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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151532 | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | X3) DATE SURVEY COMPLETED 07/26/2012 |
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| NAME OF PROVIDER OR SUPPLIER ST ANTHONY HOSPICE | STREET ADDRESS, CITY, STATE, ZIP CODE 203 FRANCISCAN DR CROWN POINT, IN 46307 |
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| L0000 | <p>This visit was for a hospice federal recertification and state relicensure survey.</p> <p>Survey date: 7/23/12 - 7/26/12</p> <p>Facility #: 008300</p> <p>Medicaid vendor: 200141550</p> <p>Surveyor: Ingrid Miller RN, PHNS</p> <p>Census: 405 skilled unduplicated admissions</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: right;">July 30, 2012</p> | L0000 | | |

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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| L0501 | <p>418.52 PATIENTS' RIGHTS The patient has the right to be informed of his or her rights, and the hospice must protect and promote the exercise of these rights.</p> <p>Based on home visit observation, clinical record review, policy review, and interview, the hospice failed to protect and promote the patient's right to dignity and the registered nurse protected the patient's right to personal privacy for 1 of 4 home visits (patient #3) observed with a skilled nurse (Employee G).</p> <p>Findings</p> <p>1. On 7/15/12 at 2 PM, Employee G, Registered Nurse, was observed to enter Patient #3's room in a skilled nursing facility. The nurse entered the room and briefly greeted the patient before washing his / her hands. After handwashing and donning gloves, the nurse assessed the patient's vitals signs and discussed the patient's pain issues briefly. At no time during this visit did the nurse shut the door for privacy despite the nurse asking questions about the patient's health status with the patient's door open and staff, visitors, and patients present in the hall outside the patient's room.</p> | L0501 | <p>L 501</p> <p>Executive Director, Patient Care Coordinator and QI/Education Coordinator will develop staff educational program to discuss Patient's Rights and Responsibilities with a focus on Dignity and Privacy. All staff will attend by August 20, 2012. Patient's Rights and Responsibilities will continue to be included in Orientation and Annual Education. Compliance with Patient's Rights and Responsibilities will be reviewed/observed during ongoing supervised visit.</p> <p>Associate counseling will be conducted with Associate G by August 6, 2012, to review Patient's Rights and Responsibilities, and documentation placed in personnel file by Patient Care Coordinator.</p> <p>Executive Director will revise Patient Rights and Responsibilities that is distributed to patients and caregivers to include all appropriate information regarding Dignity and Privacy, by August 17, 2012</p> | 08/20/2012 | |

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| | <p>a. On 7/24/12 at 3:10 PM, Employee B, Patient Care Coordinator, indicated Employee G did not protect the patient's right to dignity and personal privacy during the visit observation.</p> <p>b. The clinical record document titled "St. Anthony Hospice Signature verification for Hospice services" with the name of Patient #3 with the date of 6/25/12 stated, "Patient Rights and Responsibilities ... I have received a verbal explanation and written copy of St. Anthony Hospice ... Patient rights and responsibilities including Universal Precaution rights and payment responsibilities." The patient's power of attorney signed this document on 6/25/12.</p> <p>c. The agency document titled "Patient Bill of Rights and Responsibilities" in the "Franciscan Community Services, Inc. St. Anthony Hospice Patient / Family Handbook" stated, "St. Anthony Hospice recognizes that you have the following rights as our patient: The right to be treated with respect ... the right to privacy and confidentiality." This document was signed for in the signature verification document listed above.</p> <p>2. The agency policy titled "Patient Bill of Rights / Disclosure statement" with an</p> | | | |

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| | effective date of 11/94 and revised dates of 7/99 and 11/08 stated, "Hospice staff members will inform patient and family of their rights and responsibilities in the health care process." | | | |

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| L0512 | <p>418.52(c)(1) RIGHTS OF THE PATIENT The patient has a right to the following: (1) Receive effective pain management and symptom control from the hospice for conditions related to the terminal illness;</p> <p>Based on document and policy and clinical record review and interview, the hospice failed to ensure the patient was informed of the right to receive effective pain management for 13 of 13 records reviewed (#1-13).</p> <p>The findings include</p> <ol style="list-style-type: none"> 1. The document titled "Patient / Family Handbook" has a section titled "Patient Bill of Rights and Responsibilities" on pages 5 - 7. The document fails to evidence the patient was informed of the right to receive effective pain management and symptom control from the hospice for conditions related to the terminal illness. 2. Clinical records # 1 - 13 evidenced the patient had received the patient rights document. 3. On 7/23/12 at 4 PM, the patient care coordinator indicated the patient rights document failed to evidenced the patient was informed of the right to receive effective pain management and symptom control. | L0512 | <p>L 512</p> <p>Executive Director, Patient Care Coordinator and QI/Education Coordinator will develop staff educational program to discuss Patient's Rights and Responsibilities with a focus on Pain Management and Symptom Control. All staff will attend by August 20, 2012. Patient's Rights and Responsibilities will continue to be included in Orientation and Annual Education. Compliance with Patient's Rights and Responsibilities will be reviewed/observed during ongoing supervised visit.</p> <p>Executive Director will revise Patient Rights and Responsibilities that is distributed to patients and caregivers to include all appropriate information regarding Pain Management and Symptom Control, by August 17, 2012</p> | 08/20/2012 | |

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| | 4. The agency policy titled "Patient Bill of Rights / Disclosure statement" with an effective date of 11/94 and revised dates of 7/99 and 11/08 stated, "Hospice staff members will inform patient and family of their rights and responsibilities in the health care process." | | | | |

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| L0513 | <p>418.52(c)(2) RIGHTS OF THE PATIENT [The patient has a right to the following:] (2) Be involved in developing his or her hospice plan of care;</p> <p>Based on document and policy and clinical record review and interview, the hospice failed to ensure the patient was informed of the right to be involved in developing his or her hospice plan of care for 13 of 13 records reviewed (#1-13).</p> <p>The findings include</p> <ol style="list-style-type: none"> 1. The document titled "Patient / Family Handbook" has a section titled "Patient Bill of Rights and Responsibilities" on pages 5 - 7. The document fails to evidence the patient was informed of the right to be involved in developing his or her hospice plan of care. 2. Clinical records # 1 - 13 evidenced the patient had received the patient rights document. 3. On 7/23/12 at 4 PM, the patient care coordinator indicated the rights document failed to evidence the patient was informed of the right to be involved in developing his or her hospice plan of care. 4. The agency policy titled "Patient Bill of Rights / Disclosure statement" with an | L0513 | <p>L 513</p> <p>Executive Director, Patient Care Coordinator and QI/Education Coordinator will develop staff educational program to discuss Patient's Rights and Responsibilities with a focus on Patient's Right to be involved in the development of his/her hospice Plan of Care. All staff will attend by August 20, 2012. Patient's Rights and Responsibilities will continue to be included in Orientation and Annual Education.</p> <p>Executive Director will revise Patient Rights and Responsibilities that is distributed to patients and caregivers to include all appropriate information regarding Patient's Right to be involved in the development of his/her hospice Plan of Care, by August 17, 2012</p> | 08/20/2012 | | | |

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| | effective date of 11/94 and revised dates of 7/99 and 11/08 stated, "Hospice staff members will inform patient and family of their rights and responsibilities in the health care process." | | | |

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| L0514 | <p>418.52(c)(3) RIGHTS OF THE PATIENT [The patient has a right to the following:] (3) Refuse care or treatment;</p> <p>Based on document and policy and clinical record review and interview, the agency failed to ensure the patient was informed of the right to refuse care or treatment for 13 of 13 records reviewed (#1-13).</p> <p>The findings include</p> <ol style="list-style-type: none"> 1. The document titled "Patient / Family Handbook" has a section titled "Patient Bill of Rights and Responsibilities" on pages 5 - 7. The document fails to evidence the patient was informed of the right to refuse care or treatment. 2. Clinical records # 1 - 13 evidenced the patient had received the patient rights document. 3. On 7/23/12 at 4 PM, the patient care coordinator indicated the rights document failed to inform the patient of the right to refuse care or treatment. 4. The agency policy titled "Patient Bill of Rights / Disclosure statement" with an effective date of 11/94 and revised dates of 7/99 and 11/08 stated, "Hospice staff | L0514 | <p>L 514</p> <p>Executive Director, Patient Care Coordinator and QI/Education Coordinator will develop staff educational program to discuss Patient's Rights and Responsibilities with a focus on Patient's Right to refuse care or treatment. All staff will attend by August 20, 2012. Patient's Rights and Responsibilities will continue to be included in Orientation and Annual Education.</p> <p>Executive Director will revise Patient Rights and Responsibilities that is distributed to patients and caregivers to include all appropriate information regarding Patient's Right to refuse care or treatment, by August 17, 2012</p> | 08/20/2012 | |

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| | members will inform patient and family of their rights and responsibilities in the health care process." | | | | |

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| L0515 | <p>418.52(c)(4) RIGHTS OF THE PATIENT [The patient has a right to the following:] (4) Choose his or her attending physician;</p> <p>Based on document and policy and clinical record review and interview, the hospice failed to ensure the patient was informed of the right to choose his or her own attending physician for 13 of 13 records reviewed (#1-13).</p> <p>The findings include</p> <ol style="list-style-type: none"> 1. The document titled "Patient / Family Handbook" has a section titled "Patient Bill of Rights and Responsibilities" on pages 5 - 7. The document failed to evidence the patient was informed of the right to choose his or her attending physician. 2. Clinical records # 1 - 13 evidenced the patient had received the patient rights document. 3. On 7/23/12 at 4 PM, the patient care coordinator indicated the rights document failed to inform the patient of the right to choose his or her attending physician. 4. The agency policy titled "Patient Bill of Rights / Disclosure statement" with an effective date of 11/94 and revised dates of 7/99 and 11/08 stated, "Hospice staff | L0515 | L 515 Executive Director, Patient Care Coordinator and QI/Education Coordinator will develop staff educational program to discuss Patient's Rights and Responsibilities with a focus on Patient's Right to choose his/her attending physician. All staff will attend by August 20, 2012. Patient's Rights and Responsibilities will continue to be included in Orientation and Annual Education. Executive Director will revise Patient Rights and Responsibilities that is distributed to patients and caregivers to include all appropriate information regarding Patient's Right to choose his/her attending physician, by August 17, 2012 | 08/20/2012 | |

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| | members will inform patient and family of their rights and responsibilities in the health care process." | | | |

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| L0543 | <p>418.56(b) PLAN OF CARE All hospice care and services furnished to patients and their families must follow an individualized written plan of care established by the hospice interdisciplinary group in collaboration with the attending physician (if any), the patient or representative, and the primary caregiver in accordance with the patient's needs if any of them so desire.</p> <p>Based on home visit observation, interview, clinical record review, and policy review, the hospice failed to ensure the individualized written care plan was followed for 1 of 2 home visit observations (Patient #3) with a skilled nurse (Employee G) with the potential to affect all of the patients of the hospice.</p> <p>Findings</p> <p>1. The hospice policy titled "Staff Registered Nurse" with an effective date of 10/02/2000 stated, "Utilizes the nursing process to provide skilled care for a specific group of patients according to a written physician plan of care ... Specific task / duties: Implements the plan of care with actions that provide for patient / family participation in decision making, and to determine the need for special care."</p> <p>2. The hospice policy titled "Review of Plan of Treatment" with an effective date of 11/94 and reviewed date of 3/05 and</p> | L0543 | <p>L 543</p> <p>Patient Care Coordinator and QI/Education Coordinator will develop educational program to review the Standards of Nursing Practice in relation to a Comprehensive Assessment and development of a collaborative Plan of Care; Patient and Interdisciplinary Group. Education of all nurses will be completed by August 20, 2012.</p> <p>Ongoing evaluation of nursing will be the responsibility of Patient Care Coordinator and QI/Education Coordinator during Supervised field visits. Any concerns will be addressed as they are identified.</p> <p>Associate counseling will be conducted with Associate G by August 6, 2012, to review the Standards of Nursing Practice in relation to a Comprehensive Assessment according to Interdisciplinary Group established Plan of Care, and documentation placed in personnel file by Patient Care</p> | 08/20/2012 | | | |

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| | <p>11/08 stated, "Program staff reassesses the patient periodically during the course of care. A reassessment is the ongoing evaluation of the patient's condition and serves to 1. facilitate continuous data collection in order to make changes to the plan of care 2. reevaluate the need for continued services prior to recertification 3. evaluate and revise the plan of care when there is an unexpected change ... The reassessment of the patient and family is appropriate to the care services being provided and may include ... the patient's pain and other symptoms ... Each discipline assesses the patient according to practice standards and provides care as appropriate at every visit."</p> <p>3. Clinical record #3 included an established plan of care (POC) dated 6/25/12 that stated, "Skilled nursing: 1 -3 X wk [week] for 60 days and PRN [as needed] for status change and exacerbation of symptoms. Monitor health status, bowel status, hydration and nutrition, respiratory status, skin integrity, pain and symptom management and teach patient and family self care and safety measures."</p> <p>a. On 7/24/12 at 1 PM, Employee G was observed to visit Patient #3 in a skilled nursing facility for a skilled nursing visit. Employee G failed to</p> | | Coordinator. | | | | |

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| | <p>assess the pain characteristics and skin integrity with a head to toe assessment. Patient #3 complained of pain in the knee and in the chest and the nurse failed to ask any questions about the pain level or pain characteristics at this assessment as ordered by the POC.</p> <p>b. On 7/24/12 at 3:10 PM, the patient care coordinator indicated the skin integrity of the patient and the pain of the patient were not thoroughly assessed as specified on the POC.</p> | | | |

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| L0591 | <p>418.64(b)(1) NURSING SERVICES</p> <p>(1) The hospice must provide nursing care and services by or under the supervision of a registered nurse. Nursing services must ensure that the nursing needs of the patient are met as identified in the patient's initial assessment, comprehensive assessment, and updated assessments.</p> <p>Based on home visit observation, interview, clinical record review, and policy review, the hospice failed to ensure Employee G met the nursing needs of 1 of 2 home visit patients (Patient #3) with a skilled nurse with a potential to affect all of the patients of the hospice.</p> <p>Findings</p> <p>1. The hospice policy titled "Staff Registered Nurse" with an effective date of 10/02/2000 stated, "Utilizes the nursing process to provide skilled care for a specific group of patients according to a written physician plan of care ... Specific task / duties: Implements the plan of care with actions that provide for patient / family participation in decision making, and to determine the need for special care."</p> <p>2. The hospice policy titled "Review of Plan of Treatment" with an effective date of 11/94 and reviewed date of 3/05 and 11/08 stated, "Program staff reassesses</p> | L0591 | <p>L 591</p> <p>Patient Care Coordinator and QI/Education Coordinator will develop educational program to review the Standards of Nursing Practice in relation to a Comprehensive Assessment and Pain Management that is re-evaluated on an ongoing basis. Education of all nurses will be completed by August 20, 2012.</p> <p>Ongoing evaluation of nursing will be the responsibility of Patient Care Coordinator and QI/Education Coordinator during Supervised field visits. Any concerns will be addressed as they are identified.</p> <p>Associate counseling will be conducted with Associate G by August 6, 2012, to review the Standards of Nursing Practice in relation to a Comprehensive Assessment, and documentation placed in personnel file by Patient Care Coordinator.</p> | 08/20/2012 | |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151532 | | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | | X3) DATE SURVEY COMPLETED 07/26/2012 | |
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| | <p>the patient periodically during the course of care. A reassessment is the ongoing evaluation of the patient's condition and serves to 1. facilitate continuous data collection in order to make changes to the plan of care 2. reevaluate the need for continued services prior to recertification 3. evaluate and revise the plan of care when there is an unexpected change ... The reassessment of the patient and family is appropriate to the care services being provided and may include ... the patient's pain and other symptoms ... Each discipline assesses the patient according to practice standards and provides care as appropriate at every visit."</p> <p>3. Clinical record #3 included an established plan of care (POC) dated 6/25/12 that stated, "Skilled nursing: 1 -3 X wk [week] for 60 days and PRN [as needed] for status change and exacerbation of symptoms. Monitor health status, bowel status, hydration and nutrition, respiratory status, skin integrity, pain and symptom management and teach patient and family self care and safety measures."</p> <p>a. On 7/24/12 at 1 PM, Employee G was observed to visit Patient #3 in a skilled nursing facility for a skilled nursing visit. Employee G failed to assess the pain characteristics and skin</p> | | | | | | |

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| | <p>integrity with a head to toe assessment.</p> <p>Patient #3 complained of pain in the knee and in the chest and the nurse failed to ask any questions about the pain level or pain characteristics at this assessment as ordered by the POC.</p> <p>b. On 7/24/12 at 3:10 PM, the patient care coordinator indicated the skin integrity of the patient and the pain of the patient were not thoroughly assessed as specified on the POC.</p> | | | |