

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 157586	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 12/29/2015
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NAME OF PROVIDER OR SUPPLIER GREAT LAKES CARING	STREET ADDRESS, CITY, STATE, ZIP CODE 3115 S WEBSTER ST KOKOMO, IN 46902
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G 0000 Bldg. 00	<p>This was a revisit for the Federal home health recertification survey completed on November 5, 6, 9, 10, 12, 13, 16, 17, 18, and 19, 2015.</p> <p>Survey Date: December 29, 2015</p> <p>Facility #: 011284</p> <p>Medicaid #: 200849420</p> <p>During this survey, 6 Conditions of Participation and 30 standard level deficiencies were found corrected. 3 standard level deficiencies were re-cited.</p>	G 0000	Please accept this plan of correction as our credible allegation of compliance.	
G 0159 Bldg. 00	<p>484.18(a) PLAN OF CARE</p> <p>The plan of care developed in consultation with the agency staff covers all pertinent diagnoses, including mental status, types of services and equipment required, frequency of visits, prognosis, rehabilitation potential, functional limitations, activities permitted, nutritional requirements, medications and treatments, any safety measures to protect against injury, instructions for timely discharge or referral, and any other appropriate items.</p> <p>Based on record review, and interview, the agency failed to ensure all durable</p>	G 0159	To ensure compliance with standard G159, the following have been implemented. All field	01/22/2016

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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	<p>medical equipment (DME) used by the patients was included on the plan of care (POC) for 1 of 4 clinical records reviewed. (# 4)</p> <p>Findings include:</p> <p>1. The clinical record for patient # 4 was reviewed on 12/29/15. The start of care date was 12/10/15. The POC dated 12/10/15-2/7/16 contained orders for skilled nurse 5 times a week for 1 week, then 3 times a week for 8 weeks.</p> <p>A. The POC listed DME: abdominal pad, gauze, tape, wound/skin cleanser, wound dressing alginate, wound dressing compression. The section titled "Activities Permitted" listed cane, and other.</p> <p>B. The Visit Note Report dated 12/10/15 listed the following items under the section titled "Equipment/Supplies;" Nebulizer, Cane, Elevated Toilet Seat, and Tub Chair. The POC failed to evidence these DME.</p> <p>C. During interview on 12/29/15 at 3:30 PM, the Administrator stated the nurse also marked "other" in the activities permitted section of the POC but stated she is not sure where that would be specified.</p>		<p>staff will be educated on the requirement to include all DME from the OASIS assessment on the Plan of Care by 1/22/16. An audit will be performed by the administrator/designee by follow up call to 50% of admissions to ensure that all DME used in the home is listed on the OASIS and Plan of Care until 100% compliance is met for 4 consecutive weeks. Once 100% compliance is met for 4 consecutive weeks the audit will decrease to 10% quarterly and will be completed through the clinical record review process. (Exhibit 1)</p>		

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G 0166 Bldg. 00	<p>2. The agency's policy titled "Care Plans," # C-660, reviewed March 2015 stated, "3. The Care Plan shall include, but not be limited to: a. Problems and needs identified related to diagnosis. ... c. A list of specific interventions with plans for implementation. ... 4. The physician Plan of Care may be used as a care plan if specific interventions are clearly identified for home care staff to address client care needs. ... State of Indiana Addendum: ... The nursing plan of care will contain: 1. A plan of care and appropriate patient identifying information, ... 5. Medications, diet, and activities."</p> <p>3. The agency's policy titled "Comprehensive Client Assessment," # C-145 reviewed March 2015 stated, "In addition to general health status/system assessment, GLC comprehensive assessment tool with OASIS will include: ... m. Equipment management."</p>						
	484.18(c) CONFORMANCE WITH PHYSICIAN ORDERS						

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	<p>Verbal orders are put in writing and signed and dated with the date of receipt by the registered nurse or qualified therapist (as defined in section 484.4 of this chapter) responsible for furnishing or supervising the ordered services.</p> <p>Based on record review, and interview, the agency failed to ensure the plan of care (POC) included orders for drawing labs from the antecubital cite for 1 of 1 record review of patients with a Peripherally Inserted Central Catheter (PICC) line. (# 1)</p> <p>Findings include:</p> <p>1. The clinical record of patient # 1 was reviewed on 12/29/15. Start of care date 12/26/15, contained a POC dated 12/26/15-2/23/16 with orders for Skilled Nursing (SN) 4 times a week for 1 week, then 1 time a week for 5 weeks. SN for: ... Instruct on lab/venipuncture procedure, obtain lab from PICC using sterile gloves. SN to change PICC dressing and measure PICC using sterile technique every week and as needed times 3 for soiled or loose dressing. Record PICC line measurements weekly.</p> <p>A. The POC failed to evidence the agency obtained orders to draw labs via the antecubital cite.</p> <p>B. The SN Visit Report dated</p>	G 0166	To ensure compliance with G166, all RN's and LPN's will be educated by 1/22/16 on the requirement to have a clear,detailed order for all PICC line patients that states clearly if labs are to be drawn from the PICC line or peripherally. 100% of all visits that include PICC care will be audited to verify there is an order that clearly states that labs are to be obtained via PICC or peripherally until 100% compliance is met for 4 consecutive weeks. After 4 weeks of 100%compliance the audit will decrease to 10% quarterly and will be completed through the clinical record review process. (Exhibit 2)	01/22/2016

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	<p>12/28/15 by employee F, RN, narrative note stated, "PICC catheter measurement at 1 centimeter. ... attempted lab draw x 3 to right antecubital, unsuccessful, will send alternate nurse to perform same on 12/29." The record failed to evidence the physician was notified they were not using the PICC line for lab draws, and failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>C. The SN Visit Report dated 12/29/15 by employee G, RN, narrative note stated, "Labs drawn from right antecubital in first attempt using butterfly needle." The notes failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>D. During interview on 12/29/15 at 3:05 PM, the Administrator indicated the supervisor had not yet locked the POC orders, and if the referral does not specifically say to draw the labs via the PICC line, then we draw peripherally.</p> <p>E. The referral documents from the Cleveland Clinic, dated 12/24/15, stated "Additional Comments: Catheter care per protocol. Routine lab draws may be done on Tuesday if Monday is a holiday." The referral documents failed to evidence antecubital lab draw orders.</p>			

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G 0176	<p>2. The agency's policy titled "Care Plans," # C-660, reviewed March 2015 stated, "3. The Care Plan shall include, but not be limited to: a. Problems and needs identified related to diagnosis. ... c. A list of specific interventions with plans for implementation. ... 4. The physician Plan of Care may be used as a care plan if specific interventions are clearly identified for home care staff to address client care needs. ... State of Indiana Addendum: ... The nursing plan of care will contain: 1. A plan of care and appropriate patient identifying information, ... 5. Medications, diet, and activities."</p> <p>3. The agency's policy titled "Coordination of Client Services," # C-360, reviewed March 2015 stated, "3. After the initial assessment, the admitting Registered Nurse/Therapist shall communicate the findings of the initial visit with the Clinical Supervisor to ensure: a. Clarification of the plan of care orders. ... e. Need for other services and/or referral to community resources."</p> <p>484.30(a) DUTIES OF THE REGISTERED NURSE</p>			

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Bldg. 00	<p>The registered nurse prepares clinical and progress notes, coordinates services, informs the physician and other personnel of changes in the patient's condition and needs.</p> <p>Based on record review, and interview, the agency failed to ensure the nurses notified the physician of changes in Peripherally Inserted Central Catheter (PICC) length for 1 of 1 patient records reviewed receiving PICC line care; failed to evidence the physician was notified they were not using the PICC line for lab draws; and failed to evidence the physician was notified to obtain an order for antecubital lab draws. (# 1)</p> <p>Findings include:</p> <p>1. The clinical record of patient # 1 was reviewed on 12/29/15. Start of care date 12/26/15, contained a POC dated 12/26/15-2/23/16 with orders for Skilled Nursing (SN) 4 times a week for 1 week, then 1 time a week for 5 weeks. SN for: ... Instruct on lab/venipuncture procedure, obtain lab from PICC using sterile gloves. SN to change PICC dressing and measure PICC using sterile technique every week and as needed times 3 for soiled or loose dressing. Record PICC line measurements weekly.</p> <p>A. The start of care assessment form dated 12/26/15 by employee E,</p>	G 0176	<p>To ensure compliance with G176 All RN's and LPN's will be educated by 1/22/16 on potential PICC line complications as well as the requirement to notify the physician of any changes in measurement from visit to visit, and the requirement for an order that states clearly if labs are to be drawn from the PICC line or peripherally. The individual clinician identified on 12/29/15 was counseled, sent to the home to remeasure, and instructed to update patient's surgeon during the re-visit survey on 12/29/15 An audit will be performed by the administrator/designee on 100% of all PICC line visits to verify that PICC measurements are consistent and physician notification has occurred for any discrepancy until 100% compliance is met for 4 consecutive weeks. After 4 weeks of 100% compliance the audit will decrease to 10% quarterly and will be completed through the clinical record review process.</p>	01/22/2016

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	<p>Registered Nurse (RN) stated, "Indicate length of exposed PICC catheter from insertion site to catheter hub in centimeters: 3.0."</p> <p>B. The SN Visit Report dated 12/28/15 by employee F, RN, narrative note stated, "PICC catheter measurement at 1 centimeter. ... attempted lab draw x 3 to right antecubital, unsuccessful, will send alternate nurse to perform same on 12/29." The record failed to evidence the physician was notified of the 1 centimeter shorter measurement of the PICC line, failed to evidence the physician was notified they were not using the PICC line for lab draws, and failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>C. The SN Visit Report dated 12/29/15 by employee G, RN, narrative note stated, "Labs drawn from right antecubital in first attempt using butterfly needle." The notes failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>D. During interview on 12/29/15 at 3:05 PM, the Administrator indicated the supervisor had not yet locked the POC orders, and if the referral does not specifically say to draw the labs via the PICC line, then we draw peripherally.</p>						

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N 0000 Bldg. 00	<p>E. The referral documents from the Cleveland Clinic, dated 12/24/15, stated "Additional Comments: Catheter care per protocol. Routine lab draws may be done on Tuesday if Monday is a holiday." The referral documents failed to evidence antecubital lab draw orders.</p> <p>2. The agency's undated policy titled "Responding to Complications of PICC Lines," # I-230 stated, "Catheter Tip Migration: It is possible for any type of central venous catheter to migrate to another location while in the body. Certain types of clients are more susceptible to catheter tip migration. ... Clients who are very active. ... Response: Measure and document the external length of the catheter with each dressing change. This will assist in early detection. Periodic catheter tip verification by x-ray study should be performed on all long-term, centrally placed catheters."</p> <p>This was a revisit for the home health licensure survey completed on November 5, 6, 9, 10, 12, 13, 16, 17, 18, and 19,</p>	N 0000	Please accept this plan of correction as our credible allegation of compliance.	

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N 0524 Bldg. 00	<p>2015.</p> <p>Survey Date: December 29, 2015</p> <p>Facility #: 011284</p> <p>Medicaid #: 200849420</p> <p>During this survey, 21 deficiencies were corrected. 3 deficiencies were re-cited.</p> <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>				

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	<p>Based on record review, and interview, the agency failed to ensure all durable medical equipment (DME) used by the patients was included on the plan of care (POC) for 1 of 4 clinical records reviewed. (# 4)</p> <p>Findings include:</p> <p>1. The clinical record for patient # 4 was reviewed on 12/29/15. The start of care date was 12/10/15. The POC dated 12/10/15-2/7/16 contained orders for skilled nurse 5 times a week for 1 week, then 3 times a week for 8 weeks.</p> <p>A. The POC listed DME: abdominal pad, gauze, tape, wound/skin cleanser, wound dressing alginate, wound dressing compression. The section titled "Activities Permitted" listed cane, and other.</p> <p>B. The Visit Note Report dated 12/10/15 listed the following items under the section titled "Equipment/Supplies;" Nebulizer, Cane, Elevated Toilet Seat, and Tub Chair. The POC failed to evidence these DME.</p> <p>C. During interview on 12/29/15 at 3:30 PM, the Administrator stated the nurse also marked "other" in the activities permitted section of the POC but stated</p>	N 0524	<p>To ensure compliance with N524, the following have been implemented. All field staff will be educated on the requirement to include all DME from the OASIS assessment on the Plan of Care by 1/22/16.</p> <p>An audit will be performed by the administrator/designee by follow up call to 50% of admissions to ensure that all DME used in the home is listed on the OASIS and Plan of Care until 100% compliance is met for 4 consecutive weeks. Once 100% compliance is met for 4 consecutive weeks the audit will decrease to 10% quarter and will be completed through the clinical record review process. (Exhibit 1)</p>	01/22/2016			

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	<p>she is not sure where that would be specified.</p> <p>2. The agency's policy titled "Care Plans," # C-660, reviewed March 2015 stated, "3. The Care Plan shall include, but not be limited to: a. Problems and needs identified related to diagnosis. ... c. A list of specific interventions with plans for implementation. ... 4. The physician Plan of Care may be used as a care plan if specific interventions are clearly identified for home care staff to address client care needs. ... State of Indiana Addendum: ... The nursing plan of care will contain: 1. A plan of care and appropriate patient identifying information, ... 5. Medications, diet, and activities."</p> <p>3. The agency's policy titled "Comprehensive Client Assessment," # C-145 reviewed March 2015 stated, "In addition to general health status/system assessment, GLC comprehensive assessment tool with OASIS will include: ... m. Equipment management."</p>			

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N 0546 Bldg. 00	<p>410 IAC 17-14-1(a)(1)(G) Scope of Services Rule 14 Sec. 1(a) (1)(G) Except where services are limited to therapy only, for purposes of practice in the home health setting, the registered nurse shall do the following: (G) Inform the physician and other appropriate medical personnel of changes in the patient's condition and needs, counsel the patient and family in meeting nursing and related needs, participate in inservice programs, and supervise and teach other nursing personnel.</p> <p>Based on record review, and interview, the agency failed to ensure the nurses notified the physician of changes in Peripherally Inserted Central Catheter (PICC) length for 1 of 1 patient records reviewed receiving PICC line care; failed to evidence the physician was notified they were not using the PICC line for lab draws; and failed to evidence the physician was notified to obtain an order for antecubital lab draws. (# 1)</p> <p>Findings include:</p> <p>1. The clinical record of patient # 1 was reviewed on 12/29/15. Start of care date 12/26/15, contained a POC dated 12/26/15-2/23/16 with orders for Skilled Nursing (SN) 4 times a week for 1 week, then 1 time a week for 5 weeks. SN for: ... Instruct on lab/venipuncture procedure, obtain lab from PICC using</p>	N 0546	To ensure compliance with N546, all RN's and LPN's will be educated by 1/22/16 on the requirement to have a clear, detailed order for all PICC line patients that states clearly if labs are to be drawn from the PICC line or peripherally. 100% of all visits that include PICC care will be audited to verify there is an order that clearly states that labs are to be obtained via PICC or peripherally until 100% compliance is met for 4 consecutive weeks. After 4 weeks of 100% compliance the audit will decrease to 10% quarterly and will be completed through the clinical record review process. (Exhibit 2) To ensure compliance with N546 All RN's and LPN's will be educated on potential PICC line complications and the requirement to notify the physician of any changes in measurement from visit to visit, and the requirement for an order that states clearly if labs are to be	01/22/2016			

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	<p>sterile gloves. SN to change PICC dressing and measure PICC using sterile technique every week and as needed times 3 for soiled or loose dressing. Record PICC line measurements weekly.</p> <p>A. The start of care assessment form dated 12/26/15 by employee E, Registered Nurse (RN) stated, "Indicate length of exposed PICC catheter from insertion site to catheter hub in centimeters: 3.0."</p> <p>B. The SN Visit Report dated 12/28/15 by employee F, RN, narrative note stated, "PICC catheter measurement at 1 centimeter. ... attempted lab draw x 3 to right antecubital, unsuccessful, will send alternate nurse to perform same on 12/29." The record failed to evidence the physician was notified of the 1 centimeter shorter measurement of the PICC line, failed to evidence the physician was notified they were not using the PICC line for lab draws, and failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>C. The SN Visit Report dated 12/29/15 by employee G, RN, narrative note stated, "Labs drawn from right antecubital in first attempt using butterfly needle." The notes failed to evidence the physician was notified to obtain an order</p>		<p>drawn from the PICC line or peripherally. The individual clinician identified on 12/29/15 was counseled, sent to the home to remeasure, and instructed to update patient's surgeon during the re-visit survey on 12/29/15. An audit will be performed by the administrator/designee on 100% of all PICC line visits to verify that PICC measurements are consistent and physician notification has occurred for any discrepancy until 100% compliance is met for 4 consecutive weeks. After 4 weeks of 100% compliance the audit will decrease to 10% quarterly and will be completed through the clinical record review process. (exhibit 2 and 3)</p>		

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	<p>for antecubital lab draws.</p> <p>D. During interview on 12/29/15 at 3:05 PM, the Administrator indicated the supervisor had not yet locked the POC orders, and if the referral does not specifically say to draw the labs via the PICC line, then we draw peripherally.</p> <p>E. The referral documents from the Cleveland Clinic, dated 12/24/15, stated "Additional Comments: Catheter care per protocol. Routine lab draws may be done on Tuesday if Monday is a holiday." The referral documents failed to evidence antecubital lab draw orders.</p> <p>2. The agency's undated policy titled "Responding to Complications of PICC Lines," # I-230 stated, "Catheter Tip Migration: It is possible for any type of central venous catheter to migrate to another location while in the body. Certain types of clients are more susceptible to catheter tip migration. ... Clients who are very active. ... Response: Measure and document the external length of the catheter with each dressing change. This will assist in early detection. Periodic catheter tip verification by x-ray study should be performed on all long-term, centrally placed catheters."</p>			

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N 0547 Bldg. 00	<p>410 IAC 17-14-1(a)(1)(H) Scope of Services 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: (H) Accept and carry out physician, chiropractor, podiatrist, dentist and optometrist orders (oral and written). Based on record review, and interview, the agency failed to ensure the plan of care (POC) included orders for drawing labs from the antecubital cite for 1 of 1 record review of patients with a Peripherally Inserted Central Catheter (PICC) line. (# 1)</p> <p>Findings include:</p> <p>1. The clinical record of patient # 1 was reviewed on 12/29/15. Start of care date 12/26/15, contained a POC dated 12/26/15-2/23/16 with orders for Skilled Nursing (SN) 4 times a week for 1 week, then 1 time a week for 5 weeks. SN for: ... Instruct on lab/venipuncture procedure, obtain lab from PICC using sterile gloves. SN to change PICC dressing and measure PICC using sterile technique every week and as needed times 3 for soiled or loose dressing. Record PICC line measurements weekly.</p>	N 0547	To ensure compliance with N547, all RN's and LPN's will be educated by 1/22/16 on the requirement to have a clear, detailed order for all PICC line patients that states clearly if labs are to be drawn from the PICC line or peripherally. 100% of all visits that include PICC care will be audited to verify there is an order that clearly states that labs are to be obtained via PICC or peripherally until 100% compliance is met for 4 consecutive weeks. After 4 weeks of 100% compliance the	01/22/2016

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	<p>A. The POC failed to evidence the agency obtained orders to draw labs via the antecubital cite.</p> <p>B. The SN Visit Report dated 12/28/15 by employee F, RN, narrative note stated, "PICC catheter measurement at 1 centimeter. ... attempted lab draw x 3 to right antecubital, unsuccessful, will send alternate nurse to perform same on 12/29." The record failed to evidence the physician was notified they were not using the PICC line for lab draws, and failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>C. The SN Visit Report dated 12/29/15 by employee G, RN, narrative note stated, "Labs drawn from right antecubital in first attempt using butterfly needle." The notes failed to evidence the physician was notified to obtain an order for antecubital lab draws.</p> <p>D. During interview on 12/29/15 at 3:05 PM, the Administrator indicated the supervisor had not yet locked the POC orders, and if the referral does not specifically say to draw the labs via the PICC line, then we draw peripherally.</p> <p>E. The referral documents from the</p>		audit will decrease to 10% quarterly and will be completed through the clinical record review process. (Exhibit 2)		

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	<p>Cleveland Clinic, dated 12/24/15, stated "Additional Comments: Catheter care per protocol. Routine lab draws may be done on Tuesday if Monday is a holiday." The referral documents failed to evidence antecubital lab draw orders.</p> <p>2. The agency's policy titled "Care Plans," # C-660, reviewed March 2015 stated, "3. The Care Plan shall include, but not be limited to: a. Problems and needs identified related to diagnosis. ... c. A list of specific interventions with plans for implementation. ... 4. The physician Plan of Care may be used as a care plan if specific interventions are clearly identified for home care staff to address client care needs. ... State of Indiana Addendum: ... The nursing plan of care will contain: 1. A plan of care and appropriate patient identifying information, ... 5. Medications, diet, and activities."</p> <p>3. The agency's policy titled "Coordination of Client Services," # C-360, reviewed March 2015 stated, "3. After the initial assessment, the admitting Registered Nurse/Therapist shall communicate the findings of the initial visit with the Clinical Supervisor to ensure: a. Clarification of the plan of care orders. ... e. Need for other services and/or referral to community</p>			

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

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