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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15K035 | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____ | X3) DATE SURVEY COMPLETED 02/22/2013 |
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| NAME OF PROVIDER OR SUPPLIER TRINITY HOME HEALTH CARE INC | STREET ADDRESS, CITY, STATE, ZIP CODE 3502 STELLHORN FORT WAYNE, IN 46815 |
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|--------------------|--|---------------|---|----------------------|
| G000000 | <p>This was a home health agency federal complaint investigation survey.</p> <p>Complaint #: IN00123564 - Unsubstantiated: Lack of sufficient evidence. Unrelated deficiencies are cited.</p> <p>Survey date: February 22, 2013</p> <p>Facility #: 011096</p> <p>Medicaid vendor #: 200898530</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: center;">February 25, 2013</p> | G000000 | | |

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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| G000229 | <p>484.36(d)(2) SUPERVISION The registered nurse (or another professional described in paragraph (d)(1) of this section) must make an on-site visit to the patient's home no less frequently than every 2 weeks.</p> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure the Home Health Aide (HHA) supervisory visits were conducted every 14 days for 1 of 1 clinical record reviewed of patients receiving HHA and Skilled Nursing (SN) services with the potential to affect all the agency's patients receiving both services. (#3)</p> <p>Findings include:</p> <ol style="list-style-type: none"> 1. Clinical record #3, start of care 10/18/10, contained a plan of care for the certification period 12/6/12-2/3/13 with orders for HHA daily for 60 days and SN every other day. The SN services were discontinued 1/17/13. HHA supervisory visits were conducted on 12/24/12 and not again until 1/11/13, 18 days later. 2. On 2/22/13 at 1:15 PM, employee A indicated there were no other supervisory visits recorded between the dates of 12/24/12 and 1/11/13. 3. The agency's undated policy titled "Clinical Supervision of Home Care | G000229 | <p>The Administrator/Director of Nursing has inserviced nursing staff on policy #C-340 "Clinical Supervision of Home Care Aides." Scheduling of supervisory visits will coincide with 14 day rule when patients are receiving skilled nursing services in addition to personal care services. The Registered Nurse will make a supervisory visit to the patient's residence at least every two (2) weeks. All patients receiving skilled nursing and home health aide services have been reviewed to ensure that all supervisory visits are in compliance going forward. Ten or 10% of all clinical records will be audited quarterly for evidence that supervisory visits were made within correct time frame. The Director of Nursing will be responsible for monitoring all corrective actions to ensure that this Standard is corrected and will not recur.</p> | 03/08/2013 |

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| | Aides" policy # C-340 states, "1. When patients are receiving skilled nursing services in addition to personal care services, the Registered Nurse will make a supervisory visit to the patient's residence at least every two (2) weeks." | | | |

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| N000000 | <p>This was a home health agency state complaint investigation survey.</p> <p>Complaint #: IN00123564 - Unsubstantiated: Lack of sufficient evidence. Unrelated deficiencies are cited.</p> <p>Survey date: February 22, 2013</p> <p>Facility #: 011096</p> <p>Medicaid vendor #: 200898530</p> <p>Surveyor: Miriam Bennett, RN, BSN, PHNS</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN</p> <p style="text-align: center;">February 25, 2013</p> | N000000 | | | | | |

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| N000524 | <p>410 IAC 17-13-1(a)(1) Patient Care Rule 13 Sec. 1(a)(1) As follows, the medical plan of care shall:</p> <p>(A) Be developed in consultation with the home health agency staff. (B) Include all services to be provided if a skilled service is being provided. (B) Cover all pertinent diagnoses. (C) Include the following:</p> <p>(i) Mental status. (ii) Types of services and equipment required. (iii) Frequency and duration of visits. (iv) Prognosis. (v) Rehabilitation potential. (vi) Functional limitations. (vii) Activities permitted. (viii) Nutritional requirements. (ix) Medications and treatments. (x) Any safety measures to protect against injury. (xi) Instructions for timely discharge or referral. (xii) Therapy modalities specifying length of treatment. (xiii) Any other appropriate items.</p> <p>Based on clinical record review, policy review, and interview, the agency failed to ensure the plan of care included a duration for services ordered for 1 of 3 clinical records reviewed with the potential to affect all the agency's patients. (# 1)</p> <p>Findings include:</p> <p>1. Clinical record #1, start of care 2/28/12, contained a plan of care for the</p> | N000524 | The Administrator/Director of Nursing has inserviced nursing staff on the Medical Plan of Care policy. Staff will ensure the practice of including duration for services ordered on all plans of care. Nurses will complete the plan of care in full. Ten or 10% of all clinical records will be audited quarterly for evidence that all plans of care are properly documented including duration of services. The Director of Nursing will be responsible for monitoring all corrective actions to the plans | 03/08/2013 | | | |

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| | <p>certification period 12/24/12-2/21/13 with orders for Home Health Aide (HHA) services 3 visits per week, 2 hours per visit. The order failed to include a duration.</p> <p>2. On 2/22/13 at 3:00 PM, employee A indicated it should say for 60 days.</p> <p>3. The agency's undated policy titled "Plan of Care" policy number C-580 states, "2. The Plan of Care shall be completed in full to include: ... c. Type, frequency, and duration of all visits / services."</p> | | of care. | |

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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 review, policy review, and interview, the agency failed to ensure the Home Health Aide (HHA) supervisory visits were conducted every 14 days for 1 of 1 clinical record reviewed of patients receiving HHA and Skilled Nursing (SN) services and every 30 days for 1 of 2 clinical records reviewed of patients receiving HHA only services with the potential to affect all the agency's patients who receive HHA services. (#1 and 3)</p> <p>Findings include:</p> <ol style="list-style-type: none"> Clinical record #1, start of care 2/28/12, contained a plan of care (POC) for the certification period 12/24/12-2/21/13 with orders for HHA 3 visits a week, 2 hours per visit. A HHA supervisory visit was conducted on 1/18/13 and 2/20/13, 32 days later. Clinical record #3, start of care 10/18/10, contained a plan of care for the certification period 12/6/12-2/3/13 with | N000606 | The Administrator/Director of Nursing has inserviced nursing staff on policy #C-340 "Clinical Supervision of Home Care Aides." Scheduling of supervisory visits will coincide with 14 day rule when patients are receiving skilled nursing services in addition to personal care services. The Registered Nurse will make a supervisory visit to the patient's residence at least every two (2) weeks. All patients receiving skilled nursing and home health aide services have been reviewed to ensure that all supervisory visits are in compliance going forward. Ten or 10% of all clinical records will be audited quarterly for evidence that supervisory visits were made within correct time frame. The Director of Nursing will be responsible for monitoring all corrective actions to ensure that this Standard is corrected and will not recur. | 03/08/2013 | | | |

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| | <p>orders for HHA daily for 60 days and SN every other day. The SN services were discontinued 1/17/13. HHA supervisory visits were conducted on 12/24/12 and not again until 1/11/13, 18 days later.</p> <p>3. On 2/22/13 at 1:15 PM, employee A indicated there were no other supervisory visits recorded between the dates of 1/18/13 and 2/20/13 for record 1 and between 12/24/12 and 1/11/13 for record 3.</p> <p>4. The agency's undated policy titled "Clinical Supervision of Home Care Aides" policy # C-340 states, "1. When patients are receiving skilled nursing services in addition to personal care services, the Registered Nurse will make a supervisory visit to the patient's residence at least every two (2) weeks. 2. If patients are receiving only Home Care Aide services and there is no skilled service provided, a Registered Nurse will make a supervisory visit at least once every thirty (30) days with every other visit being on site while the Home Care Aide is providing patient care."</p> | | | |

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

PRINTED: 03/22/2013

FORM APPROVED

OMB NO. 0938-0391

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