of nursing, indicated the normal saline used should have been discarded and a new bottle used by the LPN.</p>			

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G0225	<p>484.36(c)(2) ASSIGNMENT &amp; 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 clinical record and policy review, observation, and interview, the agency failed to ensure home health aides did not administer medications for 1 of 2 home health aides observed at a home visit (Clinical record #3).</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>On 4/26/12 at 2:50 PM at a home visit observation, Employee M, home health aide (HHA), was observed to administer artificial tears to patient #3's eyes.</li> <li>On 4/27/12 at 12:30 PM, Employee A, the administrator and director of nursing, indicated Employee M did administer eye drops to Patient #3, and this activity was outside the HHA's scope of practice.</li> <li>The agency policy titled "Home Health Aide" with a revision date of 6/2006 stated, "Allowable activities: Assist with medications."</li> <li>Clinical record #3, start of care 11/29/10, evidenced a clinical document titled "Home Care Aide Assignment</li> </ol>	G0225	<p>G 0225 The agency will provide education regarding the scope of practice for home health aides with the ongoing inservice materials to ensure this deficiency does not recur. Monitoring actions will include adding this educational topic to the annual requirements for inservices for home health aides. The Director of Nursing will be responsible to ensure this deficiency does not recur. 1.) In response to findings on 4/26/12 Employee M has been given a verbal warning and education provided regarding the scope of practice for home health aides and medications; may only remind patients to take medications.2.) Employee A gave employee M education and review to maintain a safe scope of practice within the patient # 3 home. 3.) The agency policy "Home Heath Aide" will be updated by the nursing supervisor to include : Remind patients to take medications only, do not hand patient's medications or give patient's medications.4.) A review of the care plan was provided to the the home health aides regarding medication assistance is to only include remind patient to take</p>	05/15/2012			

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	Sheet" reviewed / revised by Employee A, director of nursing on 3/22/12. This document stated, "Assignment ... Assist with medications ... Remind pt [patient] to take meds [medications] only. Do not hand pt. meds or give meds."		medications. do not hand the patient medications and do not administer any type of medications. common over the counter medications reviewed with home health aides to help remind them the scope of this practice. nurse supervisor will be responsible that this standard is met in the future.5.) The agency will monitor to ensure aides are not administering medication by adding to the HHA supervisory visit note, which is completed by the supervising nurse, a check off in which the nurse states she has reviewed this policy with the HHA being supervised and that they are in compliance.		

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N0462	<p>410 IAC 17-12-1(h) Home health agency administration/management 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, policy review, and interview, the agency failed to ensure all employees had a physical exam within 180 days prior to first patient contact that identified the employee was free from communicable disease for 2 of 13 files (Files B and H ) reviewed that required a physical exam with the potential to affect all the agency's patients.</p> <p>Findings</p> <p>1. Personnel file B, licensed practical nurse, date of hire 3/7/11 and first patient contact 3/9/11, failed to evidence a physical exam was completed within 180 days prior to first patient contact.</p> <p>2. Personnel file H, home health aide, date of hire 1/18/11 and first patient contact 1/18/11, failed to evidence a physical exam was completed within 180</p>	N0462	<p>N 0462 Corrective action will include the agency will update physical and t.b. policies to include that the physical must state the employee is free from communicable diseases. The agency will include check off boxes on the new policy and if the physical does not meet the requirements then it will be unacceptable to ensure this deficiency does not recur. The Director of Nursing will be responsible to monitor the corrective action. 1.) In response to findings for Personnel file B this employee has a physical on file. this physical does not state free from communicable disease. This employee has contacted the Doctor where the physical was performed to request and recieved amended physical retroactive to the date of physical which states free from communicable disease in order to meet this rule. 2.) Personnel file H has not actively been in patient contact since date of hire,</p>	05/01/2012			

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	<p>days prior to first patient contact.</p> <p>3. On 4/27/12 at 2 PM, Employee B indicated Personnel files B and H lacked complete physical examinations.</p> <p>4. The agency policy titled "Achieving Recipient Outcomes" with an effective date of 4/1/03 stated, "f. Health screening - As required by state law, each employee is required to provide a health screen proving the employee is free from communicable disease prior to working with A.R.O. [achieving recipient outcomes] clients. The applicant can typically obtain this test from the local health department or their family physician."</p>		<p>however this employee has been sent a letter requesting to obtain an updated physical which states she is free from communicable disease prior to any future patient contact. 3.) Physical examinations will be scanned more thoroughly for complete information by updating employee orientation checklist. check-off boxes will be utilized to make this importance stand out for all employees to visualize. 4.) The Agency policy for physical as required will be updated to include the physical must be completed within 180 days prior to first patient contact and it must identify the employee is free from communicable disease. The nurse supervisor will be responsible to ensure this is complete for future employees and current employees.</p>	

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N0470	<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 home visit observation, interview, and policy review, the agency failed to ensure 1 of 5 clinical staff (Employee B) observed at 1 of 5 home visits followed infection control agency policy with the potential to affect all the agency's patients.</p> <p>Findings</p> <p>1. At a home visit on 4/27/12 at 10 AM, Employee B, licensed practical nurse, was observed to perform a wound vac dressing change with patient #5. Employee B used an opened bottle of normal saline, with no open date on the opened bottle, to cleanse the wound. The bottle's expiration date was 4/18/12.</p> <p>2. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</p> <p>3. On 4/28/12 at 12 noon, Employee A,</p>	N0470	<p>N 0470 In response to findings regarding the control of communicable disease corrective action to ensure this deficiency does not recur will include the nurse staff will recieve education regarding company policy regarding normal saline and acetic acid and dakins' and the importance of discarding solutions after one week opening the solutions. Monitoring actions will include to check expiration dates of saline prior to procedures within the plan of care. The Director of Nursing will be responsible to make sure this is complete in the future and to monitor corrective actions.</p> <p>1.)Employee B has recieved education regarding agency policy and to discard saline after one week of opening the bottle. Employee B verbalized understanding. 2.) Agency policy will remain in effect in order to assist in the control of communicable disease. 3.) The Director of Nursing will be responsible to make sure the expiration dates are checked upon supervisory visits in the future to correct this finding.</p>	04/30/2012

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	the director of nursing, indicated the normal saline used should have been discarded and a new bottle used.			

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N0524	<p>410 IAC 17-13-1(a)(1) Patient Care Rule 13 Sec. 1(a)(1) As follows, the medical plan of care shall:</p> <p>(A) Be developed in consultation with the home health agency staff. (B) Include all services to be provided if a skilled service is being provided. (B) Cover all pertinent diagnoses. (C) Include the following:</p> <p>(i) Mental status. (ii) Types of services and equipment required. (iii) Frequency and duration of visits. (iv) Prognosis. (v) Rehabilitation potential. (vi) Functional limitations. (vii) Activities permitted. (viii) Nutritional requirements. (ix) Medications and treatments. (x) Any safety measures to protect against injury. (xi) Instructions for timely discharge or referral. (xii) Therapy modalities specifying length of treatment. (xiii) Any other appropriate items.</p> <p>Based on home visit observation, manufacturer procedures, clinical record review, policy review, and interview, the agency failed to ensure the plan of care specified the complete wound care procedure and the frequency of the dressing change for 1 of 3 skilled nursing visits observed at home visits (Clinical file 5).</p> <p>Findings</p>	N0524	<p>N 0524 In response to findings the agency will include corrective actions of including manufacturer guidelines within the plan of care. Monitoring actions to include care plan and doctor orders review with monthly chart audits. The Director of Nursing will be responsible to ensure this plan of correction remains in effect for future patients who may require wound care to monitor corrective actions and to ensure this deficiency does not recur. 1.) The agency requested and</p>	04/30/2012			

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	<p>1. Clinical record #5, start of care 2/1/06 with a certification period of 3/1/12 - 4/29/12, failed to evidence the skilled nurse had complete orders for the wound vac procedure as evidenced by the following:</p> <p>a. On 4/27/12 at 10 AM, Employee B, licensed practical nurse, was observed to complete a wound vac dressing change by first removing the old dressing, cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. After the dressing was applied, the tubing was connected with the wound vac machine. Pressure was applied continuously with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm for 20 minutes alternating.</p> <p>b. The initial order dated 4/6/12 signed by Employee A, director of nursing, stated, "Begin wound therapy next week: negative pressure 80 mm for 10 minutes and 40 mm for 20 minutes." There were no instructions for removing the old dressing or cleansing the wound and reapplying the new dressing except</p>		<p>recieved amended Doctor's orders to complete the steps for wound care specific to the wound vac. a.) Employee B utilized the manufacturer recomendations as observed within our nurse inservice. this was provided 4/13/2012. b.) Employee A requested and recieved updated Doctor's orders to include a complete written procedure, as recomended by the manufacturer. This order was requested and recieved to date from 4/11/2012. this order includes steps to remove the old dressing, cleanse the wound, and re-apply a new dressing. c.) The manufacturer procedures have been included in agency procedures and retroactive Doctor's orders to provide complete wound care specific for wound vac or "Wound Pro Dressing Set" 2.) The manufacturer recomendations have been included in the agency policy for wound care regarding wound vac patients. 3.) The manufacturer recomendations have been included in the agency policy for wound care regarding wound vac patients. 4.) Employee A amended patient plan of care according to Doctor's orders to include the frequency of the wound care and steps to remove old dressing, cleanse the wound, and materials to be utilized for new dressing.</p>		

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	<p>for the pressure readings noted above. This was signed by the physician on 4/11/12.</p> <p>c. Clinical documents titled "Skilled nursing visit note" completed on 4/13/12, 4/16/12, 4/18/12, and 4/20/12 and signed by Employee B evidenced wound vac dressing changes without the complete written procedure for the dressing change on the physician's order.</p> <p>2. The manufacturer procedure titled "Wound Pro Dressing Set Instructions for Use" stated, "Before you begin, inspect the kit for completeness, verify the physician orders and read all instructions. ... [Steps 1 - 7 included debriding, cutting petroleum gauze, saturating gauze in normal saline, trimming the drain, applying more saturated gauze, laying drain made of stoma paste under the drain which is applied from wound and out, applying adherent dressing and turning on wound pro according to directions.] Step 8 Monitor the dressing to ensure the dressing maintains a vacuum ... the volume of exudate being removed is within the physician's expectation. Caution: if exudate volumes exceed physician's expectations notify physician."</p> <p>3. The agency policy titled "Negative Pressure Wound Therapy" stated, "To</p>				

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	<p>prevent contamination of the wound, to cleanse the wound, to observe the condition of the wound and surrounding tissue ... equipment ... Procedure 1. wash hands, 2. Gather equipment ... 9. put on sterile or clean gloves per physician's order 10. Cleanse periwound as ordered 11. Open kit provided ... Cut nonadherent petroleum gauze to the shape of the wound ... Saturate one of the antimicrobial gauze sponges with saline, wring out excess and place in wound bed ... Apply skin prep ... Place transparent dressing over dressing and tubing."</p> <p>4. On 4/27/12 at 12 noon, Employee A, Director of Nursing, indicated the skilled nurse did not have a plan of care which furnished a detailed wound vac procedure for the wound care treatment including frequency of wound care dressing change, removal of old dressing, cleansing of the wound, and materials for dressing the wound.</p>				

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N0553	<p>410 IAC 17-14-1(a)(2)(A) Scope of Services Rule 14 Sec. 1(a) (2) For purposes of practice in the home health setting, the licensed practical nurse shall do the following: (A) Provide services in accordance with agency policies.</p> <p>Based on home visit observation, clinical record review, policy review, and interview, the agency failed to ensure that 1 of 1 licensed practical nurse (Employee B) observed at 1 of 1 home visit(clinical record #5) with a licensed practical nurse furnished services in accordance with agency policy.</p> <p>Findings</p> <p>1. On 4/27/12 at 10 AM, Employee B, licensed practical nurse (LPN), was observed to complete a wound vac dressing change by first removing the old dressing, cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. Pressure applied is continuous with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm</p>	N0553	<p>N 0553 In response to findings the agency has included corrective actions to include providing education to nurses regarding policies specific to wound vac dressing changes the policy will include manufacturer guidelines. Monitoring corrective actions will be included in monthly chart audits. The Director of Nursing will be responsible to make sure this policy is followed in the future to patients who require wound care as to ensure this deficiency does not recur. 1.) Employee B has been educated regarding saline policy and procedure and to discard saline after 1 week of opening, as well as to mark the opened date on the container. 2.) Employee A has requested and recieved retroactive to 4/11/2012 amended Doctor's orders to include instructions for removing the old dressing, cleansing the wound, and re-applying the new dressing. 3.) Employee B followed manufacturer guidelines included in the amended Doctor's orders. Employee B recieved education pertaining to wound care and Doctor's orders. 4.) The agency has included manufacturer procedure as</p>	04/30/2012			

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	<p>for 20 minutes alternating continuously. The normal saline bottle was not marked with an open date and had an expiration date of 4/18/12. This is the saline which was used for the cleansing of the wound.</p> <p>2. The initial order dated 4/6/12 signed by Employee A, director of nursing, stated, "Begin wound therapy next week: negative pressure 80 mm for 10 minutes and 40 mm for 20 minutes." There were no instructions for removing the old dressing or cleansing the wound and reapplying the new dressing except for the pressure readings noted above. This was signed by the physician on 4/11/12.</p> <p>3. Clinical documents titled "Skilled nursing visit note" completed on 4/13/12, 4/16/12, 4/18/12, and 4/20/12 and signed by Employee B evidenced wound vac dressing changes had been completed.</p> <p>4. The manufacturer procedure titled "Wound Pro Dressing Set Instructions for Use" stated, "Before you begin, inspect the kit for completeness, verify the physician orders and read all instructions. ... [Steps 1 - 7 included debriding, cutting petroleum gauze, saturating gauze in normal saline, trimming the drain, applying more saturated gauze, laying drain made of stoma paste under the drain which is applied from wound and out,</p>		<p>allowed for nurses to perform within scope of practice in the agency procedure for wound care. 5.) The agency has included manufacturer procedure as allowable for nurses to perform within scope of practice in the agency procedure for wound care. 6.) The agency will maintain the current policy and amend as necessary to improve contamination risks. 7.) Employee A has provided education to nursing staff regarding policy for normal saline and expiration dates as well as marking an open date.</p>		

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	<p>applying adherent dressing and turning on wound pro according to directions.] Step 8 Monitor the dressing to ensure the dressing maintains a vacuum ... the volume of exudate being removed is within the physician's expectation. Caution: if exudate volumes exceed physician's expectations notify physician."</p> <p>5. The agency policy titled "Negative Pressure Wound Therapy" stated, "To prevent contamination of the wound, to cleanse the wound, to observe the condition of the wound and surrounding tissue ... equipment ... Procedure 1. wash hands, 2. Gather equipment ... 9. put on sterile or clean gloves per physician's order 10. Cleanse periwound as ordered 11. Open kit provided ... Cut nonadherent petroleum gauze to the shape of the wound ... Saturate one of the antimicrobial gauze sponges with saline, wring out excess and place in wound bed ... Apply skin prep ... Place transparent dressing over dressing and tubing."</p> <p>6. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</p> <p>7. On 4/27/12 at 12 noon Employee A, Director of Nursing, indicated the LPN</p>			

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	lacked complete procedural orders for the wound care and used normal saline which was beyond its expiration date and had been opened without an open date on the bottle.			

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N0556	<p>410 IAC 17-14-1(a)(2)(D) Scope of Services Rule 14 Sec. 1(a) (2)(D) For purposes of practice in the home health setting, the licensed practical nurse shall do the following: (D) Prepare equipment and materials for treatments observing aseptic technique as required.</p> <p>Based on home visit observation, policy review, and interview, the agency failed to ensure that 1 of 1 licensed practical nurse (Employee B) observed at 1 of 1 home visit(clinical record #5) with a licensed practical nurse used normal saline that was dated and not expired.</p> <p>Findings</p> <p>1. On 4/27/12 at 10 AM, Employee B, licensed practical nurse (LPN), was observed to complete a wound vac dressing change by first removing the old dressing, cleansing wound and periwound area with normal saline, applying petroleum gauze to wound bed, placing gauze dressing soaked with normal saline over petroleum gauze, cutting drain tube to fit into wound and placing the tube over gauze, covering with normal saline soaked gauze, and covering with transparent dressing. Pressure applied is continuous with negative pressure 80 mm [millimeter] for 10 minutes and 40 mm [millimeter] for 20 minutes alternating 24 hours a day. The normal saline bottle was not marked</p>	N0556	<p>N 0556 In response to findings the agency will include corrective actions of a plan of care to include checing expiration dates of saline prior to use. The agency will monitor plan of care with monthly chart audits to ensure this deficiency does not recur. Director of Nursing will be responsible to ensure education is provided to nurses in regard to aseptic technique and to monitor corrective actions. 1.) Employee B has been educated regarding aseptic technique in the home care setting and utilizing normal saline within the expiration date. 2.) The agency will continue to inforce current policy the agency will assist patients to obtain fresh saline as required (example call pharmacy) 3.) Employee A has recieved and has given educational material to nurses to maintain current policy regarding saline and expiration dates.</p>	04/30/2012	

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NAME OF PROVIDER OR SUPPLIER  HOME CARE WITH A HEART INC			STREET ADDRESS, CITY, STATE, ZIP CODE 104 GRANBY DR STE D CUMBERLAND, IN 46229		
(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	
	<p>with an open date and had an expiration date of 4/18/12. This is the saline which was used for the cleansing of the wound.</p> <p>2. The agency policy titled "Solution for Irrigation: Sterile Normal Saline, Dakins' and Acetic Acid" stated, "Discard irrigation solutions within 1 week after they are opened."</p> <p>3. On 4/28/12 at 12 noon, Employee A, the director of nursing, indicated the normal saline used should have been discarded and a new bottle used by the LPN.</p>				