

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0016	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/04/2010
NAME OF PROVIDER OR SUPPLIER NURSING ENTERPRISES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 817 VARNUM STREET, NE WASHINGTON, DC 20017		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
H 000	INITIAL COMMENTS An annual survey was conducted from May 3, 2010, through May 4, 2010, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a sample of twenty (20) clinical records from a census of two hundred-seventy-eight (278) patients, twenty (20) personnel files from a census of two hundred-fourteen (214) employees and five (5) home visits. The findings of the survey were based on observations in the home, interviews with agency staff and patient interviews as well as a review of patient and administrative records.	H 000	<i>Received 6/23/10</i> GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH HEALTH REGULATION ADMINISTRATION 825 NORTH CAPITOL ST., N.E., 2ND FLOOR WASHINGTON, D.C. 20002	
H 053	3903.2(c)(1) GOVERNING BODY The governing body shall do the following: (c) Review and evaluate, on an annual basis, all policies governing the operation of the agency to determine the extent to which services promote patient care that is appropriate, adequate, effective and efficient. This review and evaluation must include the following: (1) The evaluation shall include feedback from a representative sample consisting of either ten percent (10%) of total District of Columbia patients or forty (40) District of Columbia patients, whichever is less, regarding services provided to those patients. This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency (HCA) failed to include feedback from a representative sample consisting of either ten percent (10%) of the total District of Columbia patients or forty (40)	H 053		

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 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]*
 STATE FORM 6896 SLNH11 TITLE: *President/Administrator* (X6) DATE: *6-23-10*
 If continuation sheet 1 of 54

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H 053	<p>Continued From page 1</p> <p>District of Columbia patients, whichever is less, regarding services provided to those patient's in it's annual evaluation report.</p> <p>The finding includes:</p> <p>On May 3, 2010 at 12:17 p.m., the surveyor requested the annual report for review and the feedback to be included from either ten percent (10%) the total District of Columbia patients or forty (40) District of Columbia patients, whichever is less, regarding services provided to those patient's in it's annual evaluation report.</p> <p>Interview with the President of HCA on May 3, 2010, at approximately 12:19 p.m. revealed the Governing Body completed an evaluation of the Policies and Procedures, but instead of the ten (10%) required they did feedback that included six percent (6%) of the total of the agency's patients.</p> <p>Record review of a document entitled "Minutes of Meeting Professional advisory Committee" dated December 3, 2009 on the aforementioned date at 12:24 p.m. revealed that six percent (6%) of patients were "surveyed" instead of the ten percent (10%) required.</p> <p>During a face to face interview with the President on May 3, 2010 at approximately 7:25 p.m., acknowledged that the above named document was the agency's recent annual report and that it failed to provide the ten percent (10%) patient feedback as required.</p> <p>At the time of the survey, HCA failed to include feedback from a representative sample consisting of either ten percent (10%) of the total District of Columbia patients or forty (40) District</p>	H 053	<p>The agency will ensure that all samples for patient satisfaction surveys have the correct representative sample of 10% or 40 patients.</p> <p>Patient satisfaction surveys are conducted quarterly. The report quoted was for the survey report for the fourth quarter and not the annual summary of 4 quarters..</p> <p>The Administrator will verify that the statistics for the annual report presented to PAC, represents all 4 quarters as a comparative analysis to see the level of improvement or dissatisfaction each quarter.</p> <p>The Administrator will also ensure that staff conducting the survey, reach the required 10% or at least 15 patients each quarter to ensure at least feedback is obtained from the required 10% of patients for the year or at least 40 patients..</p>	9/1/10
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H 053	Continued From page 2 of Columbia patients, whichever is less, regarding services provided to those patient's in it's annual evaluation report.	H 053		
H 121	<p>3906.1(b) CONTRACTOR AGREEMENTS</p> <p>If a home care agency offers a service that is provided by a third party or contractor, agreements between the home care agency and the contractor for the provision of home care services shall be in writing and shall include, at a minimum, the following:</p> <p>(b) The location where services are to be provided;</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency (HCA) failed to include the location where services are to be provided in it's "Contractual Agreements" for nine (9) of nine (9) contracts reviewed.</p> <p>The findings include:</p> <p>Record review on May 3, 2010 at approximately 1:43 p.m. revealed that the agency had nine (9) contractual agreements. Continued review of the contractual agreements revealed that the HCA entered into contractual agreements to provide nursing services, ancillary services, clinical management, home health/personal care aide services, and physical therapy services. Each of the contracts failed to disclose the location in which the aforementioned services were to be provided.</p> <p>During a face to face interview on March 3, 2010,</p>	H 121	<p>The Contractual Agreements for all contract staff will be reviewed and revised to reflect that each contract for the discipline will identify that the specific services- nursing services, ancillary services, clinical management/home health personal care aide services and physical therapy services will be provided to clients in all wards of the District of Columbia</p>	9/1/10

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H 121	Continued From page 3 beginning at 7:25 p.m., the President acknowledged the findings. At the time of the survey, the HCA failed to ensure each of the contracts disclosed the location in which the aforementioned services were to be provided.	H 121		
H 122	3906.1(c) CONTRACTOR AGREEMENTS If a home care agency offers a service that is provided by a third party or contractor, agreements between the home care agency and the contractor for the provision of home care services shall be in writing and shall include, at a minimum, the following: (c) The manner in which services will be controlled, coordinated and evaluated by the primary home care agency; This Statute is not met as evidenced by: Based on record review and interview, it was determined that the Home Care Agency (HCA) failed to include the manner in which services will be controlled, coordinated and evaluated by the primary home care agency for seven (7) of nine (9) contract agreements reviewed. The finding sinclude: Record review on May 3, 2010 at approximately 2:27 p.m. revealed that the agency had nine (9) contractual agreements. Continued review of the contractual agreements revealed that the HCA entered into contractual agreements to provide nursing services, ancillary services, clinical management, home health/personal care aide services, and physical therapy services. Each of	H 122	The contractual Agreements will be reviewed and revised to reflect the manner in which each specific contractor services – nursing services, ancillary services, clinical management, home health/ personal care aide services and physical therapy services will be controlled coordinated and evaluated. Each contract Agreement will identify the specific services the contractor will provide, how and who will assign the services, the responsibilities of contractor for meeting contractual obligations monitoring of contractor compliance with requirements, penalties for non-compliance and reporting of violators to the professional bodies for neglect of duty to clients, and/or termination of services for contractors who do not comply with contractual obligations.	9/1/10

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H 122	Continued From page 4 the contracts failed to include the manner in which services will be controlled, coordinated and evaluated by the primary home care agency. During a face to face interview on March 3, 2010, beginning at 7:25 p.m., the President acknowledged the findings. At the time of the survey, the HCA failed to ensure each of the contracts included the manner in which services will be controlled, coordinated and evaluated by the primary home care agency.	H 122	The Administrator and Director of Professional Services or designee will provide supervision of contractors to monitor compliance with contractual obligations. Contractors who fail to meet contractual obligations will not continue to be hired by the agency.	7/31/10
H 125	3906.1(f) CONTRACTOR AGREEMENTS If a home care agency offers a service that is provided by a third party or contractor, agreements between the home care agency and the contractor for the provision of home care services shall be in writing and shall include, at a minimum, the following: (f) The procedures used for managing and monitoring the work of personnel employed on a contractual basis; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency (HCA) failed to include the procedures for managing and monitoring the work of personnel employed on a contractual basis for (8) of (9) contract agreements reviewed. The findings include: Record review on May 3, 2010 at approximately 1:40 p.m. revealed that the agency had (9)	H 125	The Contract Agreements will be reviewed and revised to reflect the procedures for managing and monitoring the work of contractors. The procedures will include, what will be monitored, who will monitor the performance and penalties for non-compliance with contractual agreements. Specifically, the procedure will include the on-going review of contractors performance during the assignment, including, timeliness of documentation submission, efficiency, completeness, attention to detail, compliance with standards, policies and procedures and outcomes achieved. At the conclusion of each assignment the contractors performance is evaluated by the Director of Professional Services in consultation with Intake /Staffing Coordinator, Medical Records and	7/31/10

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H 125 Continued From page 5

contractual agreements. Continued review of the contractual agreements revealed that the HCA entered into contractual agreements to provide nursing services, ancillary services, clinical management, home health/personal care aide services, and physical therapy services. Each of the contracts failed to include the procedures for managing and monitoring the work of personnel employed on a contractual basis.

During a face to face interview on March 3, 2010, beginning at 7:25 p.m., the President acknowledged the findings.

At the time of the survey, the HCA failed to ensure each of the contracts included the procedures for managing and monitoring the work of personnel employed on a contractual basis.

H 125

H 148 3907.2(d) PERSONNEL

Each home care agency shall maintain accurate personnel records, which shall include the following information:

(d) Documentation of current CPR certification, if required;

This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to maintain accurate personnel records, which included documentation of current CPR certification for three (3) of twenty (20) employees in the sample. (Staff #19, Staff #13, and Staff #17)

The findings include:

H 148

The system for ensuring the monitoring and maintenance of the 214 current employee files will be reviewed and revised to ensure all 214 employee files are maintained in an up-to-date manner.

The Administrator will aggressively recruit and hire an experienced Human Resources Coordinator to manage the Employee files. The Administrator will also contract to computerize the employee data base for more efficient data management.

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H 148	Continued From page 6 Review of the personnel records on May 3, 2010, beginning at approximately 5:05 p.m., revealed Staff #17's CPR certification had expired April 24, 2009, Staff #13's CPR certification had expired on October 2009 and Staff 19's CPR certification had expired May 14, 2009. During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged that the aforementioned staff did not have current CPR certification in their personnel records. At the time of the survey, there was no documented evidence of current CPR certifications in the aforementioned personnel records.	H 148	Files will be monitored by the HR Coordinator monthly and the employee/contractor will be issued warning reminders when required documents are due to expire the upcoming month so that the employee contractor has enough notice to obtain the required documents before they expire.. Policy 900.03 outlines policy for Maintenance of Personnel Records attached. The Administrator will receive reports from the HR Coordinator monthly on the status of employee files. And report submitted to PAC as part of the PI program.	5/11/10
H 149	3907.2(e) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (e) Health certification as required by section 3907.6; This Statute is not met as evidenced by: Based on a review of the Home Care Agency's (HCA) personnel records and interview, the agency failed to ensure one(1) of twenty (20) staff had a current health certification. (Staff #11) The finding includes: Review of the HCA's personnel records on May 3, 2010, beginning at 5:49 p.m., revealed Staff #11's personnel records failed to evidence a Health Certificate.	H 149	As for H 148	

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H 149	<p>Continued From page 7</p> <p>During the face-to-face interview on March 23, 2010, at approximately 7:25 p.m., with the President, it was verified that Staff #11's personnel records failed to evidence a Health Certificate.</p> <p>At the time of the survey, there was no documented evidence of a health certificate for Staff #11.</p>	H 149	<p>The Administrator will aggressively recruit and hire an experienced Human Resources Coordinator to manage the Employee files. The Administrator will also contract to computerize the employee data base for more efficient data management.</p> <p>Files will be monitored by the HR Coordinator monthly and the employee/contractor will be issued warning reminders when required documents are due to expire the upcoming month so that the employee contractor has enough notice to obtain the required documents before they expire.. Policy 900.03 outlines policy for Maintenance of Personnel Records attached.</p> <p>The Administrator will receive reports from the HR Coordinator monthly on the status of employee files. And report submitted to PAC as part of the PI program.</p>	9/30/10
H 152	<p>3907.2(h) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(h) Copies of completed annual evaluations;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the Home Health Care Agency (HHCA) failed to maintain accurate personnel records, which included documentation of completed annual evaluations for six (6) of twenty (20) employees in the sample. (Staff #2, Staff #3, Staff #9, Staff #11, Staff #12, Staff #19, and #17).</p> <p>The findings include:</p> <p>On May 3, 2010, beginning at approximately 1:55 p.m., review of Staff #2, Staff #3, Staff #9, Staff #11, Staff #12, Staff #17, and Staff #19's personnel records revealed that there was no evidence of current annual evaluations completed for the aforementioned personnel.</p> <p>During a face to face interview with the President</p>	H 152	<p>Supervisory staff will be counseled re missing annual evaluations on staff supervised</p>	7/1/10

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H 152	Continued From page 8 on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged that the aforementioned personnel did not have any annual evaluations. At the time of the survey, the HCA failed to provide documented evidence of annual evaluations for the aforementioned staff.	H 152	The HR Coordinator will provide a monthly report to the Administrator on the status of annual evaluations as a result of monthly audits of the personnel files.	
H 157	3907.2(m) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (m) Documentation of acceptance or declination of the Hepatitis Vaccine; and... This Statute is not met as evidenced by: Based on record review and interview, it was determined that the Home Care Agency (HCA) failed to maintain personnel records, which included documentation of a acceptance or declination of the Hepatitis Vaccine for three (3) of twenty (20) employees included in the sample. (Staff #13, Staff #15, and Staff #18) The findings include: Review of Staff #13, Staff #15 and Staff #18's personnel records on May 3, 2010, beginning at approximately 5:03 p.m., revealed no documentation of acceptance or declination of the Hepatitis Vaccine. During a face-to-face interview with the President on May 3, 2010, at approximately 7:25 p.m., it was acknowledged there was no documentation of an acceptance or declination of the Hepatitis	H 157	See H 146, H 148	

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H 157	<p>Continued From page 9</p> <p>Vaccine on file for Staff #13, #15, and #18.</p> <p>At the time of the survey, the HCA failed to provide documented evidence of an acceptance declination of the Hepatitis Vaccine on file for Staff #13, #15, and #18.</p>	H 157		
H 158	<p>3907.2(n) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(n) Documentation of liability insurance, if applicable.</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the Home Care Agency (HCA) personnel records failed to ensure documentation of liability insurance for two (2) of twenty (20) staff, included in the sample. (Staff #13 and Staff #10).</p> <p>The findings include:</p> <p>Interview with the President on May 3, 2010, at approximately 6: 11 p.m., revealed that Staff #13 and Staff #10 were independent contractors. Review of the personnel records failed to evidence documentation of liability insurance for the aforementioned contracted staff.</p> <p>During a face to face exit interview with the President during the exit interview on May 3, 2010 beginning at 7:25 p.m., it was acknowledged that the personnel records for the Staff #13 and Staff #10 failed to evidence</p>	H 158	<p>Staff who have no current liability Insurance or car insurance will be suspended from patient assignment until they submit current insurances. Intake will be advised not to assign these staff members until information is received from the Administrator.</p> <p>The HR designee will receive the current documents and notify the Administrator of the receipt of the documents so that Intake can receive clearance to assign them patient care responsibilities.</p>	

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H 158	Continued From page 10 documentation of liability insurance. At the time of the survey, the HCA failed to provide documented evidence of of liability insurance for Staff #13, and Staff #10.	H 158		
H 163	3907.7 PERSONNEL Each employee shall be screened for communicable disease annually, according to the guidelines issued by the federal Centers for Disease Control, and shall be certified free of communicable disease. This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to ensure each employee was screened for communicable disease annually, according to the guidelines issued by the federal Centers for Disease Control, and was certified free of communicable disease for three (3) of twenty (20) employees in the sample. (Staff #2, Staff #19 and Staff #18). The findings include: 1. Recrd review of Staff #2's personnel file on May 3, 2010, at approximately 2:08 p.m., revealed the employee's last annual screening for communicable disease was October 29, 2008. During a face to face interview with the facility's President on May 3, 2010, at approximately 7:25 p.m., it was acknowledged that Staff #2 did not have a current annual screening for communicable disease in the personnel record. At the time of the survey, there was no documented evidence of a current annual	H 163	Policy 400.02 Employee Health Requirements outlines what health Records must be collected on hire and maintained for continued employment to ensure staff with communicable diseases do not expose clients to contagious infections. Policy 400.09.is attached The HR designee will ensure that all files are current with all requirements through ongoing review of the files . On a monthly basis will compile a list of records will deficiencies including documents due to expire . Staff will be sent alert messages to provide renewal information before the document has expired. Staff who fail to provide the documents within the set deadline will be suspended/ terminated- or not assigned cases until the required documents have been received. The Administrator will notify Intake when the staff member is cleared to accept cases.	7/1/10 01/19/10

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H 163	Continued From page 11 screening for communicable disease in Staff #2's personnel record. 2. Record review of Staff #18's personnel file on May 3, 2010, at approximately 2:08 p.m., revealed the employee last annual screening for communicable diseases was June 4, 2007. During a face to face interview with the facility's President on May 4, 2010, at approximately 7:25 p.m., it was acknowledged that Staff #18 did not have a current annual screening for communicable diseases in the personnel record. At the time of the survey, there was no documented evidence of a current annual screening for communicable disease in Staff #18's personnel record. 3. Record review of Staff #19's personnel file on May 3, 2010, at approximately 2:08 p.m., revealed the employee's last annual screening for communicable disease was October 7, 2003. During a face to face interview with the facility's President on May 4, 2010, at approximately 7:25 p.m., it was acknowledged that Staff #19 did not have a current annual screening for communicable disease in the personnel record. At the time of the survey, there was no documented evidence of a current annual screening for communicable disease in Staff #19's personnel record.	H 163	Reports of the status of employee files will be monitored as part of the PI program and quarterly reports presented to PAC. PAC will monitor the level of improvement and make recommendations as appropriate .	7/1/10 d ongoing
H 170	3907.11 PERSONNEL Each home care agency shall ensure that each employee or contract worker shall present a valid agency identification prior to entering the home of	H 170		

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H 170	<p>Continued From page 12</p> <p>a patient.</p> <p>This Statute is not met as evidenced by: Based on an observation and interview, it was determined that the Home Care Agency (HCA) failed to ensure that one (1) of the five (5) home visit staff presented valid agency identification prior to entering the home of a patient. (Staff #4).</p> <p>The finding includes :</p> <p>Observations during a home visit of Patient #15 on May 4, 2010, at approximately 12:00 p.m., revealed that Staff #4 did not have valid agency identification on their person.</p> <p>During a face to face interview with with Staff #4 on May 4, 2010 revealed that she had valid agency identification, but had left it home on the day of the survey.</p> <p>At the time of the survey, the HCA failed to ensure Staff #4 had valid agency identification before entering Patient #15's home on May 4, 2010.</p>	H 170	<p>Staff are issued agency identification on hire and are instructed to wear agency identification on all home visits.</p> <p>The wearing of identification on home visits will be reviewed by supervisory staff during supervisory visits and joint visits. Staff not wearing identification will be counseled and checked randomly to ensure compliance with the policies..</p> <p>Staff will be informed in staff meeting to be held in July of the findings from the survey and advised to adhere to the policy or disciplinary actions will be taken to include termination.</p>	7/15/10
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H 190	<p>3908.1(a) ADMISSIONS</p> <p>Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:</p> <p>(a) Admission criteria and procedures;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the Home</p>	H 190		
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H 190	<p>Continued From page 13</p> <p>Care Agency (HCA) failed to ensure their Admissions policy included criteria and procedures.</p> <p>Review of the HCA's Admission's Policy on May 3, 2010 beginning at approximately 11:49 a.m. revealed criteria and procedures for patients to be admitted was excluded from the agency's policy.</p> <p>During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged the HCA's admissions policy failed to include the criteria and procedures for patients to be admitted for services.</p> <p>At the time of the survey, there was no documented evidence the HCA ensured their admissions policy included the criteria and procedures for patients to be admitted for services.</p>	H 190	<p>The agency's policy 200.01 addresses the Medicare Conditions of Participation for Home Care Agencies and lists the specific criteria for admission. Policy 200.01 is attached for review. It includes the specific criteria for admission of Medicare, Medicaid and private insurance cases.</p> <p>The Administrative Policy 600.00 Plan For The Provision off home care Services provides a description of services provided, scope of services, See policy 600.00 p.2-6</p> <p>Patients are given the Patient's Handbook on admission by the admitting clinician which has the listed cost of services – p. In the patient's Handbook, p23.</p>	
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H 191	<p>3908.1(b) ADMISSIONS</p> <p>Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:</p> <p>(b) A description of the services provided;</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency failed to include a description of the services provided in it's Admissions Policy.</p> <p>The finding includes:</p>	H 191		
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H 191 Continued From page 14

A record review on May 3, 2010, beginning at approximately 11:49 a.m. revealed the HCA did not include in their policy a description of the services that would be provided.

During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged that the admissions policy did not include a description of the services that would be provided.

At the time of the survey, there was no documented evidence that the agency's admissions policy included a description of the services that would be provided.

H 191

Patients are given the Patient's Handbook on admission by the admitting clinician which has the listed cost of services – p. In the patient's Handbook, p23.

The Service Agreement patient signs indicates if Medicare /Medicaid there is no charge. private insurers have a negotiated rate and the patient has no co-pay. Policy 100.20 lists the financial policy and billing procedures.

H 192 3908.1(c) ADMISSIONS

Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:

(c) The amount charged for each service;

This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency failed to include the amount charged for each service in it's Admissions Policy.

The finding includes:

A record review on May 3, 2010, beginning at approximately 11:49 a.m. revealed the HCA did not include the amount charged for each service in their Admissions Policy.

During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25

H 192

Only private pay patients have a charge for services, and this is covered in the policy.

Staff will be reminded to complete the Service Agreement to ensure it lists there is 100% payment by Medicare and Medicaid and the patient has 0% to pay. Managed care clients have no – co-pay due to a negotiated flat rate and patients have no co-pay.

The Service Agreement will be monitored to ensure it is completed as per policy. by the Nurse Reviewer during the admission review and staff counseled re completion of the service agreement per polices.

7/1/10

7/1/10

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H 192 Continued From page 15
p.m., it was acknowledged that the admissions policy did not include a description of the services that would be provided.

At the time of the survey, there was no documented evidence that the agency's admissions policy included the amount charged for each service.

H 192

H 193 3908.1(d) ADMISSIONS
Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:

(c) Policies governing fees, payment and refunds;

This Statute is not met as evidenced by:
Based on interview and record verification the Home Care Agency (HCA) failed to ensure written policies on admissions included policies governing fees, payment and refunds.

The finding includes:

Review of the Admission Policy on May 3, 2010, beginning at approximately 11:49 a.m., revealed the HCA did not ensure the admission policy included policies governing fees, payment and refunds.

During a face to face interview with the President on May 3, 2010, at approximately 7:25 p.m., it was acknowledged the HCA did not ensure the admission policy included policies governing fees, payment and refunds.

At the time of the survey, there was no

H 193

Policy 100.23 addresses the agency's admission policy re fees, payment and refunds.

The patient handbook page 23 also addresses this for the patient and is discussed with the patient during admission. patients sign to acknowledge receipt of the information,
Policy 100.23 and the Patient handbook page 23 in attached.

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H 193	Continued From page 16 documented evidence the HCA ensured the admission policy included policies governing fees, payment and refunds.	H 193		
H 194	<p>3908.1(e) ADMISSIONS</p> <p>Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:</p> <p>(e) Advance directives;</p> <p>This Statute is not met as evidenced by: Based on interview and record verification the Home Care Agency (HCA) failed to ensure written policies on admissions included advance directives.</p> <p>The finding includes: 3, 2010, beginning at approximately 11:49 a.m., revealed the HCA did not ensure the admission policy included advance directives.</p> <p>During a face to face interview with President on May 3, 2010, at approximately 7:25 p.m., it was acknowledged the HCA did not ensure the admission policy included advance directives.</p> <p>At the time of the survey, there was no documented evidence their HCA ensured the admission policy included advance directives.</p>	H 194	<p>The agency's policy 100.03 Advance Directive is the agency's policy on Advanced Directive. it is given to patients in the Handbook and the patient's status of Advanced Directive is assessed on admission and information provided. on page 17. of the handbook. Patients sign that they have received the information and this is submitted with the admission paperwork. The policy states that they are not discriminated against whether they have executed an advanced directive or not. Policy 100.03 is attached.</p>	
H 195	<p>3908.1(f) ADMISSIONS</p> <p>Each home care agency shall have written policies on admissions, which shall include, at a minimum, the following:</p>	H 195		

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H 195	<p>Continued From page 17</p> <p>(f) Do Not Resuscitate orders;</p> <p>This Statute is not met as evidenced by: Based on interview and record verification the Home Care Agency (HCA) failed to ensure written policies on admissions included Do Not Resuscitate Orders.</p> <p>The finding includes:</p> <p>Review of the Admission Policy on May 3, 2010, beginning at approximately 11:49 a.m., revealed the HCA did not ensure the admission policy included Do Not Resuscitate Orders.</p> <p>During a face to face interview with President on May 3, 2010, at approximately 7:25 p.m., it was acknowledged the HCA did not ensure the admission policy included Do Not Resuscitate Orders.</p> <p>At the time of the survey, there was no documented evidence the HCA ensured the admission policy included Do Not Resuscitate Orders.</p>	H 195	<p>The agency's policy 100.21- DO Not. Resuscitate addresses orders for DNR. page 3 specifically addresses all DNR orders. The policy is attached..</p>	
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H 220	<p>3909.1 DISCHARGES TRANSFERS & REFERRALS</p> <p>Each home care agency shall have written policies that describe transfer, discharge, and referral criteria and procedures.</p> <p>This Statute is not met as evidenced by: Based on record review and interview the Home Care Agency (HCA) failed to ensure their Discharges Policy and Procedures included a written notice for the patient to be notified of</p>	H 220		
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H 220	Continued From page 18 discharge or referral no less than seven (7) calendar days prior to the action. The finding includes: Review of the HCA's Policies and Procedures for Discharges, Transfers and Referrals on May 3, 2010, at approximately 11:41 a.m. revealed the aforementioned policy did not include a written notice for the patient to be notified of discharge or referral no less than seven (7) calendar days prior to action. During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged the Discharges, Transfers and Referrals policy failed to include a written notice for the patient to be notified of discharge or referral no less than seven (7) calendar days prior to action. There was no documented evidence the HCA ensured the Discharges, Transfers and Referrals policy included a written notice for the patient to be notified of discharge or referral no less than seven (7) calendar days prior to action.	H 220	Policy 200.15 addresses the agency's policy on discharges, transfers, and the issue of Form 10123 to Medicare patients 7 days before discharge or transfer. The specific policy on the HHABN is policy 100.23. The patient's handbook also on p. 15 lists under discharge that they will be notified at least 7 days of the termination of Medicare services and their right to appeal to the QIO. Disciplines discharging patients will be reminded to include a copy of the signed Form 10123 with their discharge paperwork. . The Discharge Summary has a space to indicate that HHABN notice was issued. . Forms attached with discharge policy.	
H 262	3911.2(b) CLINICAL RECORDS Each clinical record shall include the following information related to the patient: (b) Source of referral, including date of discharge if from a hospital or extended care facility; This Statute is not met as evidenced by: Based on interview and record review, the facility's clinical record failed ensure include the source of referral for six (6) of twenty (20)	H 262		

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H 262 Continued From page 19
patients in the sample. (Patient #5, #6, #9, #10, #11 and #18)

The finding includes:

Review of Patient #5, #6, #9, #10, #11 and #18's medical record on May 3, 2010, between 1:50 p.m. and 6:15 p.m., revealed the source of referral was not in the medical record.

During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the source of referral was not in Patient #5, #6, #9, #10, #11 and #18's medical record.

There was no documented evidence the source of referral was documented in the medical record.

H 262 Deficiency discussed with the Intake Coordinators. Intake Form will be monitored by the Nurse Reviewer during the admission review and document returned to the Intake Coordinators to complete.

The Administrator will be notified by the Nurse reviewer of continuing problems if issue remains so that she can take disciplinary actions to correct problem.

5/5/10

5/1/10 and ongoing

H 279 3911.2(s) CLINICAL RECORDS

Each clinical record shall include the following information related to the patient:

(s) Documentation of training and education given to the patient and the patient's caregivers.

This Statute is not met as evidenced by:
Based on interview and record review, the Home Care Agency (HCA) failed to ensure documentation of training and education given to the patient and the patient's caregivers for three (3) of twenty (20) patients in the sample. (Patient #6, #7, #9)

The findings include:

1. Review of Patient # 6's Plan of Care (POC)

H 279 The deficiency was discussed with the involved staff and staff reminded to document patient teaching done and to include a copy of the handouts provided to patients with the visit note.

The agency will develop patient teaching tools on common topics that the staff can use to facilitate documentation of teaching. the Internet will be accessed to obtain material that can be copies for use by staff.

Documentation of patient teaching will be monitored as part of the PI activity for the agency and reports of compliance submitted to PAC quarterly.

5/1/10

9/30/10

5/1/10 and ongoing

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H 279	<p>Continued From page 20</p> <p>dated March 25, 2010, through May 23, 2010, on May 3, 2010, at approximately 1:50 p.m., revealed the patient has diagnoses that included obstructive chronic bronchitis with acute exacerbation, end stage renal disease, asthma, insertion of permanent pacemaker, hypertension and coronary atherosclerosis. Patient #6 was on anticoagulant therapy [Lovenox 50 mg subcutaneously for five (5) days and Warfarin 5mg by mouth three (3) times a week.] Further review revealed the skilled nurse was to instruct the patient in anticoagulant therapy including bleeding precautions, signs and symptoms of unusual bleeding, vitamin dietary precautions.</p> <p>Review of Patient # 6's Nursing Intervention Notes dated March 25, March 28, April 1, April 6, April 29 and May 2, on May 11, 2010, at approximately 3:35 p.m., revealed no training and education given to the patient on signs and symptoms of unusual bleeding and vitamin dietary precautions.</p> <p>During a face to face interview with the RN #1 on May 11, 2010, at approximately 3:46 p.m., the surveyor informed the skilled nurse of the above and it was acknowledged the medical records did not include any training and education given to Patient #6 on signs and symptoms of unusual bleeding and vitamin dietary precautions.</p> <p>During a face to face interview in the home of Patient #6 and her caregiver on May 4, 2010, at approximately 11:55 a.m., revealed the skilled nurse had only trained and educated Patient #6 and her caregiver on medication management.</p> <p>There was no documented evidence of training and education given to the patient and the patient's caregivers on signs and symptoms of</p>	H 279		

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H 279	<p>Continued From page 21</p> <p>unusual bleeding and vitamin dietary precautions.</p> <p>2. Review of Patient # 7's POC dated March 26, 2010, through May 24, 2010 on May 3, 2010, at approximately 2:20 p.m., revealed the patient has diagnoses that included amputation and disarticulation of the right index finger and an open wound of great right toe. Further review revealed the patient's caregiver was to be instructed to "cleanse wound with Normal Saline (NSS), pat dry, apply Bacitracin and cover with 4x4 (four by four) gauze, secure with tape".</p> <p>Review of Patient # 7's Nursing Intervention Notes dated March 29, March 31, April 2, April 6, April 8, April 12, April 14, and April 19, 2010 at approximately 2:25 p.m., revealed no training and education given to the patient's caregiver on wound care management.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the above and it was acknowledged the medical records did not include any training and education given to Patient #7's caregiver on wound care management.</p> <p>During a face to face interview in the home of Patient #7 and his caregiver on May 4, 2010, at approximately 10:45 a.m., it was revealed Patient #7's caregiver "just watched how the nurse dressed my brother's wound". Further interview revealed the skilled nurse did not actually provided caregiver any training and education to Patient #7's caregiver on wound care management.</p> <p>There was no documented evidence of training and education given to the patient and the</p>	H 279		
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H 279	<p>Continued From page 22</p> <p>patient's caregiver on wound care management.</p> <p>3. Review of Patient # 8's POC dated April 17, 2010, through June 15, 2010 on May 3, 2010, at approximately 2:45 p.m., revealed the patient has diagnoses that included cerebrovascular disease, muscle weakness, acute kidney failure, chronic hypotension, depressive disorder, electrolyte and fluid disorder and pure hypercholesterolemia. Further review revealed the patient or caregiver was to be instructed to teach medications including dosage, scheduling and side effects, signs and symptoms of cardiac complications and energy conservation techniques.</p> <p>Review of Patient # 7's Nursing Intervention Notes dated March 29, April 23, April 2, April 26, April 28, April 12, April 14, and April 19, 2010 at approximately 2:25 p.m., revealed no specific training and education given to the patient or caregiver on medication management and no documented training and education given to the patient or caregiver on side effects, signs and symptoms of cardiac complications or energy conservation techniques.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the above and it was acknowledged the medical records did not include specific training and education given to the patient or caregiver on medication management or on side effects, signs and symptoms of cardiac complications or energy conservation techniques</p> <p>During a face to face interview in the home of Patient #8 on May 4, 2010, at approximately 9:30 a.m., revealed the "nurse only takes my blood pressure and fills my pill box".</p>	H 279		
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H 279	<p>Continued From page 23</p> <p>There was no documented evidence of training and education given to the patient according to the POC.</p> <p>4. Review of Patient # 9's Plan of Care (POC) dated March 11, 2010, through May 9, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed the patient has diagnoses that include cerebrovascular disease, muscle weakness, congestive heart failure, Diabetes Mellitus Type II, osteoarthritis, morbid obesity and hypertension. Further review revealed the skilled nurse was to instruct the patient on medication administration, signs and symptoms of cardiac complications, measures to reduce peripheral edema, and measures to prevent skin breakdown.</p> <p>Review of Patient # 9's Nursing Intervention Notes dated April 30 and May 5, on May 3, 2010, at approximately 3:00 p.m., revealed no documented training and education given to the patient on medication administration, signs and symptoms of cardiac complications, measures to reduce peripheral edema, or measures to prevent skin breakdown.</p> <p>During a home visit to Patient #9 on May 4, 2010, at approximately 12:35 p.m., the patient was observed sitting on the side of the bed with both legs were dangling off the bed towards the floor. Further observation revealed the patient had bilateral pitting edema in her legs and feet.</p> <p>During a face to face interview with Patient #9 in her home on May 4, 2010, at approximately 12:40 p.m., the patient stated the skilled nurse did not instruct her on medication administration, signs and symptoms of cardiac complications, or</p>	H 279		
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H 279	Continued From page 24 measures to reduce peripheral edema, and skin breakdown. Further interview revealed "the nurse only takes my blood pressure and blood sugar." During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the above and it was acknowledged the medical records did not include specific training and education given to the patient or caregiver according to the POC.	H 279		
H 292	3912.2(b) PATIENT RIGHTS & RESPONSIBILITIES Each home care agency shall develop policies to ensure that each patient who receives home care services has the following rights: (b) To control his or her own household and life style; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Care Agency (HCA) failed to include the patient has the right to control his or her own household and life style in it's Patient Rights and Responsibilities Policy. The finding includes: Review of the agency's policy and procedures on May 3, 2010 at approximately 12:53 p.m. revealed the HCA failed to include in their Patient Rights and Responsibilities policy the patient has the right to control his or her own household and life style. During a face to face interview with the President	H 292	The policy on patient Rights 100.00 was revised to include the three items listed in the deficiency. revised policy is attached. See page 3 .	6/23/10

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H 292 Continued From page 25
on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged the agency's policy for Patient Rights and Responsibilities failed to include the patient has the right to control his or her own household and life style.

At the time of the survey, there was no documented evidence the HCA ensured the policy for Patient Rights and Responsibilities included the patient has the right to control his or her own household and life style.

H 292

H 300 3912.2(d) PATIENT RIGHTS & RESPONSIBILITIES

Each home care agency shall develop policies to ensure that each patient who receives home care services has the following rights:

(d) To receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care;

This Statute is not met as evidenced by:
Based on a record review and interview, it was determined that the Home Care Agency failed to include that the patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care in it's Patient Right's and Responsibilities Policy.

The finding includes:

Review of the agency's Patient Right's and Responsibilities Policy on May 3, 2010 at approximately 12:53 p.m. revealed the HCA failed to include that the

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H 300 Continued From page 26

patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care in it's Patient Right's and Responsibilities Policy.

During a face to face interview with the President on May 3, 2010, beginning at approximately 7:25 p.m., it was acknowledged the agency's policy for Patient Rights and Responsibilities failed to include that the patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care

At the time of the survey, there was no documented evidence the HCA ensured the policy for Patient Rights and Responsibilities failed to include that the patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care.

H 300

H 308 3912.2(l) PATIENT RIGHTS & RESPONSIBILITIES

Each home care agency shall develop policies to ensure that each patient who receives home care services has the following rights:

(l) To voice a complaint or other feedback in confidence and without fear of reprisal from the agency or any agency personnel, in writing or orally, including an in-person conference if desired, and to receive a timely response to a complaint as provided in these rules; and...

This Statute is not met as evidenced by:
Based on a record review and interview, it was determined that the agency failed to include the

H 308

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H 308	<p>Continued From page 27</p> <p>patient has the right to voice a complaint or other feedback in confidence and without fear of reprisal from the agency or any agency personnel, in writing or orally, including an in-person conference if desired, and to receive a timely response to a complaint as provided in these rules in it's Patient Rights and Responsibilities Policy.</p> <p>During a face to face interview with the President on May 11, 2010, beginning at approximately 7:25 p.m., it was acknowledged the agency's policy for Patient Rights and Responsibilities failed to include that the patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care</p> <p>At the time of the survey, there was no documented evidence the HHCA ensured the policy for Patient Rights and Responsibilities failed to include that the patient has the right to receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care.</p>	H 308		
H 333	<p>3913.3 COMPLAINT PROCESS</p> <p>The telephone number of the Home Health Hotline maintained by the Department of Health shall be posted in the home care agency's operating office in a place where it is visible to all staff and visitors.</p> <p>This Statute is not met as evidenced by: Based on an observation, it was determined that the Home Care Agency (HCA) failed to post the Department of Health's Hotline telephone number in it's operating office in a place where it is visible</p>	H 333	<p>The agency will obtain and post the hotline number for the department of Health Hotline 202-442-5833 in the corporate office where it can be easily seen and read by staff and visitors.</p>	5/1/10

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H 333	<p>Continued From page 28 to all staff and visitors.</p> <p>The finding includes:</p> <p>During an observation on May 3, 2010, at approximately 10:28 a.m., revealed that the agency did not have the Department of Health's Hotline number posted in their office in a place visible to staff and visitors.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 11:50 a.m., revealed she recalled that the Department of Health's Hotline number was posted on a bulletin board in the agency's hallway.</p> <p>At the time of the survey, there was no evidence that the HCA posted the Department of Health's Hotline number in their office in a place visible to staff and visitors.</p>	H 333	<p>The agency will obtain and post the hotline number for the department of Health Hotline 202-442-5833 in the corporate office where it can be easily seen and read by staff and visitors.</p>	5/1/10
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H 355	<p>3914.3(d) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(d) A description of the services to be provided, including: the frequency, amount, and expected duration; dietary requirements; medication administration, including dosage; equipment; and supplies;</p> <p>This Statute is not met as evidenced by: Based on interview and record review, the facility failed to ensure the plan of care (POC) included a description of the services to be provided, including: the frequency, amount, and expected duration for four (4) of twenty (20) patient's in the sample. (Patients #7, #8 #15 and #17)</p>	H 355		
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H 355	<p>Continued From page 29</p> <p>The findings include:</p> <p>1. Review of Patient # 15's Home Health Certification and Plan of Care (POC) dated April 17, 2010 thru June 16, 2010, on May 3, 2010, at approximately 5:00 p.m., revealed "HHA to assist with ADL (activities of daily living) activities.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the POC did not include a description of the HHA services to be provided, including: the frequency, amount, and expected duration for Patient # 15.</p> <p>There was no documented evidence the POC included a complete description of the HHA services.</p> <p>2. Review of Patient # 17's POC dated March 9, 2010 thru May 7, 2010, on May 3, 2010, at approximately 5:50 p.m., revealed "HHA, six (6) hours per week for nine (9) weeks."</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the POC did not include a description of the HHA services to be provided for Patient # 17.</p> <p>There was no documented evidence the POC included a description of the HHA services.</p> <p>3. Review of Patient # 8's Home Health Certification and Plan of Care (POC) dated April 17, 2010 thru June 15, 2010, on May 3, 2010, between 1:50 p.m. and 6:25 p.m., revealed "HHA to assist with ADL (activities of daily living) activities." Further review of the POC revealed</p>	H 355	<p>Plans of care generated by data entry will be reviewed for accuracy and returned to ensure they comply with the specific activities to be performed and comply with requirements..</p> <p>Disciplines developing the patient's plan of care will be reminded to include all relevant information for the aide's assignment to include the specific ADL activities to be performed, frequency and duration.</p> <p>The Nurse reviewer will monitor the Plans of care to ensure developed appropriately and transcribed accurately. Reports will be provided to the Administrator on findings .</p>	<p>5/1/10</p> <p>5/1/10 and ongoing</p> <p>5/1/10 and ongoing</p>
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H 355	<p>Continued From page 30</p> <p>that Patient #8 was diagnosed with muscle weakness, acute kidney failure, chronic hypotension, depressive disorder, electrolyte and fluid disorders, and hypercholesterolemia.</p> <p>During a home visit with Patient #8 on May 4, 2010, at approximately 9:30 a.m., the patient revealed that he was not aware of the days nor the hours that his HHA was scheduled to provide services. Additionally, Patient #8 revealed he was not certain as to whether the HHA was expected at his home today (May 4, 2010). The patient indicated that when the HHA does come, the extent of his services included ironing and washing his dishes.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the POC did not include a description of the HHA services to be provided for Patient #8.</p> <p>There was no documented evidence the POC included a complete description of the HHA services.</p> <p>4. Review of Patient # 7's Home Health Certification and Plan of Care (POC) dated March 26, 2010 thru May 24, 2010, on May 3, 2010, between approximately 1:50 p.m. and 6:25 p.m., revealed the patient's treatment consisted of wound care for patient's right index finger and right great toe.</p> <p>Continued review of the POC revealed Patient #7 was diagnosed with traumatic amputation finger (partial) open wound of toes, hypertension, senile dementia, and encounter for change or removal of surgical wound dressing.</p> <p>During a home visit with Patient #7, on May 4,</p>	H 355	<p>Plans of care generated by data entry will be reviewed for accuracy and returned to ensure they comply with the specific activities to be performed and comply with requirements..</p> <p>Disciplines developing the patient's plan of care will be reminded to include all relevant information for the aide's assignment to include the specific ADL activities to be performed, frequency and duration.</p> <p>The Nurse reviewer will monitor the Plans of care to ensure developed appropriately and transcribed accurately. Reports will be provided to the Administrator on findings .</p> <p>Staff will be inserviced on the development of the POC to include responsibilities for management of Emergency situations.</p> <p>The Plans of care will be reviewed to ensure staff have identified who is responsible for management of emergency situations. -</p>	<p>5/1/10 and Ongoing</p> <p>5/1/10</p> <p>5/1/10 and Ongoing</p> <p>7/15/10</p> <p>9/1/10 and Ongoing</p>

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H 355 Continued From page 31

2010, at approximately 10:31 a.m., a face to face interview was conducted with the patient's caregiver. According to the patient's caregiver her brother received HHA services that included bathing, folding clothes, changing his bed linen, accompanying him for doctor visits and sat with the him while eating.

During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the POC did not include HHA services to be provided for Patient #7.

There was no documented evidence the POC included HHA services was to be provided for Patient #7.

H 355

H 363 3914.3(l) PATIENT PLAN OF CARE

The plan of care shall include the following:

(l) Identification of employees in charge of managing emergency situations;

This Statute is not met as evidenced by:
Based on a record review and interview it was determined the agency failed to include identification of employees in charge of managing emergency situations for fourteen (14) of twenty (20) patients in the sample. (Patient # 5, #6, #7,#8,#9, #10,#11,#13,#14,#15,#16,#17,#18 and #20)

The findings includes:

Review of Patients # 5, #6, #7, #8,#9, #10,#11, #13,#14,#15,#16,#17,#18 and #20's Plan of Care (POC) on May 3, 2010, between 1:50 p.m., and 6:25 p.m., revealed the POC did not include

H 363

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H 363 Continued From page 32
identification of employees in charge of managing emergency situations.

During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the provider of the above and it was acknowledged it was acknowledged the POC did not include identification of employees in charge of managing emergency situations for Patient #5, #6, #7, #8, #9, #10, #11, #13, #14, #15, #16, #17, #18 and #20.

There was no documented evidence the HCA included the identification of employees in charge of managing emergency situations on the POC.

H 363

H 364 3914.3(m) PATIENT PLAN OF CARE

The plan of care shall include the following:
(m) Emergency protocols; and...

This Statute is not met as evidenced by:
Based on interview and record review the Home Care Agency (HCA) failed to ensure the plan of care (POC) included emergency protocols for fourteen (14) of twenty (20) patients in the sample. (Patient #5, # 6, #7, #8, #9, #10, #11, #13, #14, #15, #16, #17, #18 and #20)

The findings include:

Review of Patient #5, # 6, #7, #8, #9, #10, #11, #13, #14, #15, #16, #17, #18 and #20's plan of care (POC) on May 3, 2010, between 1:50 p.m., to 6:25 p.m., revealed the POC did not include emergency protocols.

During a face to face interview with the

H 364

The agency will develop Emergency protocols for use by the clinical staff in the management of common emergency situations.

Staff will be inserviced on the use of the protocols and the Plan of care monitored to ensure emergency protocols are included.

9/30/10

10/15/10

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H 364 Continued From page 33
Administrator on May 11, 2010, at approximately 7:30 p.m., it was acknowledged the POC did not include emergency protocols for Patient # 5, # 6, #7, #8, #9, #10, #11, #13, #14, #15, #16, #17, #18 and #20.

There was no documented evidence the emergency protocol was on the POC.

H 364

H 366 3914.4 PATIENT PLAN OF CARE

Each plan of care shall be approved and signed by a physician within thirty (30) days of the start of care; provided, however, that a plan of care for personal care aide services only may be approved and signed by an advanced practice registered nurse. If a plan of care is initiated or revised by a telephone order, the telephone order shall be immediately reduced to writing, and it shall be signed by the physician within thirty (30) days.

This Statute is not met as evidenced by: Based on interview and record review, the facility's Plan of Care (POC) was not approved and signed by a physician within thirty (30) days of the start of care for four (4) of twenty (20) patients in the sample. (Patient #5, #6, #7, #13)

The findings include:

Review of Patient #5, #6, #7, #13's Plan of Care (POC) dated March 13, 2010, through May 11, 2010, on May 3, 2010, between 1:50 p.m., and 5:20 p.m., revealed the POC was not approved and signed by a physician within thirty (30) days of the start of care, however skilled nursing

H 366

Medical Records Clerk was reminded to submit a monthly report to the Administrator of delinquent orders so that she can intervene with the physicians to get orders signed in a timely manner.

Timely signing of physician's orders will be monitored as part of the PI program and quarterly reports submitted to PAC for review and recommendations as part of their oversight role.

5/1/10

6/1/10
and
ongoing

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H 366	<p>Continued From page 34</p> <p>services was being implemented according to the POC. The POC was not signed as of May 4, 2010.</p> <p>During a face to face interview with President on May 3, 2010, at approximately 7:30 p.m., it was acknowledged the POC was not approved and signed by a physician within thirty (30) days of the start of care for Patient #5, #6, #7, #13</p> <p>There was no documented evidence the POC was approved and signed by a physician within thirty (30) days of the start of care.</p>	H 366		
H 399	<p>3915.10(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE</p> <p>Personal care aide duties may include the following:</p> <p>(f) Observing, recording, and reporting the patient's physical condition, behavior, or appearance;</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure Personal Care Aides (PCAs) recorded, and reported on the patient's physical condition, behavior or appearance for five (5) of twenty(20) patients in the sample. (Patient #7, #8, #9, #15 and #17)</p> <p>The findings include:</p> <p>Review of Patient #7, #8, #9, #15 and #17's medical records on May 3, 2010, between 12:20 p.m.- 5:00 p.m., revealed the PCA's (Personal Care Aides) had not recorded and reported the</p>	H 399	<p>The PCA's will be inserviced on appropriate documentation and given sample documentation as guide. Documentation submitted will be reviewed by the supervising RN and one-to-one counseling sessions given to ensure the aide is competent to perform this function.</p> <p>Activity records submitted each week will be reviewed and not accepted until corrected according to guidelines.</p> <p>The Nurse Reviewer will monitor PCA documentation to assure in compliance with requirements.</p>	<p>7/15/10</p> <p>5/1/10 and ongoing</p> <p>6/1/10 and ongoing</p>

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NAME OF PROVIDER OR SUPPLIER NURSING ENTERPRISES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 817 VARNUM STREET, NE WASHINGTON, DC 20017		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
H 399	Continued From page 35 patient's physical condition, behavior, or appearance to the agency. During a face to face interview with the President on May 3, 2010, at approximately 7: 29 p.m., the surveyor informed the provider of the above and it was acknowledged the PCA's had not recorded and reported on Patient #7, #8, 9, #15 and #17's physical condition, behavior, or appearance to the agency. There was no documented evidence the PCA's recorded and reported the patient's physical condition, behavior, or appearance to the agency	H 399	The PCA's will be inserviced on appropriate documentation and given sample documentation as guide. Documentation submitted will be reviewed by the supervising RN and one-to-one counseling sessions given to ensure the aide is competent to perform this function. Activity records submitted each week will be reviewed and not accepted until corrected according to guidelines.	5/15/10
H 402	3915.10(i) HOME HEALTH & PERSONAL CARE AIDE SERVICE Personal care aide duties may include the following: (i) Tasks related to keeping the patient's living area in a condition that promotes the patient's health and comfort; This Statute is not met as evidenced by: Based on observation and interview, the Home Care Agency (HCA) failed to ensure Staff #21 with task to keep the patient's living area in a condition that promotes the patient's health and comfort was inclusive for one (1) of five (5) home visits conducted. The finding includes: Review of Patient #9's Home Health Certification and Plan of Care (POC) dated March 11, 2010, through May 9, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed the patient was	H 402	The Nurse Reviewer will monitor PCA documentation to assure in compliance with requirements. The involved staff will be counseled re responsibilities and performance monitored for compliance with requirements. Supervisory RN's counseled to provide better oversight of the PCA's activities. The PCA Manager will be required to make unannounced visits to clients homes on an on-going basis to ensure patient receiving services as ordered and that the PCA is performing satisfactorily.	5/1/10 and 05/01/10 5/1/10 6/30/10

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H 402	<p>Continued From page 36</p> <p>to be provided Home Health Care services three (3) times a week for nine (9) weeks. Review of Patient #9's Social Services Intervention Note dated April 29, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed "there is a strong smell of urine in the apartment".</p> <p>During a home visit to Patient #9 on May 4, 2010, at approximately 12:30 p.m., the apartment was observed to be unkept, odorous, dusty and cluttered. Further observation revealed Patient #9 was in her bedroom sitting sideways on a bare mattress with both legs dangling on the floor next to a bedside commode that smelled strongly of urine.</p> <p>During a face to face interview with Patient #9 in her home on May 4, 2010, at approximately 12:35 p.m., the patient stated the HHA has never assisted her with bathing, laundering her clothing or cleaning the apartment.</p> <p>During a telephone interview with the President on May 4, 2010, at approximately 1:00 p.m., the provider was informed of the aforementioned concerns and stated she would talk with her HHA staff regarding Patient #9.</p> <p>At the time of the survey, the HCA failed to ensure Staff #7, kept the patient's (Patient #9) living area in a condition that promoted her health and comfort.</p>	H 402		
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H 450	<p>3917.1 SKILLED NURSING SERVICES</p> <p>Skilled nursing services shall be provided by a registered nurse, or by a licensed practical nurse under the supervision of a registered nurse, and in accordance with the patient's plan of care.</p>	H 450		
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H 450	Continued From page 37 This Statute is not met as evidenced by: Based on interview and record review, the Home Care Agency (HCA) failed to ensure skilled nursing services were provided in accordance with the patient's plan of care (POC) for six (6) of twenty (20) patients in the sample. (Patient #7, #9, #14, #15, #19 and #20) The findings include: 1. Review of Patient # 7's plan of care (POC) dated March 26, 2010, through May 24, 2010, on May 3, 2010 at approximately 2:20 p.m., revealed the patient had diagnoses that included amputation and disarticulation of the right index finger and an open wound of great right toe. Further review revealed the skilled nurse was to visit three (3) to five (5) times a week for two (2) weeks and two (2) to three (3) times a week for seven (7) weeks". Review of Patient # 7's Nursing Intervention Notes dated March 29, March 31, April 2, April 6, April 8, April 12, April 14, and April 19, 2010, on May 3, 2010, at approximately 5:15 p.m., at approximately 2:25 p.m., revealed wound care was not provided in the frequency ordered by the physician in accordance with the patient's POC. During a face to face interview with Patient #7 and his caregiver in his home, on May 4, 2010, at approximately 11:35 a.m., it was acknowledged "the nurse has not been to visit my brother at all last week to perform wound care". During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it	H 450	The deficiencies will be discussed with the involved staff and inservice will be planned to address the Plan of care and responsibilities re compliance with the Plan of Care. RN's supervising LPN, must meet with the LPN to discuss the case, review the Plan of Care and conduct a joint visit to assess the competence of the LPN to assume responsibility for the care. The LPN must be given copy of the Plan of care so that treatments implemented reflects the plan of care. The Dir of Professional Services or designee will meet with the staff on an ongoing basis to discuss the Plan of care and interventions and make spot checks to assess competence. Nurse Reviewer will conduct concurrent reviews of the chart to ensure compliance with the Plan of care and provide reports to the Director for corrective actions.	6/30/10 5/1/10 and ongoing 5/1/10 5/1/10 and ongoing 5/1/10 and ongoing
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H 450	<p>Continued From page 38</p> <p>was acknowledged that all of Patient #7's skilled nursing notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>2. Review of Patient # 7's POC dated March 26, 2010, through May 24, 2010, on May 13, 2010, at approximately 2:26 p.m., revealed the skilled nurse was to measure the wound on the right index finger and great right toe weekly.</p> <p>Review of Patient # 7's Nursing Clinical Notes on May 3, 2010, at approximately 5:15 p.m., revealed no documented evidence the wound was measured since the week of April 4 and April 11, 2010.</p> <p>During a face to face interview with President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the provider of the above and it was acknowledged that all of Patient #7's skilled nursing notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>3. Review of Patient # 9's Plan of Care (POC) dated March 11, 2010, through May 9, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed the patient has diagnoses that included cerebrovascular disease, muscle weakness, congestive heart failure, Diabetes Mellitus Type II, osteoarthritis, morbid obesity and hypertension. Further review revealed the skilled nurse was to visit three (3) times a week for one (1) week, and two (2) times a week for three (3) weeks and one (1) to two (2) times a week for</p>	H 450		
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H 450	<p>Continued From page 39</p> <p>five (5) weeks".</p> <p>Review of Patient # 9's Nursing Intervention Notes dated April 30 and May 5, on May 3, 2010, at approximately 3:00 p.m., revealed skilled nursing services was not provided in the frequency ordered by the physician in accordance with the patient's POC.</p> <p>During a face to face interview with Patient #9 in her home, on May 4, 2010, at approximately 12:00 p.m., it was acknowledged the "nurse had not been to visit lately"</p> <p>During a face to face interview with the the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged that all of Patient #9's skilled nursing notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>4. Review of Patient # 14's POC dated March 3, 2010, through May 1, 2010 on May 3, 2010, at approximately 5:05 p.m., revealed the patient had diagnoses that included a right groin closed incision and a sacral decubitus ulcer, Diabetes Mellitus, morbid obesity, hypertension and acute embolism and thrombolism of superficial veins of the upper extremities. Further review revealed the skilled nurse was to visit three (3) times a week for two (2) weeks and two (2) times a week for seven (7) weeks".</p> <p>Review of Patient # 14's Nursing Intervention Notes dated March 8, March 10, March 12, March 26, March 29, April 1, April 6 and April 8,</p>	H 450		
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H 450	<p>Continued From page 40</p> <p>2010, on May, 2010, at approximately 5:15 p.m., revealed wound care was not provided in the frequency ordered by the physician in accordance with the patient's POC.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged that all of Patient #14's skilled nursing notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>5. Review of Patient # 14's POC dated March 3, 2010, through May 1, 2010, on May 3, 2010, at approximately 5:05 p.m., revealed the skilled nurse was to measure the patient's sacral decubitus ulcer weekly.</p> <p>Review of Patient # 14's Nursing Intervention Notes on May 3, 2010, at approximately 5:15 p.m., revealed no documented evidence the wound was measured weekly in accordance with the patient's POC.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the provider of the above and it was acknowledged that all of Patient #14's Weekly Wound Assessment and Progress Notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>6. Review of Patient # 14's POC dated March 3,</p>	H 450		
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H 450	<p>Continued From page 41</p> <p>2010, through May 1, 2010, on May 3, 2010, at approximately 5:15 p.m., revealed the patient had diagnoses that included a right groin closed incision and a sacral decubitus ulcer. Further review revealed the wounds were to be treated as follows:</p> <p>(a) Right groin closed incision to be cleansed with Normal Saline (NSS) solution, pat dry, covered with dry 4x4 (four by four) gauze and secure with tape and</p> <p>(b) Buttock pressure sores to be cleansed with NSS, pat dry, apply Duroderm dressing, change every three (3) days.</p> <p>Review of Patient # 14's Nursing Intervention Notes dated March 26, April 6 and April 8, 2010, on May 3, 2010, at approximately 5:16 p.m., revealed the wound was cleaned with NSS, patted dry and Calmoseptine Cream applied".</p> <p>During a face to face interview with the President on May 13, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged that Patient #14's revised wound care management orders may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>7. Review of Patient # 15's POC dated April 17, 2010, through June 15, 2010, on May 3, 2010, at approximately 5:00 p.m., revealed the patient had diagnoses that included congestive heart failure, muscle weakness, esophageal reflux, hypothyroidism, and osteoarthritis. Further review revealed the skilled nurse was to visit</p>	H 450		
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H 450	<p>Continued From page 42</p> <p>three (3) to four (4) times a week times for two (2) weeks and one (1) to two (2) times a week for seven (7) weeks".</p> <p>Review of Patient # 15's medical record on May 3, 2010, at approximately 5:00 p.m., revealed no documented evidence of any Nursing Intervention Notes to verify skilled care was provided in accordance with the patient's POC.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged Patient #15's skilled nursing notes were not in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>8. Review of Patient # 16's POC dated March 20, 2010, through May 18, 2010, on May 3, 2010, at approximately 5:00 p.m., revealed the patient had diagnoses that included malignant neoplasm of breast, Diabetes Mellitus, hypertension and esophageal reflux. The skilled nurse was to visit three (3) to four (4) times a week for two (2) weeks and one (1) to two (2) times a week for seven (7) weeks. Further review aftercare following surgery as follows:</p> <p>(a) Right breast to be cleansed with Normal Saline (NSS) solution, apply dry dressing Xeroform, covered with ABD pad secure with tape.</p> <p>Review of Patient # 16's medical record on May 3, 2010, at approximately 5:30 p.m., revealed no documented evidence to verify skilled care was provided in accordance with the patient's POC</p>	H 450		
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H 450	<p>Continued From page 43</p> <p>during the entire month of April, 2010.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged Patient #16's April, 2010, skilled nursing notes may not be filed in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>9. Review of Patient # 17's POC dated March 9, 2010, through May 7, 2010, on May 3, 2010, at approximately 5:50 p.m., revealed the patient had diagnoses that included malignant neoplasm of breast, Diabetes Mellitus, asthma and hypertension. The skilled nurse was to visit two (2) to three (3) times a week for three (3) weeks and one (1) to two (2) times a week for six (6) weeks. Further review revealed the skilled nurse was to assess and observed all body systems on each visit, assess patient's ability to manage Diabetes Mellitus and to teach medication administration including dosage, scheduling and side effects.</p> <p>Review of Patient # 17's medical record on May 3, 2010, at approximately 5:50 p.m., revealed no documented evidence to verify skilled care was provided in accordance with the patient's POC since March 19, 2010.</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged Patient #17's all of the skilled nursing notes may not be filed in the medical record.</p>	H 450		
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H 450	<p>Continued From page 44</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>10. Review of Patient # 19's POC dated March 17, 2010, through May 18, 2010, on May 3, 2010, at approximately 6:18 p.m., revealed the patient had diagnoses that included ulcer of the right foot, Diabetes Mellitus, hypertension, morbid obesity, osteoarthritis and gout. The skilled nurse was to visit the three (3) to five (5) times a week for five (5) weeks and two (2) to two (3) times a week for four (4) weeks. Further review revealed wound care management was as follows:</p> <p>(a) Right foot to be cleansed with soap and water, NSS solution, apply Bactroban Cream, covered with gauze, wrap with Kerlix and secure with tape.</p> <p>Review of Patient # 19's Nursing Intervention Notes dated April 8 and April 10, 2010, on May 3, 2010, at approximately 6:20 p.m., revealed the wound was cleaned with soap and water, Aquacel Ag dressing was applied area covered with 4x4 and wrapped with Kerlix and ace wrap.</p> <p>During a face to face interview with the President on May 13, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it was acknowledged that Patient #19's revised wound care management orders may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>11. Review of Patient #19's POC dated March 17,</p>	H 450		
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H 450	<p>Continued From page 45</p> <p>2010, through May 185, 2010, on May 3, 2010, at approximately 6:18 p.m., revealed the patient had diagnoses that included an ulcer on the right foot and the skilled nurse was to measure the wound weekly.</p> <p>Review of Patient # 19's Nursing Intervention Notes on May 3, 2010, at approximately 6:18 p.m., revealed no documented evidence the wound was measured since March 17, 2010..</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the provider of the above and it was acknowledged that all of Patient #19's skilled nursing notes may not be in the medical record.</p> <p>There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.</p> <p>12. Review of Patient # 20's POC dated April 10, 2010, through June 8, 2010, on May 3, 2010, at approximately 6:25 p.m., revealed the patient had diagnoses that included acute myocardial infarction, pacemaker, chronic obstructive asthma, hypothyroidism and atrioventricular block. Further review revealed the skilled nurse was to visit three (3) times for one (1) week and two (2) times a week for eight (8)weeks".</p> <p>Review of Patient # 20's medical record on May 3, 2010, at approximately 6:25 p.m., revealed no documented evidence to verify skilled care was provided in accordance with the patient's POC since the start of care (SOC) on April 20, 2010,</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7: 30 p.m., the surveyor informed the provider of the above and it</p>	H 450		
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H 450	Continued From page 46 was acknowledged Patient #15's skilled nursing notes may not be filed in the medical record. There was no documented evidence skilled nursing services were provided in accordance with the patient's POC.	H 450		
H 452	3917.2(b) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (b) Coordination of care and referrals; This Statute is not met as evidenced by: Based on record review, interview, and observation, the Home Care Agency's (HCA) nurse failed to ensure coordination of care and to make referrals for one (1) of twenty (20) patients in the sample. (Patient #6) The finding includes: Review of Patient # 6's (POC) dated March 25, 2010, through May 23, 2010, on May 3, 2010, approximately 1:50 p.m. and 6:25 p.m., revealed the patient had diagnoses that included obstructive chronic bronchitis, with acute exacerbation, surgical procedure of insertion of permanent pacemaker, initial or replacement, hypertensive chronic kidney disease, end stage renal disease, coronary atherosclerosis, asthma, and gout. During a home visit with Patient #6, on May 4, 2010, at approximately 10:45 a.m., the patient's caregiver was interviewed. According to the patient's caregiver, she was interested in getting a Home Health Aide (HHA) for the patient.	H 452	The involved nurse was counseled re role in coordinating services and following up on identified problems. and in following the chain of command to communicate concerns. Inservice to be held in July with the skilled staff to discuss the survey report and action plan to correct identified problems from the survey. Performance will be monitored following the inservice to assess improvement in performance.. Concurrent audits of the clinical record will be conducted on an on-going basis to assess the quality of services provided and to assess progress following the inservice.	5/1/10 7/15/10 5/1/10 and ongoing 5/1/10 and ongoing

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H 452	<p>Continued From page 47</p> <p>Further interview with the caregiver revealed she had inquired about an aide on April 13, 2010, when the agency's nurse was in Patient #6's home. According to the caregiver, the agency's nurse informed her that she was not familiar with how to go about getting a HHA.</p> <p>During telephone interview with the President on May 4, 2010, at approximately 1:15 p.m., the surveyor informed the provider of the above and it was acknowledged the skilled nurse had not referred Patient #6 to social services to be assessed for a HHA.</p> <p>At the time of the survey, there was no documented evidence the skilled nurse coordinated care and referred the patient to social services to assess her needs.</p>	H 452		
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H 456	<p>3917.2(f) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(f) Supervision of services delivered by home health and personal care aides and household support staff, as appropriate;</p> <p>This Statute is not met as evidenced by: Based on interview and record review, the Home Care Agency (HCA) failed to ensure the nurse supervised services delivered by the home health aide (HHA), as appropriate for one (1) of twenty (20) patients in the sample receiving home health care services. (Patient #9)</p> <p>The finding includes:</p> <p>Review of Patient #9's Home Health Certification</p>	H 456		
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H 456	Continued From page 48 and Plan of Care (POC) dated March 11, 2010 through May 9, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed the patient was to be provided Home Health Care services (HHA) services three (3) times a week for nine (9) weeks. Review of Patient #9's medical records on May 3, 2010, at approximately 2:55 p.m., did not reveal monthly Registered Nurse (RN) supervisory notes as appropriate. Review of Patient #9's Social Services Intervention Note dated April 29, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed "there is a strong smell of urine in the apartment". During home visit to Patient #9 on May 4, 2010, at approximately 12:30 p.m., the apartment was observed to be unkept, odorous, dusty and cluttered. Further observation revealed Patient #9 was in her bedroom sitting sideways on a bare mattress with both legs dangling on the floor next to a bedside commode that smelled strongly of urine. During a face to face interview with Patient #9 in her home on May 4, 2010, at approximately 12:35 p.m., the patient stated the HHA has never assisted her with bathing, laundering her clothing or cleaning the apartment. During a telephone interview with the President on May 4, 2010, at approximately 1:00 p.m., the provider was informed of the aforementioned concerns and stated she would talk with her skilled nursing and HHA staff regarding Patient #9. There was no documented evidence the nurse	H 456	Responsibilities of the supervising RN will be reviewed with all supervising RN and the policy 600.27 Management of the PCA., The documentation of supervisory visits will be monitored monthly to ensure compliance with requirement for monthly visits. Supervisory RN;s will be instructed to call the patients between monthly visits to check on the PCA by getting feedback from the patient re the PCA. Concerns voiced by the patient should result in a visit to the patient to assess the situation. The Manager of the PCA will be required to make random calls and home visits to asses patients if there are complaints voiced re neglect. All reports of neglect by the PCA will be investigated by the PCA Manager, and a report provided to the Administrator for actions to terminate the PCA and report issue to the authorities as required. PCA whose patient was found in a neglected condition was terminated.	6/30/10 5/1/10 and ongoing 6/30/10 6/30/10 and ongoing

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H 456	Continued From page 49 supervised services delivered by the home health aides as appropriate .	H 456		
H 459	3917.2(i) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (i) Patient instruction, and evalutaion of patient instruction; and This Statute is not met as evidenced by: Based on interview and record review, the facility's skilled nursing staff failed to ensure documentation of patient instruction, and evaluation of patient instruction for four (4) of twenty (20) patients in the sample. (Patient #6, #7, #9 and #13) The findings include: 1. Review of Patient # 6's Plan of Care (POC) dated March 25, 2010 through May 23, 2010, on May 3, 2010, at approximately 1:50 p.m., revealed the patient has diagnoses that include obstructive chronic bronchitis with acute exacerbation, end stage renal disease, asthma, insertion of permanent pacemaker, hypertension and coronary atherosclerosis. Further review revealed the skilled nurse was to instruct the patient on medication administration, signs and symptoms to report to physician and fall safety. Review of Patient # 6's skilled nursing notes dated March 25, March 28, April 1, April 6, April 29 and May 2, on May 11, 2010, at approximately 3:35 p.m., revealed no evaluation of patient instruction on medication administration, signs	H 459	Results of survey will be discussed with the Registered Nurses and responsibilities for patient teaching . Staff reminded of the cliché that "nothing documented means nothing done"Specifically staffs Responsibilities re educating patients on medications, disease management ,fall prevention, will be addressed. Staff to document the effectiveness of instructions provided. Documentation will be monitored to ensure compliance with minimum standards.	7/15/10 6/1/10 and Ongoing

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H 459	<p>Continued From page 50</p> <p>and symptoms to report to physician and fall safety.</p> <p>During a face to face interview with the RN #1 on May 11, 2010, at approximately 3:46 p.m., the surveyor informed the skilled nurse of the above and it was acknowledged the medical records did not include evaluation of instructions given to Patient #6's on medication administration, signs and symptoms to report to physician and fall safety.</p> <p>During a face to face interview in the home of Patient #6 and her caregiver on May 4, 2010, at approximately 10:55 a.m., revealed the skilled nurse had only trained Patient #6 and her caregiver on medication management and they did not understand the instructions given. Further interview revealed Patient #6 was "scheduled to be discharged this week from home care".</p> <p>There was no documented evidence of the evaluation of instructions given to the patient and caregiver.</p> <p>2. Review of Patient # 7's POC dated March 26, 2010 through May 24, 2010, on May 3, 2010, at approximately 2:20 p.m., revealed the patient has diagnoses that include amputation and disarticulation of the right index finger and an open wound of great right toe.</p> <p>Review of Patient # 7's Nursing Intervention Notes dated 19, 2010 at approximately 2:25 p.m., revealed "client instructed on DM (Diabetes Mellitus) disease management...use of glucometer and medication management". Further review revealed no evaluation of the instruction given to Patient #7 and his caregiver.</p>	H 459		
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H 459	<p>Continued From page 51</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the aforementioned instructions and it was acknowledged the medical records did not include evaluation of instructions given to Patient #7 and his caregiver.</p> <p>During a face to face interview in the home of Patient #7 and his caregiver on May 4, 2010, at approximately 10:55 a.m., revealed the skilled nurse had trained the caregiver on medication management and the glucometer, however the caregiver needed more instructions. Further interview revealed Patient #7 was "scheduled to be discharged the last week of May, 2010".</p> <p>There was no documented evidence of the evaluation of instructions given to the patient and caregiver.</p> <p>3. Review of Patient # 9's Plan of Care (POC) dated March 11, 2010, through May 9, 2010, on May 3, 2010, at approximately 2:55 p.m., revealed the patient has diagnoses that include Diabetes Mellitus Type II. Further review revealed the skilled nurse was to assess understanding of signs and symptoms of hypoglycemia and hyperglycemia.</p> <p>Review of Patient # 9's skilled nursing notes dated May 5, on May 3, 2010, at approximately 3:00 p.m., revealed " re-enforced signs and symptoms of hypoglycemia, gave patient a hand-out on hypoglycemia. Verbalized understanding".</p> <p>During a face to face interview in the home of Patient #9 on May 4, 2010, at approximately 12:00 p.m., it was revealed the skilled nurse had</p>	H 459		
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H 459	<p>Continued From page 52</p> <p>given the patient a hand-out on hypoglycemia, however the patient demonstrated very little knowledge of the contents of the hand-outs .</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the aforementioned instructions and it was acknowledged the medical records did not include specific evaluations of the instructions given to Patient #9.</p> <p>There was no documented evidence of the specific evaluation of the instructions given to the patient and caregiver.</p> <p>4. Review of Patient # 13's POC dated March 15, 2010 through May 13, 2010, on May 3, 2010, at approximately 5:20 p.m., revealed the patient has diagnoses that included congestive heart failure. Further review revealed the skilled nurse was to instruct the patient on her diet and signs and symptoms of cardiac complications.</p> <p>Review of Patient # 13's Nursing Intervention Note (NIN) dated April 1, 2010, on May 3, 2010, at approximately 5:35 p.m., revealed " pursed lip breathing taught for energy conservation also taught signs and symptoms of cardiac complications and when to call 911. Verbalized understanding". Further review revealed a NIN dated April 9, 2010, that stated "patient advised to eat low sodium intake and also green vegetables such as spinach, kale and collard greens. She verbalized her understanding".</p> <p>During a face to face interview with the President on May 3, 2010, at approximately 7:30 p.m., the surveyor informed the President of the aforementioned instructions and it was</p>	H 459		

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H 459	<p>Continued From page 53</p> <p>acknowledged the medical records did not include specific evaluation of the instructions given to Patient #13.</p> <p>There was no documented evidence of the specific evaluation of the instructions given to the patient.</p>	H 459		