

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15K023	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 07/07/2023
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NAME OF PROVIDER OR SUPPLIER HELP AT HOME SKILLED CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 6855 SHORE TERRACE SUITE 240 , INDIANAPOLIS, Indiana, 46254
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G0000	<p>INITIAL COMMENTS</p> <p>This visit was for a Federal/State complaint survey of a Home Health Provider.</p> <p>Survey Dates: 07/05/23, 07/06/23, 07/07/23</p> <p>Complaint # 99506 Related and unrelated deficiencies cited.</p> <p>12-month Unduplicated Skilled Admissions: 960</p> <p>This deficiency report reflects State Findings cited in accordance with 410 IAC 17. Refer to State Form for additional State Findings.</p> <p>QR complete by A3.</p>	G0000		
G0754	<p>A qualified HH aide successfully completed:</p> <p>CFR(s): 484.80(a)(1)(i-iv)</p> <p>A qualified home health aide is a person who has successfully completed:</p> <p>(i) A training and competency evaluation program as specified in paragraphs (b) and (c) respectively of this section; or</p> <p>(ii) A competency evaluation program that meets the requirements of paragraph (c) of this section; or</p> <p>(iii) A nurse aide training and competency evaluation program approved by the state as meeting the requirements of §483.151 through §483.154 of this chapter, and is currently listed in good standing on the state nurse aide registry; or</p> <p>(iv) The requirements of a state licensure program that meets the provisions of paragraphs (b) and (c) of this section.</p> <p>This ELEMENT is NOT MET as evidenced by:</p> <p>Based on observation, record review, and interview the agency failed to ensure all home health aides</p>	G0754		

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 reverse for further 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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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G0754	<p>Continued from page 1 successfully completed a training and competency evaluation program that included at least 75 hours of classroom and supervised practical training, a competency only program, based on previously completing the required training and competency, a nurse aide training and competency evaluation program approved by the state, or a competency or state licensure program, for 2 of 2 home health aides observed during orientation and competency classes.</p> <p>Findings include:</p> <p>1. A review of agency policy "Competency Assessment," last revised 03/20/23, indicated "ii. Skills competency is evaluated by observing the aide with client and/or pseudo patient ... iv. The Home Health Aide must demonstrate evidence of: a. Successful completion of a training program totaling at least 75 hours ... OR b. Successful completion of a competency evaluation program. The Home Health Aide will have successfully completed the ... program if he/she demonstrates competency in a minimum of eleven (11) of the twelve areas required in federal guidelines. Skills with an asterisk must be evaluated using a client or pseudo patient ..."</p> <p>2. On 07/06/23 at 10:44 AM, Person C, a Registered Nurse (RN) and competency nurse, was observed conducting a Home Health Aide (HHA) Skills competency class. Person C provided skills training during the class, as observed by instruction on obtaining vital signs, using a gait belt, hand washing, use of a fracture pan (a type of bedpan), and use of a Hoyer lift (device used to transfer a person from bed to chair). During the competency class, HHA 5 and HHA 6 were questioned by Person C concerning their experience using a gait belt and Hoyer lift. HHA 5 and HHA 6 indicated they did not have any experience using the equipment and had never received classroom or supervised practical training to become a home health aide. Person C observed HHA 5 provide an incomplete bed bath to the lower extremities of Person F, the pseudo patient, and when questioned regarding the missing steps, HHA 5 indicated she did not miss any steps. During the bed bath provided by HHA 6, the aide indicated being confused and became anxious when required to demonstrate washing the breasts of Person F, who was fully clothed. Person C provided verbal cues and training to HHA 6 and HHA 6 continued the bed bath. Person C was asked about completing the shower/sink/tub bathing and shampooing and indicated she only assessed aide competency using a bed bath because that was what people were most nervous about. HHA 5 and HHA 6 required training throughout the competency, failed to</p>	G0754		

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G0754	Continued from page 2 demonstrate the required skills without verbal cuing and instruction, and failed to demonstrate all skills required to be performed using a client or pseudo patient . 3. On 07/06/23 at 2:44 PM, observations and findings were reviewed with the Administrator and Alternate Administrator, including the absence of documentation that HHA 5 and HHA 6 received 75 hours of classroom and supervised practical training, failure to demonstrate all required skills using a client or pseudo patient, and failure to demonstrate all required skills without training and verbal cuing. The Administrator indicated the date of hire for HHA 5 and HHA 6 was 07/06/23 and indicated the competency assessment forms for HHA 5 and HHA 6 were not accurate based on the observations in the competency class. 410 IAC 17-14-1(l)(1)(A)	G0754		
G0766	HHA maintains documentation of training CFR(s): 484.80(b)(4) The HHA must maintain documentation that demonstrates that the requirements of this standard have been met. This ELEMENT is NOT MET as evidenced by: Based on record review and interview, the agency failed to ensure it maintained documentation of Home Health Aide (HHA or hha) training for all home health aides including, but not limited to, 75 hours of classroom and supervised practical training with a minimum of 16 hours classroom training and a minimum of 16 hours of supervised practical training, for 2 of 3 home health aide records reviewed for training documentation. (HHA 5, HHA 6) Findings include: 1. A review of agency policy "Competency Assessment," last revised 03/20/23, indicated, " ... vii. Documentation of individual Home Health Aide training and/or competency shall be maintained in the employee's file." 2. A review of the personnel file for HHA 5 failed to evidence documentation that HHA 5 successfully completed a training and competency program, successfully completed a competency evaluation program based on previous training received, successfully completed a nurse aide training and competency	G0766		

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G0766	Continued from page 3 evaluation program and training and competency requirements for a home health aide, or successfully completed a State administered program that licenses or certifies home health aides. 3. A review of the personnel file for HHA 6 failed to evidence documentation that HHA 6 successfully completed a training and competency program offered by another home health agency, successfully completed a competency evaluation program only, based on home health aide training received previously, successfully completed a nurse aide training and competency evaluation program and training and competency requirements for an HHA, or successfully completed a State administered program that licenses or certifies home health aides. 4. On 07/06/23 at 2:44 PM, the Administrator indicated there was no further personnel file documentation for HHA 5 and HHA 6. 410 IAC 17-14-1)(2)	G0766		
G0952	Ensure that HHA employs qualified personnel CFR(s): 484.105(b)(1)(iv) (iv) Ensure that the HHA employs qualified personnel, including assuring the development of personnel qualifications and policies. This ELEMENT is NOT MET as evidenced by: Based on observation, record review, and interview the agency failed to ensure it hired qualified home health aides who were competent to provide safe, effective, and efficient care, for 2 of 2 Home Health Aides observed during competency evaluations. (HHA 5, HHA 6) Findings include: 1. A review of agency policy "Competency Assessment," last revised 03/20/23, indicated "ii. Skills competency is evaluated by observing the aide with client and/or pseudo patient ... iv. The Home Health Aide must demonstrate evidence of: a. Successful completion of a training program totaling at least 75 hours ... OR b. Successful completion of a competency evaluation program. The Home Health Aide will have successfully completed the ... program if he/she demonstrates competency in a minimum of eleven (11) of the twelve areas required in federal guidelines. Skills with an	G0952		

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G0952	<p>Continued from page 4 asterisk must be evaluated using a client or pseudo patient ..."</p> <p>2. On 07/06/23 at 10:44 AM, Person C (a Registered Nurse [RN] and competency nurse) was observed conducting a Home Health Aide (HHA) Skills competency class. Person C provided skills training during the class as observed by instruction on obtaining vital signs, using a gait belt, hand washing, use of a fracture pan (a type of bedpan), and use of a Hoyer (device used to transfer a person from bed to chair) lift. During the competency class, HHA 5 and HHA 6 were questioned by Person C concerning their experience using a gait belt and Hoyer lift. HHA 5 and HHA 6 indicated they did not have any experience using the equipment and had never received classroom or supervised practical training to become a home health aide. Person C observed HHA 5 provide an incomplete bed bath to the lower extremities of Person F, the pseudo patient, and when questioned regarding the missing steps, HHA 5 indicated she did not miss any steps. During the bed bath provided by HHA 6, the aide indicated being confused and became tearful when required to demonstrate washing the breasts of Person F, who was fully clothed. Person C provided verbal cues and training to HHA 6 and HHA 6 continued the bed bath. Person C was asked about completing the shower/sink/tub bathing and shampooing and indicated she only assessed aide competency using a bed bath because that was what people were most nervous about. HHA 5 and HHA 6 required training throughout the competency and failed to demonstrate the required skills without verbal cuing and instruction.</p> <p>3. A review of the self-assessment completed and signed by HHA 5, dated 07/05/23, indicated HHA 5 was experienced in all skills listed except documentation and following the aide plan of care, and had no experience in geriatrics or spinal cord injuries. HHA 5 was marked as "eligible for competency."</p> <p>A review of the HHA competency assessment for HHA 6, dated 07/06/23 and signed by Person C, indicated HHA 6 successfully completed all the skills listed using a pseudo-patient.</p> <p>4. A review of the self-assessment completed and signed by HHA 6, dated 07/05/23, indicated HHA 56was experienced in all skills listed except shaving and assisting with ambulation and indicated HHA 6 had no experience in pediatrics, geriatrics, autism, developmental disabilities, seizure disorders, cerebral palsy, spinal cord injuries, dementia, and Alzheimer's. HHA 6 was marked as "eligible for competency."</p>	G0952		

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G0952	Continued from page 5 A review of the "Competency Assessment – HHA," for HHA 6, dated 07/06/23 and signed by Person C, indicated HHA 6 successfully completed all the skills listed using a pseudo-patient. 5. On 07/06/23 at 2:44 PM, observations and findings were reviewed with the Administrator and Alternate Administrator including, but not limited to, the absence of training and experience for HHA 5 and HHA 6, failure to use a client or pseudo patient to demonstrate the required skills, and failure to demonstrate all required skills, and failure to demonstrate all required skills without training and verbal cuing. The Administrator indicated the date of hire for HHA 5 and HHA 6 was 07/06/23 and indicated the competency assessment forms for HHA 5 and HHA 6 were not accurate based on the observations in the competency class. 410 IAC 17-12-1(d)(3)	G0952		