

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 157050	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 11/19/2012
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NAME OF PROVIDER OR SUPPLIER KOSCIUSKO HOME CARE & HOSPICE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1515 PROVIDENT DR STE 250 WARSAW, IN 46580
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G0000	<p>This was a home health Federal recertification survey. This was a Partial Extended survey.</p> <p>Survey dates: November 14, 15, 16, and 19, 2012</p> <p>Partial Extended date: November 16, 2012</p> <p>Facility Number: IN005268</p> <p>Medicaid Number: 100279790A</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Census Services Type: Skilled: 259 Home Health Aide Only: 26 Personal Service Only: 10 Total 295</p> <p>Sample: RR w/HV: 6 RRw/o HV: 6 Total: 12</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: center;">November 21, 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. Based on home visit observation, interview, and policy review, the agency failed to ensure staff followed infection control policies and procedures for 3 of 6 home visits. (#3, 5 and 6)</p> <p>Findings include:</p> <p>1. During home visit observation on 11/15/12 at 1:30 PM with patient #3, employee A was observed to obtain vital signs, including temperature and blood pressure, using manual cuff and stethoscope and pulse oximetry. Employee A did not clean the equipment before placing it back into the supply bag.</p> <p>2. During home visit observation on 11/16/12 at 9:00 AM with patient #5, employee J was observed obtaining vital signs including manual blood pressure. Two manual blood pressure cuffs were used, a small cuff did not register so a regular cuff was used. Employee J did not clean the blood pressure cuffs or stethoscope after use. Pulse oximetry was taken after patient walked around the home. The employee did not clean pulse</p>	G0121	G121 Policies and procedures shall be written and implemented for the control of communicable disease in compliance with applicable federal and state laws. 1. Clinical Director and Quality Coordinator reviewed and revised policies and procedures for Bag Technique and Equipment Cleaning; completed 11/28/12.2. Clinical Director and Quality Coordinator will provide inservice training for field staff 12/3/12 through 12/12/12.3. Each field staff member will complete a return demonstration of Bag Technique by 12/19/12.4. Continue practice for every new hire to receive training regarding Infection Control policies and procedures.5. Continue practice for annual Infection Control inservice/training for field staff.6. Clinical Director or designee will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.	12/19/2012			

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	<p>oximeter after use.</p> <p>2. During home visit observation on 11/16/12 at 10:15 AM with patient #6, employee E was observed obtaining vital signs including pulse oximetry and blood pressure using a wrist cuff monitor. Employee E did not clean the blood pressure cuff and pulse oximeter before placing them back into the bag.</p> <p>3. During an interview on 11/16/12 at 11:15 AM, employee E indicated they clean the equipment a little each day.</p> <p>4. During interview on 11/16/12 at 12:45 PM, employee B indicated any equipment used on patients should be cleaned after patient use and when visibly dirty.</p> <p>5. The agency's policy titled "Federally Approved Disinfectants," reviewed 05-11, states, "Stethoscope: Routinely clean the bell/diaphragm of the stethoscope with a rotary motion, using an antiseptic wipe each visit."</p> <p>6. The agency's policy titled "Bag Technique, reviewed 03/07, states "10. After providing care, clean equipment as appropriate. Return unused clean supplies to the bag after care is given. 11. Contaminated equipment or equipment that cannot be cleaned in the patient's</p>			

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	<p>home may be transported for disinfection to the home health agency in an impermeable sealed plastic bag placed on the floor or trunk of the car."</p> <p>7. The National Association for Home Care and Hospice magazine titled "Caring," published an article dated March, 2009 titled "Cleaning and Disinfection of Patient Care Equipment Used in the Home Setting," which states "Non-critical patient care items may include a blood pressure cuff, laptop computer keyboard, stethoscope, nursing bag taken into the home, pulse oximeter, etc. ... Patient care equipment should be cleaned as soon as practical after use in the home."</p>				

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N0000	<p>This was a home health State licensure survey.</p> <p>Survey dates: November 14, 15, 16, and 19, 2012</p> <p>Facility Number: IN005268</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Census Services Type: Skilled: 259 Home Health Aide Only: 26 Personal Service Only: 10 Total 295</p> <p>Sample: RR w/HV: 6 RRw/o HV: 6 Total: 12</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN November 21, 2012</p>	N0000			

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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 employee file review, interview, and policy review, the agency failed to ensure all employee files contained required information for 1 of 9 files reviewed. (G)</p> <p>Findings include:</p> <ol style="list-style-type: none"> Employee G's file (date of hire 11/11/03) failed to evidence a physical examination. The file contained a letter dated 4/11/11 indicating the file had been reviewed and noted to have the physical missing. The agency contacted MedStat to obtain a copy at that time, but MedStat was unable to produce one. The Administrator was notified of the missing form. A note dated September 9, 2004, was in the file for employee G that indicated a former Human Resources (HR) employee shredded some documents during an 	N0462	N 0462 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; completed 11/28/12.3. Clinical Director will arrange for any employee who does not have a physical examination done within the required time frame to receive a physical examination by 12/19/12.4. Clinical Director and Quality Coordinator revised orientation checklist to include a line item for date of first direct patient contact; completed 11/26/12.5. New hire personnel files will be audited for presence	12/19/2012	

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	<p>episode of irrational behavior.</p> <p>3. During interview on 11/19/12 at 1:00 PM, employee B indicated employee G did not recall going to MedStat for the physical, but there was a physician prescription copy indicating the employee was free of communicable disease and the episode of irrational behavior by the former HR employee in 2004 may have been the cause of the missing physical.</p> <p>4. The agency's policy titled "Employment/Hiring," reviewed 1/18/12 states, "3. Health Screening: a. Health Screening is required by all employees."</p>		<p>of physical examination before employee is scheduled for direct patient contact.6. Clinical Director or designee will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.</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 staff followed infection control policies and procedures for 3 of 6 home visits. (#3, 5 and 6)</p> <p>Findings include:</p> <p>1. During home visit observation on 11/15/12 at 1:30 PM with patient #3, employee A was observed to obtain vital signs, including temperature and blood pressure, using manual cuff and stethoscope and pulse oximetry. Employee A did not clean the equipment before placing it back into the supply bag.</p> <p>2. During home visit observation on 11/16/12 at 9:00 AM with patient #5, employee J was observed obtaining vital signs including manual blood pressure. Two manual blood pressure cuffs were used, a small cuff did not register so a regular cuff was used. Employee J did not clean the blood pressure cuffs or stethoscope after use. Pulse oximetry was taken after patient walked around the</p>	N0470	<p>N 0470 Policies and procedures shall be written and implemented for the control of communicable disease in compliance with applicable federal and state laws. 1. Clinical Director and Quality Coordinator reviewed and revised policies and procedures for Bag Technique and Equipment Cleaning; completed 11/28/12.2. Clinical Director and Quality Coordinator will provide inservice training for field staff 12/3/12 through 12/12/12.3. Each field staff member will complete a return demonstration of Bag Technique by 12/19/12.4. Continue practice for every new hire to receive training regarding Infection Control policies and procedures.5. Continue practice for annual Infection Control inservice/training for field staff.6. Clinical Director or Designee will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.</p>	12/19/2012			

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	<p>home. The employee did not clean pulse oximeter after use.</p> <p>2. During home visit observation on 11/16/12 at 10:15 AM with patient #6, employee E was observed obtaining vital signs including pulse oximetry and blood pressure using a wrist cuff monitor. Employee E did not clean the blood pressure cuff and pulse oximeter before placing them back into the bag.</p> <p>3. During an interview on 11/16/12 at 11:15 AM, employee E indicated they clean the equipment a little each day.</p> <p>4. During interview on 11/16/12 at 12:45 PM, employee B indicated any equipment used on patients should be cleaned after patient use and when visibly dirty.</p> <p>5. The agency's policy titled "Federally Approved Disinfectants," reviewed 05-11, states, "Stethoscope: Routinely clean the bell/diaphragm of the stethoscope with a rotary motion, using an antiseptic wipe each visit."</p> <p>6. The agency's policy titled "Bag Technique, reviewed 03/07, states "10. After providing care, clean equipment as appropriate. Return unused clean supplies to the bag after care is given. 11. Contaminated equipment or equipment</p>			

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	<p>that cannot be cleaned in the patient's home may be transported for disinfection to the home health agency in an impermeable sealed plastic bag placed on the floor or trunk of the car."</p> <p>7. The National Association for Home Care and Hospice magazine titled "Caring," published an article dated March, 2009 titled "Cleaning and Disinfection of Patient Care Equipment Used in the Home Setting," which states "Non-critical patient care items may include a blood pressure cuff, laptop computer keyboard, stethoscope, nursing bag taken into the home, pulse oximeter, etc. ... Patient care equipment should be cleaned as soon as practical after use in the home."</p>			