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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br>157568 | X2) MULTIPLE CONSTRUCTION<br>A. BUILDING 00<br>B. WING _____ | X3) DATE SURVEY COMPLETED<br>03/09/2021 |
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| NAME OF PROVIDER OR SUPPLIER<br><br>OMNI HOME CARE | STREET ADDRESS, CITY, STATE, ZIP COD<br>600 N WEINBACH AVE STE 610<br>EVANSVILLE, IN 47711 |
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| G 0000<br><br>Bldg. 00 | <p>This survey was for a Federal/State complaint revisit of a deemed home health agency.</p> <p>Survey Dates: March 8 &amp; 9 of 2021</p> <p>Partially Extended Survey Announced 3/8/21 at 3:30 p.m.</p> <p>During this revisit survey, one (1) condition of participation and six (6) federal deficiencies were found corrected and two (2) new standard level deficiencies were cited.</p> <p>OMNI Home Care continues to be precluded from conducting a home health aide training or competency evaluation program for a period of two years starting November 18, 2020 through November 17, 2022 for being out of compliance with Conditions of Participation 484.105 Organization and Administration of Services.</p> | G 0000        |  |                      |
| G 0710<br><br>Bldg. 00 | <p>484.75(b)(3)<br/>Provide services in the plan of care<br/>Providing services that are ordered by the physician as indicated in the plan of care;</p> <p>Based on record review and interview, the agency failed to perform wound care as indicated on the plan of care for 1 of 2 patients whose clinical record was reviewed for wounds (Patient 2).</p> <p>Finding include:</p> <p>An undated Registered Nurse job description was provided by the Administrator on 3/8/2021 at 3:12 p.m. The job description indicated, but was not</p>  | G 0710        | <p>On 3-15-2021 to 3-19-21 the Executive Director completed 100% medical record review on active wound care patients to ensure the agency performed wound care as indicated on the plan of care.</p> <p>On 3-11-2021 and 3-23-2021 the Executive Director conducted mandatory education with all staff</p> | 03/29/2021           |

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 other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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>limited to, "The Registered Nurse in Home Health provides and directs provisions of nursing care to patients in their homes as prescribed by the physician ... Provides clinical services within the scope of practice ... in accordance with the plan of care ... Implements ... the plan of care in collaboration with the physician..."</p> <p>A revised policy dated 2/1/2021, titled Wound Assessment, Documentation, and Photography was provided by the Alternate Administrator on 3/8/2021 at 12:05 p.m. The policy indicated documentation in the medical record was to include, but was not limited to, "Exact wound care performed, following physician orders."</p> <p>A copy of a revised form dated 6/1/2020, titled Competency Assessment/Peer Review RN for Registered Nurse B was obtained on 3/8/2021 at 2:42 p.m. The form indicated, but was not limited to, "Wound Care/Wound Assessment and Staging" as met, indicated by a checkmark in the "Met" column, using assessment method observation as indicated by a checkmark in the "O" column with initials and a date of 12/23/2020. The form contained the Alternate Administrator's and Registered Nurse B's signatures with a date of 12/23/2020 next to Registered Nurse B's signature.</p> <p>The complete clinical record for Patient 2 was reviewed on 3/8/2021, start of care date 7/28/2020, with a certification period of 1/24/2021 to 3/24/2021, with orders for the skilled nurse to perform wound care. Patient 2's diagnoses were Type 2 Diabetes Mellitus with Diabetic Polyneuropathy, and Type 2 Diabetes with Foot Ulcer.</p> <p>A 2/9/2021 physician order description indicated, but was not limited to, "Wound care order. Left</p> |               | <p>on providing services that are ordered by the physician as indicated in the plan of care, utilizing policy 2.1.007 Plan of Care, policy 2.2.001 Wound Assessment, Documentation, and Photography, and policy 2.1.008 Physician Orders.</p> <p>On 3-10-2021 &amp; 3-12-2021 the Executive Director conducted one on one education with all full time Registered Nurses on policy 2.1.007 Plan of Care, policy 2.2.001 Wound Assessment, Documentation, and Photography, and policy 2.1.008 Physician Orders.</p> <p>Beginning the week of 3-28-2021 the Executive Director or designee will include in case conference discussion of any new wound patients or patients with new wound orders received over previous week to ensure orders in the plan of care are followed x 8 weeks and until 100% compliance x 8 consecutive weeks.</p> <p>Beginning week of 3-28-2021 the Executive Director or designee will make 2 home visits and audit 2 Medical Records weekly of patients with wound care x 8 weeks and until 100% compliance x 8 consecutive weeks to ensure all patient wound care is performed as indicated on the Plan of Care. Any deficiencies will</p> |                      |

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| G 1024<br><br>Bldg. 00                             | <p>2nd toe flush with normal saline. Apply betadine. Wrap with light sterile gauze bandage. Left 4th toe paint with betadine and apply padded and protected dressing blister still intact and drying. ... SN [skilled nurse] to do 2 times a week ..."</p> <p>SN visit notes dated 2/17/2021, 2/19/2021, and 2/23/2021, completed by Registered Nurse B, indicated, but was not limited to, wound care provided to left 2nd toe, "Skilled nurse to perform/instruct/reinforce patient/caregiver procedure of wound care to left 2nd toe 2x weekly. Cleanse with soap and water. Apply betadine. Cover with drying dressing using clean technique. Patient tolerated well."</p> <p>During an interview on 3/8/2021 at 2:10 p.m., the Alternate Administrator stated that the tablets [clinicians use for documentation] are different from the "back office." If the clinician clicks on "no change in orders" and not "associate new order," an old order would populate in the wound care visit notes.</p> <p>During an interview on 3/9/2021 at 9:40 a.m., in reference to documented wound care in SN visits 2/17/2021, 2/19/2021, and 2/23/2021, the Administrator stated that the "plan of care overrode orders." "When the plan of care came back signed, it overrode the orders and prepopulated in the visit. The nurse should have verified that the correct wound care order populated in the visit."</p> <p>484.110(b)<br/>Authentication<br/>Standard: Authentication.<br/>All entries must be legible, clear, complete, and appropriately authenticated, dated, and timed. Authentication must include a</p> |   | be addressed individually including disciplinary action.  |                      |   |

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|                    | <p>signature and a title (occupation), or a secured computer entry by a unique identifier, of a primary author who has reviewed and approved the entry.</p> <p>Based on record review and interview, the agency failed to ensure accurate documentation on wound measurements were recorded for 1 of 2 wound care patients. (Patient 1)</p> <p>Findings include:</p> <p>A 03/01/19 policy titled Home Care Record was provided by the Executive Director/Administrator on 3/9/21 at 10:05 a.m. The policy indicated, but was not limited to, " 8. ... a. All entries recorded in the home care record must be legible and accurate."</p> <p>The complete clinical record for patient 1 was reviewed on 3/8/21, start of care date 1/16/21, for the certification period 1/16/21 to 3/16/21, with a diagnosis of orthopedic aftercare following surgical amputation. The record evidenced the following:</p> <p>Review of the Wound Record Report evidenced the following measurements for the left great toe amputation:<br/>Date 1/16/21, 1.3 cm (centimeter) length x 5.5 cm width x 0 depth<br/>Dates 1/19/21, 1/22/21, 1/26/21, 1/29/21, "no measurements due"<br/>Date 2/2/21, 1.3 cm length x 5.5 cm width x 0 depth<br/>Date 2/4/21, 5.5 cm length x 0.3 cm width x 0 depth<br/>Date 2/9/21, 5 cm length x 1 cm width x 0 depth<br/>Date 2/18/21, 1 cm length x 5 cm width x 0 depth</p> <p>During an interview on 3/8/21 at 11:40 a.m. the Alternate Administrator was asked about the</p> | G 1024        | <p>On 3-11-21 and 3-23-2021 the Executive Director conducted mandatory education with all staff on placing entries into the medical record, utilizing policy 7.003 Home Care Record, policy 2.2.001 Wound Assessment, Documentation, and Photography, policy 2.2.007 Negative Pressure Wound Therapy, policy 2.1.008 Physician Orders, and policy. 2.1.007 Plan of Care.</p> <p>On 3-10-2021 &amp; 3-12-2021 the Executive Director conducted one on one education with all full time Registered Nurses on policy 7.003 Home Care Record, policy 2.2.001 Wound Assessment, Documentation, and Photography, policy 2.2.007 Negative Pressure Wound Therapy, policy 2.1.008 Physician Orders, and policy. 2.1.007 Plan of Care.</p> <p>Beginning the week of 3-28-2021 the Executive Director or designee will include in case conference discussion of wound patients seen over the previous week to ensure documentation in the patient record is legible, clear, complete, and appropriately authenticated and dated in accordance with the organizations policy, including verification of accurate wound measurements x 8 weeks and</p> | 03/29/2021           |

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| N 0000<br>Bldg. 00 | <p>increase in size of the wound from 2/2/21 to 2/4/21, and if the physician was called for an update or orders. The Alternate Administrator was unable to evidence documentation of physician notification. The Alternate Administrator stated he/she called RN A and RN B for more information about the increase in size of wound. Both RN's indicated the length and width of the wound for patient 1 was transposed inadvertently for dates 2/4/21 and 2/9/21. On 3/9/21 at 12:00 p.m. the Executive Director/Administrator indicated wound education was provided to staff in the past and education continues ongoing as well as chart audits.</p> <p>This survey was for a State complaint revisit of a deemed home health agency.</p> <p>Survey Dates: March 8 &amp; 9 of 2021</p> <p>Facility Number: 004583</p> <p>During this post re-visit survey, seven (7) state deficiencies were found corrected and two (2) new deficiencies were cited.</p> <p>Quality Review completed on 3/16/2021 A4</p> | N 0000        | <p>until 100% compliance x 8 consecutive weeks.</p> <p>Beginning week of 3-28-2021 the Executive Director or designee will make 2 home visits and audit 2 Medical Records weekly of patients with wound care x 8 weeks and until 100% compliance x 8 consecutive weeks to ensure all patient wound measurements are accurate. Any deficiencies will be addressed individually including disciplinary action.</p> |                      |
| N 0547<br>Bldg. 00 | <p>410 IAC 17-14-1(a)(1)(H)<br/>Scope of Services<br/>Rule 14 Sec. 1(a) (1)(H) Except where services are limited to therapy only, for purposes of practice in the home health setting, the registered nurse shall do the following:<br/>(H) Accept and carry out physician,</p>  |               |  |                      |

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|  | <p>chiropractor, podiatrist, dentist and optometrist orders (oral and written).</p> <p>Based on record review and interview, the agency failed to perform wound care as indicated on the plan of care for 1 of 2 patients whose clinical record was reviewed for wounds (Patient 2).</p> <p>Finding include:</p> <p>An undated Registered Nurse job description was provided by the Administrator on 3/8/2021 at 3:12 p.m. The job description indicated, but was not limited to, "The Registered Nurse in Home Health provides and directs provisions of nursing care to patients in their homes as prescribed by the physician ... Provides clinical services within the scope of practice ... in accordance with the plan of care ... Implements ... the plan of care in collaboration with the physician..."</p> <p>A revised policy dated 2/1/2021, titled Wound Assessment, Documentation, and Photography was provided by the Alternate Administrator on 3/8/2021 at 12:05 p.m. The policy indicated documentation in the medical record was to include, but was not limited to, "Exact wound care performed, following physician orders."</p> <p>A copy of a revised form dated 6/1/2020, titled Competency Assessment/Peer Review RN for Registered Nurse B was obtained on 3/8/2021 at 2:42 p.m. The form indicated, but was not limited to, "Wound Care/Wound Assessment and Staging" as met, indicated by a checkmark in the "Met" column, using assessment method observation as indicated by a checkmark in the "O" column with initials and a date of 12/23/2020. The form contained the Alternate Administrator's and Registered Nurse B's signatures with a date of</p> | N 0547  | <p>On 3-15-2021 to 3-19-21 the Executive Director completed 100% medical record review on active wound care patients to ensure the agency performed wound care as indicated on the plan of care.</p> <p>On 3-11-2021 and 3-23-2021 the Executive Director conducted mandatory education with all staff on providing services that are ordered by the physician as indicated in the plan of care, utilizing policy 2.1.007 Plan of Care, policy 2.2.001 Wound Assessment, Documentation, and Photography, and policy 2.1.008 Physician Orders.</p> <p>On 3-10-2021 &amp; 3-12-2021 the Executive Director conducted one on one education with all full time Registered Nurses on policy 2.1.007 Plan of Care, policy 2.2.001 Wound Assessment, Documentation, and Photography, and policy 2.1.008 Physician Orders.</p> <p>Beginning the week of 3-28-2021 the Executive Director or designee will include in case conference discussion of any new wound patients or patients with new wound orders received over previous week to ensure orders in the plan of care are followed x 8</p> | 03/29/2021           |   |

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|                    | <p>12/23/2020 next to Registered Nurse B's signature.</p> <p>The complete clinical record for Patient 2 was reviewed on 3/8/2021, start of care date 7/28/2020, with a certification period of 1/24/2021 to 3/24/2021, with orders for the skilled nurse to perform wound care. Patient 2's diagnoses were Type 2 Diabetes Mellitus with Diabetic Polyneuropathy, and Type 2 Diabetes with Foot Ulcer.</p> <p>A 2/9/2021 physician order description indicated, but was not limited to, "Wound care order. Left 2nd toe flush with normal saline. Apply betadine. Wrap with light sterile gauze bandage. Left 4th toe paint with betadine and apply padded and protected dressing blister still intact and drying. ... SN [skilled nurse] to do 2 times a week ..."</p> <p>SN visit notes dated 2/17/2021, 2/19/2021, and 2/23/2021, completed by Registered Nurse B, indicated, but was not limited to, wound care provided to left 2nd toe, "Skilled nurse to perform/instruct/reinforce patient/caregiver procedure of wound care to left 2nd toe 2x weekly. Cleanse with soap and water. Apply betadine. Cover with drying dressing using clean technique. Patient tolerated well."</p> <p>During an interview on 3/8/2021 at 2:10 p.m., the Alternate Administrator stated that the tablets [clinicians use for documentation] are different from the "back office." If the clinician clicks on "no change in orders" and not "associate new order," an old order would populate in the wound care visit notes.</p> <p>During an interview on 3/9/2021 at 9:40 a.m., in reference to documented wound care in SN visits 2/17/2021, 2/19/2021, and 2/23/2021, the</p> |               | <p>weeks and until 100% compliance x 8 consecutive weeks.</p> <p>Beginning week of 3-28-2021 the Executive Director or designee will make 2 home visits and audit 2 Medical Records weekly of patients with wound care x 8 weeks and until 100% compliance x 8 consecutive weeks to ensure all patient wound care is performed as indicated on the Plan of Care. Any deficiencies will be addressed individually including disciplinary action.</p> |                      |

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| N 0610<br><br>Bldg. 00   | <p>Administrator stated that the "plan of care overrode orders." "When the plan of care came back signed, it overrode the orders and prepopulated in the visit. The nurse should have verified that the correct wound care order populated in the visit."</p> <p>410 IAC 17-15-1(a)(7)<br/>Clinical Records<br/>Rule 15 Sec. 1. (a)(7) All entries must be legible, clear, complete, and appropriately authenticated and dated. Authentication must include signatures or a secured computer entry.</p> <p>Based on record review and interview, the agency failed to ensure accurate documentation on wound measurements were recorded for 1 of 2 wound care patients. (Patient 1)</p> <p>Findings include:</p> <p>A 03/01/19 policy titled Home Care Record was provided by the Executive Director/Administrator on 3/9/21 at 10:05 a.m. The policy indicated, but was not limited to, " 8. ... a. All entries recorded in the home care record must be legible and accurate."</p> <p>The complete clinical record for patient 1 was reviewed on 3/8/21, start of care date 1/16/21, for the certification period 1/16/21 to 3/16/21, with a diagnosis of orthopedic aftercare following surgical amputation. The record evidenced the following:</p> <p>Review of the Wound Record Report evidenced the following measurements for the left great toe amputation:<br/>Date 1/16/21, 1.3 cm (centimeter) length x 5.5 cm</p> | N 0610              | <p>On 3-11-21 and 3-23-2021 the Executive Director conducted mandatory education with all staff on placing entries into the medical record, utilizing policy 7.003 Home Care Record, policy 2.2.001 Wound Assessment, Documentation, and Photography, policy 2.2.007 Negative Pressure Wound Therapy, policy 2.1.008 Physician Orders, and policy. 2.1.007 Plan of Care.</p> <p>On 3-10-2021 &amp; 3-12-2021 the Executive Director conducted one on one education with all full time Registered Nurses on policy 7.003 Home Care Record, policy 2.2.001 Wound Assessment, Documentation, and Photography, policy 2.2.007 Negative Pressure Wound Therapy, policy 2.1.008 Physician Orders, and policy. 2.1.007 Plan of Care.<br/>Beginning the week of 3-28-2021 the Executive Director or designee</p> | 03/29/2021                 |

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|  | <p>width x 0 depth<br/>Dates 1/19/21, 1/22/21, 1/26/21, 1/29/21, "no measurements due"</p> <p>Date 2/2/21, 1.3 cm length x 5.5 cm width x 0 depth<br/>Date 2/4/21, 5.5 cm length x 0.3 cm width x 0 depth<br/>Date 2/9/21, 5 cm length x 1 cm width x 0 depth<br/>Date 2/18/21, 1 cm length x 5 cm width x 0 depth</p> <p>During an interview on 3/8/21 at 11:40 a.m. the Alternate Administrator was asked about the increase in size of the wound from 2/2/21 to 2/4/21, and if the physician was called for an update or orders. The Alternate Administrator was unable to evidence documentation of physician notification. The Alternate Administrator stated he/she called RN A and RN B for more information about the increase in size of wound. Both RN's indicated the length and width of the wound for patient 1 was transposed inadvertently for dates 2/4/21 and 2/9/21. On 3/9/21 at 12:00 p.m. the Executive Director/Administrator indicated wound education was provided to staff in the past and education continues ongoing as well as chart audits.</p> |   | <p>will include in case conference discussion of wound patients seen over the previous week to ensure documentation in the patient record is legible, clear, complete, and appropriately authenticated and dated in accordance with the organizations policy, including verification of accurate wound measurements x 8 weeks and until 100% compliance x 8 consecutive weeks.</p> <p>Beginning week of 3-28-2021 the Executive Director or designee will make 2 home visits and audit 2 Medical Records weekly of patients with wound care x 8 weeks and until 100% compliance x 8 consecutive weeks to ensure all patient wound measurements are accurate. Any deficiencies will be addressed individually including disciplinary action.</p> |                      |   |