

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  151577	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  07/03/2014
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NAME OF PROVIDER OR SUPPLIER  GUARDIAN ANGEL HOSPICE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 513 W LINCOLN RD KOKOMO, IN 46902
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L000000	<p>This was a Hospice Federal recertification and State relicensure survey.</p> <p>Survey Dates: July 1-3, 2014</p> <p>Facility Number: IN003385</p> <p>Medicaid Number: 200406660</p> <p>Surveyor: Tonya Tucker, RN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN July 7, 2014</p>	L000000		
L000531	<p>418.54(c)(7) CONTENT OF COMPREHENSIVE ASSESSMENT [The comprehensive assessment must take into consideration the following factors:] (7) Bereavement. An initial bereavement assessment of the needs of the patient's family and other individuals focusing on the social, spiritual, and cultural factors that may impact their ability to cope with the patient's death. Information gathered from the initial bereavement assessment must be incorporated into the plan of care and considered in the bereavement plan of care. Based on clinical record review, policy</p>	L000531	GAH Standard: Bereavement assessment must be completed	07/24/2014

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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	<p>review, and interview, the hospice failed to ensure an initial bereavement assessment of the needs of the patient's family and other individuals was included in the comprehensive assessment in 2 of 10 active patient records reviewed. (#4 and #10)</p> <p>Findings include:</p> <p>1. Clinical record #4, election date and start of care 5/12/14, contained a document dated 5/12/14 titled "Team Care Plan as of 05-12-2014" that stated, "VS [volunteer services] 05-12-2014 1 x [time] week x 13 weeks SN [skilled nursing] 7 PRN [as needed]: Change in condition 05-18-2014 1 x week x 12 weeks 05-12-2014 2 x week x 1 week MSS [medical social services] 05-12-2014 3 PRN: Change in situation 05-12-2014 2 x month x 4 months ... SC [spiritual counseling] 05-12-2014 3 PRN: change in need 05-12-2014 2 x month x 4 months ... ." The record failed to evidence an initial bereavement assessment of the needs of the patient's family was conducted.</p> <p>On 7/3/14 at 12:15 PM, employee U (registered nurse) indicated being unable to locate an initial bereavement assessment in this patient's clinical record.</p>		<p>with the initial assessment by the admission nurse. Correction: Assure every patient has initial bereavement assessment. Prevention: Admission nurses are doing initial bereavement assessment in the admission visit. Bereavement assessment findings will be included in the clinical note of admission Nurse. Incorporate in plan of care: P161 Grieving anticipatory. If Social workers are completing admission paperwork with the family then said social worker must complete initial bereavement. Responsible: Patient Care Coordinator (PCC) responsible. PCC have admission checklist that will now include completion of initial bereavement assessment. In-Service: Educated admission nurses about doing bereavement assessment at every admission. Completed 7-10-14 Educating Social Workers on doing bereavement assessment at initial visit 7-22-14. Educating Lafayette/Frankfort nurses on doing bereavement assessment at every admission on 7-17-14. Educating Kokomo/Logansport nurses on doing bereavement assessment at every admission on 7-24-14.</p>		

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	<p>2. Clinical record #10, election date and start of care 6/26/14, contained a document dated 6/26/14 titled "Team Care Plan as of 06-26-2014" that stated, "SN 06-26-2014 8 PRN: Change in condition 06-26-2014 2 x week x 1 week 06-29-2014 1 x week x 8 weeks MSS 06-26-2014 3 PRN: Change in situation 07-01-2014 2 x month x 2 months 06-26-2014 1 x month x 1 month ... SC 06-26-2014 3 PRN: change in need 07-01-2014 2 x month x 2 months 06-26-2014 1 x month x 1 month ... ." The record failed to evidence an initial bereavement assessment of the needs of the patient's family was conducted.</p> <p>On 7/3/14 at 11:47 AM, employee U indicated there was no initial bereavement assessment conducted for this patient.</p> <p>3. The undated hospice policy titled "Assessment - Comprehensive Assessment of the Patient" states, "Policy Statement: The hospice IDT [interdisciplinary group] conducts and documents a patient' specific comprehensive assessment that identifies the patient's need for hospice care, including medical, nursing, psychosocial, emotional and spiritual care. Procedures: ... 3. The RN [registered nurse] case</p>			
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L000598	<p>manager coordinates the comprehensive assessment process and ensures that the patient's physical, emotional, psychosocial, spiritual and bereavement needs are assessed ... ."</p> <p>418.64(d)(3) COUNSELING SERVICES (3) Spiritual counseling The hospice must:</p> <p>(i) Provide an assessment of the patient's and family's spiritual needs. (ii) Provide spiritual counseling to meet these needs in accordance with the patient's and family's acceptance of this service, and in a manner consistent with patient and family beliefs and desires. (iii) Make all reasonable efforts to facilitate visits by local clergy, pastoral counselors, or other individuals who can support the patient's spiritual needs to the best of its ability. (iv) Advise the patient and family of this service.</p> <p>Based on clinical record review, policy review, and interview, the hospice failed to ensure an assessment of the patient's and family's spiritual needs was conducted in 1 of 10 active patient records reviewed creating the potential to affect all new patients of the hospice. (#7)</p>	L000598	<p>Our Current Standard: Initial spiritual assessment to be completed within five days of admission. Correction: Root Cause identified as missed assessment due to staff absence. Plan of correction will address this issue. Prevention: Upon Admission, PCC will assign staff to new patient; and if staff is on vacation</p>	07/24/2014

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	<p>Findings include:</p> <p>1. Clinical record #7, election date and start of care 6/20/14, contained a document dated 6/20/14 titled "Team Care Plan as of 06-20-2014" stating, "SN [skilled nursing] 06-20-2014 8 PRN [as needed]: Change in condition ... 06-22-2014 1 x [time] week x 12 weeks 06-20-2014 1 x week x 1 week ... SC [spiritual counseling] 06-20-2014 3 PRN: change in need 07-01-2014 2 x month x 3 months 06-20-2014 1 x month x 1 month ... ." The record failed to evidence an initial spiritual assessment of the patient's and family's spiritual needs was conducted.</p> <p>2. On 7/3/14 at 12:34 PM, employee V (administrator) indicated the initial spiritual assessment was not conducted as of 7/3/14 because the chaplain was on vacation.</p> <p>3. The undated hospice policy titled "Spiritual Care Services" states, "Procedures: 1. Guardian Angel Hospice ensures there are an adequate number of qualified spiritual counselors available to met the needs of patients and their families and offers patients / caregivers spiritual care from the hospice's own spiritual counselors ... 4.</p>		<p>or sick the PCC will assign staff to cover during that period. The spiritual assessment is also an item in our QAPI chart audits and will be monitored by QAPI Committee.</p> <p>Admission Nurses will be doing spiritual assessment if these spiritual care services are refused at admission. Responsible: Patient Care Coordinator (PCC) responsible for ensuring spiritual assessment completed per GAH protocol. PCC have admission checklist that will now include completion of spiritual assessment. Hospice Item Set also requires documentation of Spiritual/ Existential Concerns Date: Immediate 7-10-14 In serviced: All admission nurses on 7-10-14; Review of Guardian Angel Hospice Spiritual Assessment to be completed with Interdisciplinary Team at IDT on July 17, 2014 and July 24, 2014 by PCC's. Training: Completed by Chris Gingerich RN PCC and April Wyant RN PCC</p>				

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	The comprehensive assessment of the patient includes a spiritual assessment conducted by the spiritual counselor to evaluate the patient / caregiver's spiritual needs and identify appropriate spiritual problems, interventions and goals for the patient's plan of care ... "				