

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/28/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 157644	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/19/2020
NAME OF PROVIDER OR SUPPLIER AVEANNA HEALTHCARE			STREET ADDRESS, CITY, STATE, ZIP CODE 111 EAST LUDWIG RD STE 109 FORT WAYNE, IN 46825		
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G 000	INITIAL COMMENTS This visit was for a Federal and a State complaint investigation of a deemed home health agency. Complaints: #IN00265193; unsubstantiated, due to lack of sufficient evidence #IN00319234; substantiated, with related Federal and State deficiencies Survey dates: 2/18 and 2/19/2020 Facility #: 12395 Provider #: 157644 Medicaid #: 20100596 Census: 47 Skilled nursing: 45 Home health aide only: 2 Records reviewed : 3 These deficiencies reflect State findings cited in accordance with 410 IAC 17. Quality review completed: 02/28/20 by area 3	G 000			
G 572	Plan of care CFR(s): 484.60(a)(1) Each patient must receive the home health services that are written in an individualized plan of care that identifies patient-specific measurable outcomes and goals, and which is established, periodically reviewed, and signed by a doctor of medicine, osteopathy, or podiatry acting within the scope of his or her state license, certification, or registration. If a physician refers a patient under a plan of care that cannot be completed until after an evaluation visit, the physician is consulted to	G 572			

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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G 572	<p>Continued From page 1</p> <p>approve additions or modifications to the original plan.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the agency failed to ensure skilled nursing provided services as ordered on the plan of care for 1 of 3 records reviewed of ventilated patients. (#1)</p> <p>Findings include:</p> <p>An agency policy, titled, "Staffing and Scheduling", stated, "... the company ensures patients receive care and services in a timely and consistent manner assuring continuity of care. Care and services will be based on patient needs"</p> <p>Record review for patient #1 included a plan of care for the certification period of 12/27/19 to 2/24/2020 with the primary diagnosis of chronic respiratory failure and orders for skilled nursing 10-12 hours/day 3-5 days per week and 6-8 hours/day 1-2 days per week. The skilled nurse (SN) orders included bolus G-tube feedings 5 times per day per G Tube (stomach tube) and to check balloon inflation (to anchor stomach tube) and verify 6 milliliters of water; comprehensive assessments every shift and as needed; administration of antipyretic (anti fever) medications for temperature over 101 degrees and to assess vital signs every shift and notify the physician if outside parameters; chest percussion vest 3 times per day for 15 minutes of therapy (aids loosening of mucous to encourage better air exchange) and to notify the physician of persistent respiratory effort or distress; spot checks of oxygen saturation every 4 hours and trach suctioning with 8 french suction catheter and trach care twice per day, to change trach ties</p>	G 572			

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G 572	<p>Continued From page 2</p> <p>daily; and to monitor settings of the ventilator. The administrator failed to evidence that a SN was staffed to complete visits as evidenced by:</p> <p>An RN (registered nurse) Reassessment form, dated 12/23/19, revealed that patient #1 was totally dependent and that there was no reason for discharge. DME (durable medical equipment) supplies needed this episode: Hoyer lift, infection control kit, nebulizer equipment (to deliver inhaled medications to the lungs), non sterile gloves, portable suction equipment, suction pump, suction tubing, suction canister, suction catheters, tracheostomy equipment, and a manual wheelchair.</p> <p>A SN visit schedule for patient #1 revealed no visits were completed from 12/27/19 to 1/22/20 and no visits were completed from 1/24/20 to 2/19/20.</p> <p>A missed visit report (MVR) dated 1/26/20 revealed that visits were missed on 1/27, 1/28, 1/29, 1/30, 1/31/20, due to "Agency unable to fill shift due to no staff available.</p> <p>An MVR dated 2/9/20 revealed that visits were missed on 2/10, 2/11, 2/12, 2/13, and 2/14/20, due to "Agency unable to fill shift due to no staff available."</p> <p>An MVR dated 2/16/20 revealed that visits would be missed on 2/17, 2/18, 2/19, 2/20, and 2/21/19, due to "Agency unable to fill shift due to no staff available."</p> <p>On 2/18/20 at 5:48 PM, the patient's caregiver was interviewed and stated, "It's crazy. The scheduling guy [employee A] got promoted and</p>	G 572			

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G 572	<p>Continued From page 3</p> <p>there was a lot of miscommunication ... The only time I heard of discharge was a couple of weeks ago. A new nurse was starting on the 19th and then today the clinical supervisor left a message that Corporate said to discharge her ... one nurse stayed 7 years with us ... 2 of the nurses took twins so that took away nurses from our little town". The caregiver stated that employee A called on October 2nd and was told that the skilled nurse was being taken off the case because of an expired license.</p> <p>During an interview on 2/18/2020 at 2:42 PM, the Clinical supervisor was asked why there were no documented visits during the present certification period. "We have been trying so hard to get a nurse for that patient in that area {patient resides in a rural area}". When queried at what point the agency would consider discharging the patient if the agency couldn't meet their needs with an alternate skilled nurse, the Clinical supervisor stated, "Usually 60 days, but that mom doesn't want to close, she insists we keep trying. We told the mom last week that we must discharge because we can't find vent-experienced nurses at this time. The mother is now upset about discharging and hasn't answered my last 2 phone calls or called me back."</p> <p>During an interview on 2/18/2020 at 3:02 PM, the Administrator, employee A, was asked why there were no skilled nursing visits completed for patient #1 during January or February of 2020. The Administrator stated, "We weren't able to staff ... We don't have enough staff."</p> <p>410 IAC 17-13-1(a)</p>	G 572			

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G 952	<p>Ensure that HHA employs qualified personnel CFR(s): 484.105(b)(1)(iv)</p> <p>(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 record review and interview, the Administrator failed to ensure a Registered nurse's license was not suspended while continuing to care for a ventilated pediatric patient in 1 of 3 records reviewed. (#1)</p> <p>Findings include:</p> <p>Review of personnel files revealed employee G was hired on 6/21/17 with a probationary license. The employee's current license information was retrieved from Indiana's Professional Licensing Agency, which revealed that the license was suspended.</p> <p>Review of employee G current license status (found in "Nursys", which is a licensure verification system) revealed an Initial license date of 4/4/11, then the license was placed on probation 1/28/16, and suspended on 4/22/19. The employee continued to care for patient #1 until termination from the agency on 10/2/19.</p> <p>Review of patient #1's clinical record evidenced employee G had been providing services to this patient. The most recent skill nurse visit dated 10/1/19, documented by employee G prior to termination, stated, ".... AM meds et [and] neb [nebulizer-system to deliver medication directly to the lungs] treatment administered ... GT [gastric tube] feeding ... GT care given, trach [tracheostomy] ties changed ... tracheal suction ... ventilator check ... alarms audible "</p>	G 952			

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G 952	<p>Continued From page 5</p> <p>During an interview on 2/18/20 at 5:48 PM, the patient #1's caregiver stated that employee A called on October 2nd and was told that employee G was being taken off the case because of an expired license. The complainant stated, "I really liked [employee G] and he/ she was with me for 2 years." The caregiver discovered employee G was on a "3-year suspension."</p> <p>During an interview on 2/19/19 at 9:10 AM, employee F stated that on the 1st and 15th of every month, they was tasked with pulling employee licenses to check them for accuracy. Employee F was on maternity leave from March through the end of May. Employee F indicated he/ she started checking for licenses needing renewal in June/July, and discovered that employee G's license was suspended in April of 2019.</p> <p>During an interview on 2/19/20 at 9:50 AM, employee N verified that employee G was listed in the company's network (Workday and Healthtrust) with a different last name than that on the nursing license. Employee N stated, "I honestly don't know why it [background check] was run on [employee G's] name {as it appeared on employment application and driver's license} and not the nursing license. The branches {each individually licensed agencies under the same corporation} used to do background checks but now Corporate is responsible. If anything comes back negative, [employee F] sends the background checks to me so I can approve or deny. I investigate and speak with the employee regarding negative marks. If I'm unsure of the background check I can send it up to [employee</p>	G 952			

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G 952	Continued From page 6 O], vice president of clinical operations." Employee N was aware of employee G's probationary license. 410 IAC 17-12-1 (d)(3)	G 952			