

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151540	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 08/22/2013
NAME OF PROVIDER OR SUPPLIER AMERICARE HOSPICE			STREET ADDRESS, CITY, STATE, ZIP CODE 1150 N MAIN ST STE A FRANKLIN, IN 46131		
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L000000	<p>This was a hospice federal recertification and state relicensure survey.</p> <p>Survey dates: August 19-22, 2013</p> <p>Facility Number: 009124</p> <p>Medicaid Number: 200141560</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: center;">August 29, 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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L000502	<p>418.52(a)(1) NOTICE OF RIGHTS AND RESPONSIBILITIES (1) During the initial assessment visit in advance of furnishing care the hospice must provide the patient or representative with verbal (meaning spoken) and written notice of the patient's rights and responsibilities in a language and manner that the patient understands.</p> <p>Based on clinical record review, admission packet review, and interview, the hospice failed to ensure patients received written notice of the patients' rights and responsibilities for 1 of 1 admission packets reviewed and 3 of 3 home visit observations with the potential to affect all the hospice's patients. (#3, 4, and 5)</p> <p>Findings include</p> <p>1. On 8/20/13 the hospice admission packet was reviewed. This packet failed to contain the complete written patients' rights and responsibilities. The documents in the packet included a copy of the hospice's policy titled "Patient Rights and Responsibility Policy," numbered page IV-15 and the second page of the "Notice of Patient Rights and Responsibilities, cont.," numbered page IV-17.</p> <p>On 8/20/13 at 11:00 AM, employee O indicated volunteers put these packets</p>	L000502	<p>8/21/13The Director of Professional services inserved office staff andvolunteers putting admission packets together on all forms requiredby policy and procedure. All patients were contacted and providedwith written Patients Rights and Responsibility, explaining themiddle page may have been missing in the admission packet. 100% verbalized knowledge of their rights. 8/20/13Review of process for putting together admission packets wascompleted. 100% of current admission packets were reviewed for themiddle page of Patient Rights and Responsibilities 4 out of 10 werein need of correction and this was done.100%of the admission packets will be checked monthly for 6 months, then10% will be monitored quarterly. This will be added to the quarterlyaudits preformed by the QAPI nurse and reported to the QAPI committeequarterly until 100% compliance met or PIP goal met.Theadministrator will be responsible for monitoring results to keep thedeficiency from</p>	08/26/2013			

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	<p>together and the first page should actually be the first page of the patients' rights and responsibilities but it is missing and someone must have copied the policy page in its place, page number IV-16. Employee O indicated the rights are explained on admission. Employee O indicated four more packets were checked and have the same page missing.</p> <p>2. Clinical record #3, Start of Care (SOC) 4/4/13, contained a Multipurpose Consent and Acknowledgement Form signed by the patient on 4/4/13 that states "I acknowledge I have received a copy of the Patient Rights and Responsibilities. They have been reviewed with me and I understand them." During home visit with patient #3 on 8/20/13 at 11:20 AM, the admission packet in the home failed to contain the first page (number IV-16) of the Notice of Patient Rights and Responsibilities.</p> <p>3. Clinical record #4, SOC 3/12/12, contained a Multipurpose Consent and Acknowledgement Form signed by the patient on 3/12/12 that states "I acknowledge I have received a copy of the Patient Rights and Responsibilities. They have been reviewed with me and I understand them." During home visit with patient #4 on 8/20/13 at 12:00 PM, staff were unable to locate the admission</p>		recurring.				

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	<p>packet for review.</p> <p>4. Clinical record #5, SOC 6/27/13, contained a Multipurpose Consent and Acknowledgement Form signed by the patient on 6/27/13 that states "I acknowledge I have received a copy of the Patient Rights and Responsibilities. They have been reviewed with me and I understand them." During home visit with patient #3 on 8/20/13 at 1:45 PM, the admission packet in the home was reviewed and failed to contain the first page (number IV-16) of the Notice of Patient Rights and Responsibilities.</p> <p>5. The hospice's policy titled "Patient Rights and Responsibility Policy" revised July 2008 states, "Hospice provides each patient and family with verbal and written notice of Patient Rights and Responsibilities on admission in a language the patient or representative understands. The patient or representative shall acknowledge receipt in writing."</p>				

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L000579	<p>418.60(a) PREVENTION</p> <p>The hospice must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions. Based on observation, policy review, and interview, the hospice failed to ensure staff followed infection control practices while providing care for 2 of 3 home visit observations with the potential to affect all the hospice's patients. (#3 and 4)</p> <p>Findings include</p> <ol style="list-style-type: none"> 1. During home visit observation with patient #3 on 8/20/13 at 11:20 AM, employee N, a registered nurse, failed to clean stethoscope, blood pressure cuff, and pulse oximeter after use and prior to returning them to the nurse's supply bag. At the end of the visit, employee N removed the equipment, cleaned it, then returned it back into the same pockets it was stored in. 2. During home visit observation with patient #4 on 8/20/13 at 12:00 PM, employee G, a home health aide, was observed providing a shower to the patient. Employee G donned gloves prior to providing care including placing patient on toilet and removing dirty depends. Employee G failed to change this pair of gloves prior to providing the 	L000579	<p>8/21/13The Director of Professional Services inserved all nursing staff onInfection Control Practices including review of the followingpolicies: "Surveillance, Prevention, and Control of Infection"and "Engineering and Work Practice Controls". Specific areasincluded: Employees shall was their hands before and after patientcontact, Before having direct contact with patients....after contactwith patient's intact skin (i.e..when taking a pulse or bloodpressure or lifting a patient). If hands will be moving from acontaminated-body site to a clean-body site during patient care.Donning gloves-Changing gloves during patient care if the hands willmove from a contaminated body-site to a clean body-site. All staffshall follow Agency Procedures for proper care, cleaning, anddisinfection of environmental surfaces and equipment.TheDirector of Professional Services will make an unscheduled visit withcited employees within the next three months.InfectionControl Practice Policy and Procedures to be reviewed with new hireorientation and current direct-patient care staff quarterly for thenext 3</p>	08/26/2013	

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	<p>shower. Employee G used the same pair of gloves throughout the entire shower and through applying lotion and dressing the patient. Employee G removed gloves and washed hands, dried the patient's hair with hair dryer, then took patient to dining room for lunch. Employee G failed to wash hands after drying hair and prior to feeding patient.</p> <p>3. The agency's policy titled "Surveillance, Prevention, and Control of Infection" revised July 2008 states, "Engineering and Work Practice Controls Policy ... 2. Employees shall wash their hands before and after patient contact. ... Standard Precautions ... Standard Precautions include a group of infection prevention practices that apply to all patients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. A. Hand Hygiene ... Perform hand hygiene: Before having direct contact with patients. ... After contact with patient's intact skin (i.e.. when taking a pulse or blood pressure or lifting a patient). If hands will be moving from a contaminated-body site to a clean-body site during patient care. ...B1. Gloves ...Change gloves during patient care if the hands will move from a contaminated body-site to a clean body-site. ... C. Patient-care Equipment and Environment</p>		<p>quarters then annually. Review to include hand washing and proper equipment cleaning competency check-list Documentation will be kept in the Director of Professional Services office. The Director of Professional Services will be responsible for monitoring compliance to prevent the deficiency from recurring.</p>				

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	<p>... All staff shall follow Agency Procedures for proper care, cleaning, and disinfection of environmental surfaces and equipment."</p> <p>4. During interview on 8/20/13 at 3:05 PM, employee O indicated staff should clean equipment with alcohol before and after use with each patient and the bags should have designated areas for clean versus dirty.</p> <p>5. During interview on 8/20/13 at 3:25 PM, employee O indicated staff should be changing gloves after peri care, and gloves should be removed after a shower or bath and before applying lotion or dressing a patient.</p>			

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L000625	<p>418.76(g)(1) HOSPICE AIDE ASSIGNMENTS AND DUTIES</p> <p>(1) Hospice aides are assigned to a specific patient by a registered nurse that is a member of the interdisciplinary group. Written patient care instructions for a hospice aide must be prepared by a registered nurse who is responsible for the supervision of a hospice aide as specified under paragraph (h) of this section. Based on clinical record review, policy review, and interview, the hospice failed to ensure Home Health Aide (HHA) services were assigned as ordered on the plan of care for 7 of 7 patients receiving HHA services with the potential to affect all the hospice's patients who receive HHA services. (#3, 4, 5, 9, 10, 11, and 12)</p> <p>Findings include</p> <p>1. Clinical record #3, Start of Care (SOC) 4/4/13, contained a Hospice Certification and Plan of Care with orders for Aide 1 time a week for 1 week, then 2 times a week for 12 weeks to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Bed Bath, Partial Bath, or Shower and Safety Precautions. Other assigned tasks are all marked as needed (PRN)- Oral Care, Lotion Rub, Hair Care/Shampoo, Nail Care, Repositioning, Assist with Ambulation,</p>	L000625	8/21/13The Director of Professional Services inserved all nursing staff onthe "Plan of Care Policy". Specific areas included: "Theinterdisciplinary group, in collaboration with the patient'sattending physician, the patient or representative, and the primarycaregiver must establish an individualized written plan of care foreach patient." and review of the Hospice Aide Assignment Policy.8/22/13RN reviewed 100% of current patient charts home health aide plan ofcare and home health aide assignments for compliance of policy andprocedures.QAPInurse to do chart audit on 100% of admissions and recerts through the4th quarter of 2013 then 10% with quarterly audits. TheDirector of Professional Services will monitor results to keep thedeficiency from recurring. This will be added to chart auditspreformed quarterly by the QAPI committee and reported at thequarterly QAPI meetings.	08/26/2013	

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	<p>Assist with Transfers, and Household chores as needed.</p> <p>2. Clinical record #4, SOC 3/12/12, contained a Hospice Certification and Plan of Care dated 7/5-9/2/13 with orders for Aide 1 time a week for 1 week, then 5 times a week for 8 weeks, then 1 time a week for 1 week to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Bed Bath, Partial Bath, or Shower and Safety Precautions. Other assigned tasks are all marked PRN- Oral Care, Lotion Rub, Hair Care/Shampoo, Nail Care, Repositioning, Assist with Ambulation, Assist with Transfers, Assist with feeding and Household chores as needed.</p> <p>3. Clinical record #5, SOC 6/27/13, contained a Hospice Certification and Plan of Care dated 6/27-9/24/13 with orders for Aide 5 times a week for 4 weeks, then 3 times a week for 9 to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Bed Bath, Partial Bath, or Shower and Safety Precautions. Other assigned tasks are all marked PRN- Oral Care, Lotion Rub, Shave, Hair Care/Shampoo, Nail Care, Repositioning, Assist with Ambulation, Assist with Transfers, Meal Preparation</p>			

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	<p>as appropriate, Assist with feeding and Household chores as needed.</p> <p>4. Clinical record #9, SOC 1/25/12, contained a Hospice Certification and Plan of Care dated 7/5-9/2/13 with orders for Aide 2 times a week for 1 week, then 5 times a week for 8 weeks to provide bath as tolerated, personal care, ADL assistance, assist with transfers, encourage fluids each visit, report any changes in condition to RN. The Hospice Aide Assignment sheet states Safety Precautions. Other assigned tasks are all marked PRN- Bed bath or shower, Oral Care, Hair Care/Shampoo, Nail Care, Diapers, Repositioning, Assist with Ambulation, Assist with Transfers, Assist with feeding. Additional instructions include to encourage fluids every visit.</p> <p>5. Clinical record #10, SOC 4/30/13, contained a Hospice Certification and Plan of Care dated 7/29-10/26/13 with orders for Aide 3 times a week for 13 weeks to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Safety Precautions. Other assigned tasks are all marked PRN- Sponge bath or shower, Oral Care, Lotion Rub, Hair Care/Shampoo, Nail Care, Diapers, Repositioning, Assist with Ambulation, Assist with Transfers, Meal preparation as</p>				

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	<p>appropriate, and Household chores as needed.</p> <p>6. Clinical record #11, SOC 5/9/13, contained a Hospice Certification and Plan of Care dated 5/9-8/6/13 with orders for Aide 3 times a week for 12 weeks, then 1 time a week for 1 week to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Safety Precautions. Other assigned tasks are all marked PRN- Bed bath or shower, Oral Care, Lotion Rub, Shave, Hair Care/Shampoo, Nail Care, Bed pan, Diapers, Repositioning, Assist with Transfers, Assist with feeding, and Household chores as needed.</p> <p>7. Clinical record #12, SOC 3/2/13, contained a Hospice Certification and Plan of Care dated 3/2-5/30/13 with orders for Aide 2 times a week for 1 week, 3 times a week for 11 weeks, then 2 times a week for 1 week to assist with personal care and to report any changes in condition to RN. The Hospice Aide Assignment sheet states Safety Precautions. Other assigned tasks are all marked PRN- Bed bath or shower, Oral Care, Lotion Rub, Shave, Hair Care/Shampoo, Nail Care, Diapers, Assist with Ambulation, Assist with Transfers.</p>			

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	<p>8. During interview on 8/21/13 at 3:00 PM, employee O indicated the case managers complete the aide care plans and update them at the Interdisciplinary Team Meetings. PRN is marked so that the patients can refuse if they do not want the care or task ordered.</p> <p>9. The hospice's policy titled "Plan of Care Policy" revised July 2008 states, "The interdisciplinary group, in collaboration with the patient's attending physician, the patient or representative, and the primary caregiver must establish an individualized written plan of care for each patient."</p>			

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L000795	<p>418.114(d)(1) CRIMINAL BACKGROUND CHECKS The hospice must obtain a criminal background check on all hospice employees who have direct patient contact or access to patient records. Hospice contracts must require that all contracted entities obtain criminal background checks on contracted employees who have direct patient contact or access to patient records.</p> <p>Based on volunteer file review and job description, policy review, and interview, the hospice failed to obtain a criminal history check prior to providing patient care for 1 of 2 volunteer files reviewed with the potential to affect all the volunteers the hospice selects. (A)</p> <p>Findings include</p> <ol style="list-style-type: none"> 1. Volunteer file A, date of hire 8/2/11 and first patient contact date 9/14/11, failed to evidence the hospice performed a criminal background check until 12/2/11. 2. During interview on 8/19/13 at 3:45 PM, employee P indicated someone is checking and they think this 12/2/11 check was a repeat because the original may have been misplaced. 3. During interview on 8/21/13, employee S indicated the original criminal history check on this volunteer could not be located. 	L000795	<p>8/23/13The deficient practice found during survey had been corrected prior to survey. 12/12/11 volunteer employee file was noted to be missing criminal background check, another one was completed. 8/23/13 Completed audit of 100% of employees files. 100% of files were in compliance. New process in place for all new employee files to be audited by QAPI nurse when completed and 10% of employee files will be audited at least quarterly by QAPI nurse and report findings to QAPI committee at quarterly meeting. The administrator will monitor audit findings to keep deficiency from recurring.</p>	08/23/2013	

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	4. The hospice's policy titled "Personnel Records" revised July 2008 states, "Contents Personnel records shall contain at least the following: ... 8. Criminal history background check (those with direct patient contact or access to patient records).			