

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15K069	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 07/31/2014
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NAME OF PROVIDER OR SUPPLIER GUARDIAN HOME HEALTH LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1521 S 3RD ST TERRE HAUTE, IN 47802
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G000000	<p>This was a revisit for an extended home health Federal recertification survey completed June 16 - 19, 2014.</p> <p>Survey Dates: July 31, 2014</p> <p>Facility #: 012338</p> <p>Medicaid Vendor #: 201018830</p> <p>Surveyor: Ingrid Miller, MS, BSN, RN Public Health Nurse Surveyor</p> <p>Active census: 18 patients</p> <p>During this survey, 4 Conditions and 22 standard level deficiencies were found corrected. One condition and 2 standard level deficiencies were recited.</p> <p>Guardian Home Health is precluded from providing its own home health aide training and/or competency evaluation program for a period of two (2) years starting 07/01/14 due to not being in compliance with 484.36 Home Health Aide Services.</p> <p>Quality Review: Joyce Elder, MSN,</p>	G000000		
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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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G000202	<p>BSN, RN August 6, 2014</p> <p>484.36 HOME HEALTH AIDE SERVICES Based on agency policy review, clinical record review, and interview, it was determined the agency failed to ensure the home health aide plan of care was updated at least every 60 days in 1 of 10 clinical records reviewed of patients receiving home health aide services (See G 224) and failed to ensure the Registered Nurse made an on-site home health aide supervisory visit to the patient's home no less frequently every 30 days as required by the agency's policy for 2 of 10 records reviewed of patients with home health aide services only (See G 230).</p> <p>The cumulative effect of these systemic problems resulted in the agency's inability to ensure safe home health aide</p>	G000202	Supervisory visits and recertification visits are scheduled and assigned at the time of admission for one year in the future by the DON. The DON runs a weekly report that includes all scheduled visits, including supervisory RN and recertification visits that have been completed or scheduled. It is agency policy CLN029.5 that all visits in the home at all OASIS time points and at supervisory visits by a Registered Nurse include review of the home health aide plan of care. At the OASIS time points an internal audit is done within 5 days of the assessment on every Client chart that includes verification that a review of the home health aide care plan was done by a RN. The audits are completed by a Registered Nurse other than the RN completing the	08/16/2014

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	care was provided as required by the Condition of Participation 484.36 Home health aide services.		<p>assessment. To ensure that aide care plans are reviewed no less than every 60 days, the DON provides the Administrator with weekly reports and audits for all supervisory, recertification, and resumption of care visits made by the RN. By checking assigned supervisory visits and recertification visits weekly, the agency is able to ensure that the home health aide plan of care is reviewed no less than every 60 days.</p> <p>The Executive Director has in-serviced nursing staff again, on the following corrective action: Policy CLN029.5 has been developed, revised and implemented requiring all OASIS assessments to be verified by a Registered Nurse other than the Registered Nurse who completed the assessment. In addition, all plans of care at the time of admission, re-admission, recertification, resumption of care, or discharge will be compared & verified by a Registered Nurse other than the Registered Nurse who completed the assessment. This verification will include orders received since the last OASIS assessment, DME , orders on the Plan of Care, medication/allergy reconciliation, plans of care for the home health aide, attendant care, and homemaker services. Ancillary services or services provided through another agency, Physician or specialists practice</p>	

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			and any other provider providing services or care for the Client. The revision of this policy includes the reviewing RN to use an audit form that has been developed to be used at every OASIS assessment which lists all the pertinent information, signatures and correct dates the assessment RN should have recorded. If omissions are noted on the audit form, the assessment will be returned to the RN who performed the OASIS assessment for completion. These OASIS audits will be included in the 10% of all clinical records reviewed quarterly. The Director of Home Health Services will be responsible for monitoring the corrective actions to ensure this deficiency is corrected and will not recur. 10% of all clinical records will be audited quarterly, to include OASIS audits for evidence that deficiencies don't recur. The audit / review tool that was implemented on 8/16/14 that is done at every OASIS assessment time point includes review for the completion of the aide care plan review and update. As OASIS assessments are done at SOC, ROC, F/U and D/C, this will ensure the aide care plan is reviewed no less that every 60 days. The Director of Nursing will be responsible for monitoring the OASIS review / audits by maintaining a lit of all reviews done and will provide the Executive Director with a report of	

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G000224	<p>484.36(c)(1) ASSIGNMENT & DUTIES OF HOME HEALTH AIDE Written patient care instructions for the home health aide must be prepared by the registered nurse or other appropriate professional who is responsible for the supervision of the home health aide under paragraph (d) of this section. Based on clinical record review, and interview, the agency failed to ensure the home health aide plan of care was updated at least every 60 days in 1 of 10 clinical records reviewed of patients receiving home health aide services with the potential to affect all patients receiving home health aide services (#5).</p> <p>Findings include:</p> <p>1. Clinical record #5, start of care 5/15/14, contained a physician's plan of care for certification periods of 5/15/14 - 7/13/14 and 7/14/14 - 9/11/14. The record evidenced an aide care plan with the last review of 4/8/14. This date was</p>	G000224	<p>all reviews / audits done monthly. The Executive Director will be responsible for reviewing the lists of audits / reviews done monthly and will review this list at least monthly to ensure compliance. The agency is 100% compliant at this time and by using this audit / review tool and monthly reviews for completion of this tool, will ensure compliance is maintained.</p> <p>Supervisory visits and recertification visits are scheduled at the time of admission for one year in the future by the DON. The DON runs a weekly report that includes all scheduled visits, including supervisory RN and recertification visits that have been completed or scheduled. It is agency policy CLN029.5 that all visits in the home at all OASIS time points and at supervisory visits by a Registered Nurse include review of the home health aide plan of care. At the OASIS time points an internal audit is done within 5 days of the assessment on every Client chart that includes verification that a review of the home health aide care plan was done by a RN. The</p>	08/16/2014

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	<p>prior to the start of care date.</p> <p>2. On 7/31/13 at 4:25 PM, the administrator / director of nursing indicated the aide care plan was not current and had not been updated for this patient.</p>		<p>audits are completed by a Registered Nurse other than the RN completing the assessment. To ensure that aide care plans are reviewed no less than every 60 days, the DON provides the Administrator with weekly reports and audits for all supervisory, recertification, and resumption of care visits made by the RN. By checking assigned supervisory visits and recertification visits weekly, the agency is able to ensure that the home health aide plan of care is reviewed no less than every 60 days.</p> <p>The Executive Director has in-serviced nursing staff again, on the following corrective action: Policy CLN029.5 has been developed, revised and implemented requiring all OASIS assessments to be verified by a Registered Nurse other than the Registered Nurse who completed the assessment. In addition, all plans of care at the time of admission, re-admission, recertification, resumption of care, or discharge will be compared & verified by a Registered Nurse other than the Registered Nurse who completed the assessment. This verification will include orders received since the last OASIS assessment, DME , orders on the Plan of Care, medication/allergy reconciliation, plans of care for the home health aide, attendant care, and homemaker services. Ancillary services or services provided</p>		

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			<p>through another agency, Physician or specialists practice and any other provider providing services or care for the Client. The revision of this policy includes the reviewing RN to use an audit form that has been developed to be used at every OASIS assessment which lists all the pertinent information, signatures and correct dates the assessment RN should have recorded. If omissions are noted on the audit form, the assessment will be returned to the RN who performed the OASIS assessment for completion. These OASIS audits will be included in the 10% of all clinical records reviewed quarterly. The Director of Home Health Services will be responsible for monitoring the corrective actions to ensure this deficiency is corrected and will not recur. 10% of all clinical records will be audited quarterly, to include OASIS audits for evidence that deficiencies don't recur. The audit / review tool that was implemented on 8/16/14 that is done at every OASIS assessment time point includes review for the completion of the aide care plan review and update. As OASIS assessments are done at SOC, ROC, F/U and D/C, this will ensure the aide care plan is reviewed no less that every 60 days. The Director of Nursing will be responsible for monitoring the OASIS review / audits by maintaining a lit of all reviews</p>		

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G000230	<p>484.36(d)(3) SUPERVISION If home health aide services are provided to a patient who is not receiving skilled nursing care, physical or occupational therapy or speech-language pathology services, the registered nurse must make a supervisory visit to the patient's home no less frequently than every 60 days. In these cases, to ensure that the aide is properly caring for the patient, each supervisory visit must occur while the home health aide is providing patient care.</p> <p>Based on clinical record and policy review and interview, the agency failed to ensure the Registered Nurse made an on-site home health aide (HHA) supervisory visit to the patient's home no less frequently every 30 days as required by the agency's policy for 2 of 10 records reviewed of patients with home health aide services only (#2 and #3).</p> <p>Findings</p>	G000230	<p>done and will provide the Executive Director with a report of all reviews / audits done monthly. The Executive Director will be responsible for reviewing the lists of audits / reviews done monthly and will review this list at least monthly to ensure compliance. The agency is 100% compliant at this time and by using this audit / review tool and monthly reviews for completion of this tool, will ensure compliance is maintained.</p> <p>Supervisory visits and recertification visits are scheduled at the time of admission for one year in the future by the DON. To ensure that the agency is compliant in the future, the DON runs a weekly report that includes all scheduled visits, including supervisory RN and recertification visits that have been completed or scheduled. The DON provides the Executive Director with the reports and audits on a weekly basis. The Executive Director verifies that pending spervisory</p>	08/16/2014			

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	<p>1. Clinical record #2, Start of care (SOC) 6/18/14, evidenced a plan of care established by the physician for the certification period of 6/18/14 - 8/16/14 for home health aide for 8 hours a day every day for 3 - 5 days a week for feeding, grooming, personal hygiene, incontinence care and supervision due to mental retardation status.</p> <p>a. The clinical record evidenced a supervisory visit on 6/17/14.</p> <p>b. On 7/31/14 at 2:30 PM, the administrator / director of nursing indicated a supervisory visit was lacking.</p> <p>2. Clinical record #3, SOC 4/30/12, evidenced a plan of care established by the physician for 6/19/14 - 8/7/14 for home health aide 2 - 5 hours a day 3 - 6 days a week for 9 weeks. The HHA was to provide assistance with transfers, dressing, meal prep, packing of ... lunch for ... activities, handing him / her supplies or clothing as needed to complete daily routines, perineal care, light housekeeping, and laundry.</p> <p>a. The clinical record evidenced supervisory visits on 6/20/14 and 6/23/14.</p> <p>b. On 7/31/14 at 3:15 PM, the</p>		<p>visits are scheduled and that scheduled supervisory visits are completed and correct.</p> <p>The Executive Director has in-serviced nursing staff, again, on the following corrective action: current policy on the time frames for completing Initial Assessments, Admission Assessments, Recertification Assessments, Resumption of Care Assessments and Supervisory visits. The Director of Nursing will be responsible for scheduling / assigning all supervisory visits. The Director of Home Health Services will be responsible for monitoring the corrective actions to ensure this deficiency is corrected and will not recur. 10% of all clinical records will be audited quarterly for evidence that deficiencies don't recur. The Director of Nursing has scheduled supervisory visits for each client for no less than six months into the future using the computer based scheduling system. The Director of Nursing is the only person with permission to schedule or change supervisory visit assignments, with the exception of the Executive Director. The supervisory visits are reviewed for correctness on the review / audit tool implemented on 08.16.2014 that is done with each OASIS assessment. In addition the Director of nurses monitors for the completion of each</p>	

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N000000	<p>administrator / director of nursing indicated the supervisory visits were lacking.</p> <p>3. The agency policy titled "Home Health Aide Training, Evaluation, and Supervision" stated, "If aide services are provided to a client who is not receiving skilled nursing care, the RN will make a supervisory visit at least every 30 days either when the HHA is present or absent. On at least every other month basis [every 60 days] the supervisory visit must be conducted with the HHA present."</p> <p>This was a revisit for home health state relicensure survey that was conducted June 19, 2014.</p> <p>Survey Date: July 31, 2014</p> <p>Facility #: 012338</p> <p>Medicaid #: 200873250</p> <p>Surveyor: Ingrid Miller, MS, BSN, RN Public Health Nurse Surveyor</p> <p>During this survey, 20 deficiencies were</p>	N000000	<p>supervisory visit weekly. As the supervisory visits are completed, the Director of nursing maintains a list of all clients and their required and completed supervisory visits which are presented to the Executive Director monthly. The director of Nursing will continue to be responsible for scheduling / assigning of supervisory visits and will maintain a compliant supervisory visit schedule for all clients. The Executive Director is responsible for monthly monitoring of supervisory visits to ensure they have been completed.</p>				

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N000550	<p>found corrected. 2 deficiencies were recited.</p> <p>Active patients on census: 18</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN August 6, 2014</p> <p>410 IAC 17-14-1(a)(1)(K) Scope of Services Rule 14 Sec. 1(a) (1)(K) Except where services are limited to therapy only, for purposes of practice in the home health setting, the registered nurse shall do the following: (K) Delegate duties and tasks to licensed practical nurses and other individuals as appropriate.</p> <p>Based on clinical record review, and interview, the agency failed to ensure the registered nurse updated the home health aide plan of care at least every 60 days in 1 of 10 clinical records reviewed of patients receiving home health aide services with the potential to affect all patients receiving home health aide services (#5).</p>	N000550	Supervisory visits and recertification visits are scheduled and assigned at the time of admission for one year in the future by the DON. The DON runs a weekly report that includes all scheduled visits, including supervisory RN and recertification visits that have been completed or scheduled. It is agency policy CLN029.5 that all visits in the home at all OASIS time points	08/16/2014

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	<p>Findings include:</p> <ol style="list-style-type: none"> 1. Clinical record #5, start of care 5/15/14, contained a physician's plan of care for certification periods of 5/15/14 - 7/13/14 and 7/14/14 - 9/11/14. The record evidenced an aide care plan with the last review of 4/8/14. This date was prior to the start of care date. 2. On 7/31/13 at 4:25 PM, the administrator / director of nursing indicated the aide care plan was not current and had not been updated for this patient. 		<p>and at supervisory visits by a Registered Nurse include review of the home health aide plan of care. At the OASIS time points an internal audit is done within 5 days of the assessment on every Client chart that includes verification that a review of the home health aide care plan was done by a RN. The audits are completed by a Registered Nurse other than the RN completing the assessment. To ensure that aide care plans are reviewed no less than every 60 days, the DON provides the Administrator with weekly reports and audits for all supervisory, recertification, and resumption of care visits made by the RN. By checking assigned supervisory visits and recertification visits weekly, the agency is able to ensure that the home health aide plan of care is reviewed no less than every 60 days.</p> <p>The Executive Director has in-serviced nursing staff again, on the following corrective action: Policy CLN029.5 has been developed, revised and implemented requiring all OASIS assessments to be verified by a Registered Nurse other than the Registered Nurse who completed the assessment. In addition, all plans of care at the time of admission, re-admission, recertification, resumption of care, or discharge will be compared & verified by a Registered Nurse other than the</p>				

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			Registered Nurse who completed the assessment. This verification will include orders received since the last OASIS assessment, DME , orders on the Plan of Care, medication/allergy reconciliation, plans of care for the home health aide, attendant care, and homemaker services. Ancillary services or services provided through another agency, Physician or specialists practice and any other provider providing services or care for the Client. The revision of this policy includes the reviewing RN to use an audit form that has been developed to be used at every OASIS assessment which lists all the pertinent information, signatures and correct dates the assessment RN should have recorded. If omissions are noted on the audit form, the assessment will be returned to the RN who performed the OASIS assessment for completion. These OASIS audits will be included in the 10% of all clinical records reviewed quarterly. The Director of Home Health Services will be responsible for monitoring the corrective actions to ensure this deficiency is corrected and will not recur. 10% of all clinical records will be audited quarterly, to include OASIS audits for evidence that deficiencies don't recur. The audit / review tool that was implemented on 8/16/14 that is done at every OASIS assessment time point includes	

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N000606	<p>410 IAC 17-14-1(n) Scope of Services Rule 14 Sec. 1(n) A registered nurse, or therapist in therapy only cases, shall make the initial visit to the patient's residence and make a supervisory visit at least every thirty (30) days, either when the home health aide is present or absent, to observe the care, to assess relationships, and to determine whether goals are being met.</p> <p>Based on clinical record and policy review and interview, the agency failed to ensure the Registered Nurse made an on-site home health aide (HHA) supervisory visit to the patient's home no less frequently every 30 days for 2 of 10 records reviewed of patients with home</p>	N000606	<p>review for the completion of the aide care plan review and update. As OASIS assessments are done at SOC, ROC, F/U and D/C, this will ensure the aide care plan is reviewed no less that every 60 days. The Director of Nursing will be responsible for monitoring the OASIS review / audits by maintaining a lit of all reviews done and will provide the Executive Director with a report of all reviews / audits done monthly. The Executive Director will be responsible for reviewing the lists of audits / reviews done monthly and will review this list at least monthly to ensure compliance. The agency is 100% compliant at this time and by using this audit / review tool and monthly reviews for completion of this tool, will ensure compliance is maintained.</p> <p>Supervisory visits and recertification visits are scheduled and assigned at the time of admission for one year in the future by the DON. The DON runs a weekly report that includes all scheduled visits, including supervisory RN and recertification</p>	08/16/2014	

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	<p>health aide services only (#2 and #3).</p> <p>Findings</p> <p>1. Clinical record #2, Start of care (SOC) 6/18/14, evidenced a plan of care established by the physician for the certification period of 6/18/14 - 8/16/14 for home health aide for 8 hours a day every day for 3 - 5 days a week for feeding, grooming, personal hygiene, incontinence care and supervision due to mental retardation status.</p> <p>a. The clinical record evidenced a supervisory visit on 6/17/14.</p> <p>b. On 7/31/14 at 2:30 PM, the administrator / director of nursing indicated a supervisory visit was lacking.</p> <p>2. Clinical record #3, SOC 4/30/12, evidenced a plan of care established by the physician for 6/19/14 - 8/7/14 for home health aide 2 - 5 hours a day 3 - 6 days a week for 9 weeks. The HHA was to provide assistance with transfers, dressing, meal prep, packing of ... lunch for ... activities, handing him / her supplies or clothing as needed to complete daily routines, perineal care, light housekeeping, and laundry.</p> <p>a. The clinical record evidenced</p>		<p>visits that have been completed or scheduled. It is agency policy CLN029.5 that all visits in the home at all OASIS time points and at supervisory visits by a Registered Nurse include review of the home health aide plan of care. At the OASIS time points an internal audit is done within 5 days of the assessment on every Client chart that includes verification that a review of the home health aide care plan was done by a RN. The audits are completed by a Registered Nurse other than the RN completing the assessment. To ensure that aide care plans are reviewed no less than every 60 days, the DON provides the Administrator with weekly reports and audits for all supervisory, recertification, and resumption of care visits made by the RN. By checking assigned supervisory visits and recertification visits weekly, the agency is able to ensure that the home health aide plan of care is reviewed no less than every 60 days. The Executive Director has in-serviced nursing staff again, on the following corrective action: Policy CLN029.5 has been developed, revised and implemented requiring all OASIS assessments to be verified by a Registered Nurse other than the Registered Nurse who completed the assessment. In addition, all plans of care at the time of admission, re-admission, recertification, resumption of</p>	

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	<p>supervisory visits on 6/20/14 and 6/23/14.</p> <p>b. On 7/31/14 at 3:15 PM, the administrator / director of nursing indicated the supervisory visits were lacking.</p> <p>3. The agency policy titled "Home Health Aide Training, Evaluation, and Supervision" stated, "If aide services are provided to a client who is not receiving skilled nursing care, the RN will make a supervisory visit at least every 30 days either when the HHA is present or absent. On at least every other month basis [every 60 days] the supervisory visit must be conducted with the HHA present."</p>		<p>care, or discharge will be compared & verified by a Registered Nurse other than the Registered Nurse who completed the assessment. This verification will include orders received since the last OASIS assessment, DME , orders on the Plan of Care, medication/allergy reconciliation, plans of care for the home health aide, attendant care, and homemaker services. Ancillary services or services provided through another agency, Physician or specialists practice and any other provider providing services or care for the Client. The revision of this policy includes the reviewing RN to use an audit form that has been developed to be used at every OASIS assessment which lists all the pertinent information, signatures and correct dates the assessment RN should have recorded. If omissions are noted on the audit form, the assessment will be returned to the RN who performed the OASIS assessment for completion. These OASIS audits will be included in the 10% of all clinical records reviewed quarterly. The Director of Home Health Services will be responsible for monitoring the corrective actions to ensure this deficiency is corrected and will not recur. 10% of all clinical records will be audited quarterly, to include OASIS audits for evidence that deficiencies don't recur. The Director of Nursing</p>		

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			has scheduled supervisory visits for each client for no less than six months into the future using the computer based scheduling system. The Director of Nursing is the only person with permission to schedule or change supervisory visit assignments, with the exception of the Executive Director. The supervisory visits are reviewed for correctness on the review / audit tool implemented on 08.16.2014 that is done with each OASIS assessment. In addition the Director of nurses monitors for the completion of each supervisory visit weekly. As the supervisory visits are completed, the Director of nursing maintains a list of all clients and their required and completed supervisory visits which are presented to the Executive Director monthly. The director of Nursing will continue to be responsible for scheduling / assigning of supervisory visits and will maintain a compliant supervisory visit schedule for all clients. The Executive Director is responsible for monthly monitoring of supervisory visits to ensure they have been completed.	