

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151598	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 03/11/2013
NAME OF PROVIDER OR SUPPLIER NIGHTINGALE HOSPICE			STREET ADDRESS, CITY, STATE, ZIP CODE 4011 W JEFFERSON BLVD STE 175 FORT WAYNE, IN 46804		
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L000000	<p>This was a Hospice federal recertification and state licensure survey.</p> <p>Survey dates: March 7, 8, and 11, 2013</p> <p>Facility number: 007361</p> <p>Medicaid number: 200977100A</p> <p>Census: Total: 30</p> <p>Sample: RR w/HV: 3 RR w/o HV: 8 Total: 11</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN March 13, 2013</p>	L000000			

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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L000550	<p>418.56(c)(5) CONTENT OF PLAN OF CARE [The plan of care must include all services necessary for the palliation and management of the terminal illness and related conditions, including the following:] (5) Medical supplies and appliances necessary to meet the needs of the patient. Based on clinical record review, home visit observation, policy review, and interview, the hospice failed to ensure all equipment necessary for patient care was listed on the Plan of Treatment (POT) for 3 of 3 home visit observations with the potential to affect all the hospice's patients. (# 4, 7, and 11)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. During home visit observation with patient #4 on 3/8/13 at 3:15 PM, durable medical equipment (DME) seen in home included oxygen concentrator, air mattress, shower chair, and suction machine. The POT failed to list these DME. 2. During home visit observation with patient #7 on 3/8/13 at 1:00 PM, DME seen in home included hospital bed and air mattress. The POT failed to list these DME. 3. During home visit observation with patient #11 on 3/8/13 at 10:30 AM, DME 	L000550	L0550 The Executive Director has inserviced nursing staff that the content of the plan of care must include medical supplies and appliances necessary to meet the needs of the patient. Policy and Procedure for Plan of Care Development and Review completed in inservice. Nurses have updated all active plan of cares to include all supplies and appliances currently deemed necessary to meet the needs of the patient. 100% of all active clinical records will be audited quarterly for evidence that content of plan of care includes all supplies and appliances deemed necessary to meet the needs of the patient. The Director of Patient Care Services will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.	03/12/2013	

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	<p>seen in home included oxygen concentrator, rolling walker, hospital bed, bed side commode, and wheel chair. The POT failed to list these DME.</p> <p>4. During interview on 3/11/13 at 1:10 PM, employee B indicated the nurse is to list the DME in section 14 of the POT. Employee B indicated the nurse lists the DME if it is already in the home at start of care but, if it needs to be ordered, the DME is listed on paper form but not in the computer.</p> <p>5. The hospice's undated policy titled "Plan of Care" Standard 905A states, "The plan of care will include all services necessary for the palliation and management of the terminal illness and related conditions, including the following: ... 5. Medical supplies and appliances necessary to meet the needs of the patient."</p>			

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L000578	<p>418.60 INFECTION CONTROL</p> <p>The hospice must maintain and document an effective infection control program that protects patients, families, visitors, and hospice personnel by preventing and controlling infections and communicable diseases.</p> <p>Based on policy review, interview, and observation, the hospice failed to ensure employees followed infection control policies and procedures for 1 of 3 home visit observations with the potential to affect all the hospice's patients. (#4)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. During home visit observation with patient #4 on 3/8/13 at 3:15 PM, employee C, a Home Health Aide (HHA), was observed providing a bed bath for the patient. The HHA failed to wash hands or use hand sanitizer prior to donning clean gloves after they washed and dried the patient's perineal area. Employee C indicated they did not have any hand sanitizer with them. Employee C failed to don clean gloves after washing the patient's buttocks and removing bowel movement and proceeded to touch patient, blankets and clean clothes with the same gloves. 2. During interview on 3/11/13 at 9:15 AM, employee B indicated the HHA must 	L000578	L0578 The Director of Patient Care Services has inserviced staff on infection control program and review of all infection control policies and procedures. 100% of all clinical staff providing hands on care to patients will receive quarterly supervisory visits performed by the Director of Patient Care Services evaluating and monitoring staff compliance with infection control program policies and procedures. The Director of Patient care services will be responsible for monitoring these corrective actions to ensure that this deficiency is corrected and will not recur.	03/14/2013	

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	<p>have been nervous and the hospice does provide hand sanitizer and all employees have been inserviced on infection control policies.</p> <p>3. The hospice's policy titled "Hand Hygiene" Standard 701A states, "Agency employees are to wash their hands: After contact with body fluids or excretions, mucous membranes, nonintact skin, and wound dressings and hands are not visibly soiled. ... After removing gloves (sterile or non-sterile) ... The agency provides all employees participating in patient care, treatment and/or services with an alcohol-based hand-rub product and on-sterile gloves, at no charge to the employee ... Change gloves when moving from a contaminated body site to a clean body site on the same patient."</p>			

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L000665	<p>418.102 MEDICAL DIRECTOR</p> <p>The hospice must designate a physician to serve as medical director. The medical director must be a doctor of medicine or osteopathy who is an employee, or is under contract with, the hospice. When the medical director is not available, a physician designated by the hospice assumes the same responsibilities and obligations as the medical director.</p> <p>Based on contract review, job description review, and interview, the Medical Director failed to designate an alternate physician to assume duties when needed for 1 of 1 Medical Director with the potential to affect all the hospice's patients. (employee A)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. The Medical Director contract dated 12/8/08 and signed by the Medical Director on 4/1/09 failed to designate an alternate physician to perform the duties of the medical director when necessary. 2. During interview on 3/7/13 at 9:50 AM, employee B indicated they do not see an alternate mentioned in the contract with the Medical Director. Employee B indicated the contract with the Carmel hospice office states the Fort Wayne office will use the Carmel office Medical Director if needed. 	L000665	L0665 The Executive Director has executed a signed contract naming an Associate/Alternate Medical Director to be available when Medical Director is not available. The Executive Director will be responsible for semi-annual audit of Associate/Alternate Medical Director Contract to ensure that contract remains current and that this deficiency is corrected and will not recur.	03/14/2013			

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	3. The hospice's job description titled "Medical Director" states, "Responsibilities: ... Designate a physician alternate to perform the duties of the medical director in his/her stead when necessary."			