

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	X3) DATE SURVEY COMPLETED 09/06/2012
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NAME OF PROVIDER OR SUPPLIER KORT - REHAB AT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3602 NORTHGATE COURT SUITE 15 NEW ALBANY, IN 47150
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N0000	<p>This visit was for an initial home health state licensure survey.</p> <p>Survey dates: September 4, 5, and 6, 2012</p> <p>Facility# 012927</p> <p>Surveyor: Dawn Snider, RN, PHNS</p> <p>Census Service Type:</p> <p>Skilled: 5 Home Health Aide Only: 0 Personal Service Only: 0</p> <p>Total: 5</p> <p>Sample RRw/HV 1 RRw/o HV 4 Total 5</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN September 7, 2012</p>	N0000		

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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N0518	<p>410 IAC 17-12-3(e) Patient Rights Rule 12 Sec. 3(e) (e) The home health agency must inform and distribute written information to the patient, in advance, concerning its policies on advance directives, including a description of applicable state law. The home health agency may furnish advanced directives information to a patient at the time of the first home visit, as long as the information is furnished before care is provided.</p> <p>Based on clinical record review, policy review, document review, observation, and interview, the agency failed to ensure the patient was informed of the Indiana Advance Directives for 5 of 5 records reviewed (#1-5) with the potential to affect all the patients of the agency.</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Clinical record #1, start of care (SOC) 8/17/12, failed to indicate receipt of the Indiana Advance Directives. 2. Clinical record #2, SOC 8/17/12, failed to indicate receipt of the Indiana Advance Directives. 3. Clinical record #3, SOC 8/2/12, failed to indicate receipt of the Indiana Advance Directives. 	N0518	<p>N 518 The Executive Director has inserviced all therapy and nursing staff that the home health agency must inform and distribute written information to the patient, in advance, concerning its policies on advance directives, including a descripton of the applicable state law. A copy of the Indiana State Department of Health Advance Diretives - Your Right to Decide brochure was added to the patient handbook and included in admission packets for all patients going forward. A copy of the Indiana State Department of Health Advance Directives - Your Right to Decide brochure was mailed to the four (4) patients who were discharged from the agency. A copy of the Indiana State Department of Health Advance Directives - Your Right to Decide brochure was explained and given to the one current patient on service, on 9-6-12 during the visit. Policy 3.005.1, Advance Directives will be revised to include "the agency must</p>	09/07/2012			

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	<p>4. Clinical record #4, SOC 7/12/12, failed to indicate receipt of the Indiana Advance Directives.</p> <p>5. Clinical record #5, SOC 7/19/12, failed to indicate receipt of the Indiana Advance Directives.</p> <p>6. The undated patient handbook, given to the patient at the time of admission and prior to services, did not contain the Indiana Advance Directives.</p> <p>7. On 9/5/2012 at 10:30 AM, the Executive Director indicated all patients had not received the Indiana Advance Directives.</p> <p>8. On 9/6/12 at 9:00 AM, during the home visit, the Executive Director was observed to place the Indiana Advance Directive in the admission folder of patient #1.</p> <p>9. The undated policy titled "Subject: Advance Directives 3.005.1" states, "Prior to initiating care or services the agency shall provide written and oral information to competent adult patients or their legal representatives describing a person's rights under the prevailing state law to make decisions about their medical care; ... and the agency's policy in regards to implementing such rights under law."</p>		<p>inform and distribute written information to the patient in advance, concerning advance directives, including a description of applicable state law. The Executive Director of Home Health services will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.</p>				

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