Pennsylvania Department of Health

Pennsylvania Homecare Association
May 2013

Department of Health Update
Linda Chamberlain, MS, BSN, RN
Division Director
Division of Home Health

Pennsylvania Department of Health

Pennsylvania Hospice Update
May 2013

Pennsylvania Department of Health

Hospice Statistics
2011 = 182
2012 = 198
### Hospice Number of Complaints by Month

<table>
<thead>
<tr>
<th>Month</th>
<th>Complaints</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan.</td>
<td>4</td>
</tr>
<tr>
<td>Feb.</td>
<td>0</td>
</tr>
<tr>
<td>Mar.</td>
<td>1</td>
</tr>
<tr>
<td>April</td>
<td>5</td>
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<tr>
<td>May</td>
<td>6</td>
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<tr>
<td>June</td>
<td>1</td>
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<tr>
<td>July</td>
<td>1</td>
</tr>
<tr>
<td>Aug.</td>
<td>3</td>
</tr>
<tr>
<td>Sept.</td>
<td>1</td>
</tr>
<tr>
<td>Oct.</td>
<td>3</td>
</tr>
<tr>
<td>Nov.</td>
<td>2</td>
</tr>
<tr>
<td>Dec.</td>
<td>1</td>
</tr>
</tbody>
</table>

Total = 28 FTY 2012

### Hospice Complaint Summary 2012

- 22 unsubstantiated complaints
- 6 substantiated complaints
- 8 complaint investigations with related deficiencies

### Hospice Complaint Intake Reasons

* Care and services not provided
* Patient/consumer rights
* Lack of pain assessment
* Ineffective pain control
* Lack of bereavement assessment
Complaint intake cont’d.

* Inadequate bereavement care
* Failure to provide needed medical supplies
* Clinical record documentation inaccurate/incomplete

Top 10 Hospice Survey Deficiencies (CMS) 2012

L543 Plan of care
L629 Supervision of hospice aides
L545 Content of care plan
L530 Drug profile/review
L555 Coordination of services

CMS deficiencies cont’d.

L591 Nursing services
L552 Review of the plan of care
L596 Bereavement counseling
L615 Competency evaluation
L523 Time frame for completion of comprehensive assessment
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Top 10 Hospice Survey Deficiencies (PA) - 2012
*included on CMS list

L531 Initial bereavement assessment
*L530 Drug profile/review
L692 Administration of drugs/biologicals
*L629 Supervision of hospice aides
L553 Revise POC-progress towards goals

PA deficiencies contd.

*L552 Review of the plan of care
*L523 Timeframe for completion of comprehensive assessments
L537 IDG/physician prepare written POC
L547 Detailed statement of scope/frequency of services
L695 Provide copy of policy/procedure for controlled drugs

Pennsylvania Home Healthcare Update

May 2013
Home Healthcare Statistics

2011 = 457 agencies (57 licensed only)
2012 = 464 agencies (56 licensed only)

Home Healthcare Number of Complaints by Month

Jan. 6    July 4
Feb. 7    Aug. 1
Mar. 4    Sept. 3
April 2   Oct. 3
May 3     Nov. 7
June 7    Dec. 0

Total = 47 FTY 2012

Home Healthcare Complaint Summary 2012

23 unsubstantiated complaints
24 substantiated complaints
21 complaint investigations with related deficiencies
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Home Healthcare Complaint Intake Reasons

* Care and services not provided
* Patient/consumer rights
* Falsification of records/billing
* Unqualified personnel
* Abuse
* Physician services

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Top 10 Home Health Survey Deficiencies (CMS) 2012

G158- Care follows written plan of Care & periodically reviewed by physician
G159- Plan of Care covers diagnosis, required service. Visits, etc.
G236- Record with past/current findings maintained for all patients

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CMS deficiencies cont’d.
G337- Assessment includes review of all medications
G121- Compliance with accepted professional standards/principles
G229- RN supervisory visits if skilled care no less than once every 2 weeks
G143- Coordination of Patient Services
G170- Skilled Nursing Services furnished in accordance with Plan of Care
CMS deficiencies cont’d.

G176 - RN prepares notes, coordinates, informs MD, other staff of changes
G165 - Drugs & treatment administered only as ordered by physician

Top 10 Home Health Survey Deficiencies (PA) 2012
*included on CMS list

*G158 - Care follows written plan of Care & periodically reviewed by physician
G166 – Verbal orders put in writing, signed, dated
G224 – HHA given written instructions
*G121 – Comply with accepted professional standards & principles

PA deficiencies cont’d.

G141 – Personnel policies
*G229 - RN supervisory visits if skilled care no less than once every 2 weeks
*G165 - Drugs & treatment administered only as ordered by physician
*G236 - Record with past/current findings maintained for all patients
PA deficiencies cont’d.

G160 – Physician approves additions & modifications to the plan of care
*G237 - Assessment includes review of all medications

Pennsylvania Home Care Update

May 2013

Home Care Statistics

2011 = 1224

2012 = 1279
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Home Care Number of Complaints by Month

<table>
<thead>
<tr>
<th>Month</th>
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<tbody>
<tr>
<td>Jan.</td>
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<tr>
<td>Feb.</td>
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<tr>
<td>Mar.</td>
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<td>April</td>
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<td>May</td>
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<td>June</td>
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<td>Aug.</td>
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<td>Sept.</td>
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<td>Oct.</td>
<td>4</td>
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<tr>
<td>Nov.</td>
<td>4</td>
</tr>
<tr>
<td>Dec.</td>
<td>8</td>
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Total = 67 FTY 2012

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Home Care Complaint Summary 2012

- 40 unsubstantiated complaints
- 27 substantiated complaints
- 28 complaint investigations with related deficiencies

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Home Care Complaint Intake Reasons

* Care and services not provided
* Consumer rights
* Unqualified personnel
* Misappropriation of property
* Abuse
* Falsification of records/billing
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Home Care Agency/Registry Deficiencies (PA) 2012
*Information to be provided (S0820)
*Health screening (S0701, S0710, S0700)
*Hiring and rostering (S0200)
*Consumer rights (S0800)
*Prohibitions (S0810)
*Competency requirements (S0610)
*Criminal background checks (S0300)
*Federal criminal history record (S0320)

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Electronic Event Reporting System Update

December 20, 2012
Effective: January 1, 2013

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Eliminated categories:
• Falls with injuries
• Inappropriate discharge
• Injury or accident while a patient/consumer other than falls
• Medication errors/adverse drug reactions causing serious injury
• Misadventure with feeding tube, catheter, tracheotomy or life sustaining equipment
• Patient/consumer billing/records
Transfer/admission to hospital because of injury/accident
Events are reportable IF staff are PRESENT:
  The patient/consumer was transferred OR admitted to the hospital due to an injury or accident.

Transfers due to medical conditions/symptoms are NOT reportable.

Transfers when agency staff are not present MAY be reportable if there is evidence of abuse/neglect on the part of the agency caregiver.

Includes serious medication errors that required patient/consumer transfer to the hospital.

Tuberculosis (TB) Screening Product Handling:

1. CDC recommends using #1 transdermal patch (the 9 mm diameter). Ificrosorb SIL40 or similar pre-scored, pre-cut disposable patch.
2. Prior to use, the patch should be handled in a manner that minimizes contamination of the patch. The patch should be removed from the package and applied to the skin of the patient, and the patch should be removed from the skin after the recommended time.
3. The patch should be disposed of in a manner that minimizes the risk of exposure to others. The patch should be placed in a sealed container and then disposed of in a secure location.
4. If the patch is removed early, it should be handled in a manner that minimizes the risk of exposure to others. The patch should be placed in a sealed container and then disposed of in a secure location.
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28 PA Code: 601.31 Conformance with Physician’s Orders

- Home health agencies may vary from the 7 day requirement for countersignature of an oral order under the following conditions:
  - An oral order not countersigned within 7 days must be accompanied by clearly documented evidence of the agency’s continuing efforts to obtain the countersignature within that timeframe. All contacts and attempts at contact with the prescriber, by any means of communication, must be documented including the date, time, and the signature of the individual making or attempting to make the contact. This notation regarding prescriber contact may be on the assessment, a case communication note, or other document maintained in the clinical record. If documentation of the attempt(s) to obtain the required countersignature is provided as stated herein, no deficiency citation will be issued, though the surveyor may make note of this lacking for a subsequent survey.
  - A deficiency citation will be issued if there is no documentation of any attempt(s) to obtain the required countersignature as explained above.
  - Any oral order not countersigned within 30 days of original issue, regardless of the number of attempts to obtain countersignature, will result in a citation.

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- Technical Advisory for Home Care Agencies/Registries

- Agencies and registries supply or refer direct care workers to provide home care services to individuals in their homes or other independent living environment. Home care services include personal care, assistance with instrumental activities of daily living, companionship services, respite care and specialized care.

- Personal care includes assistance with self-administration of medications. Direct care workers can assist with self-administration of medication for consumers who are competent to direct the care. Assistance with self-administration of medication includes assisting the consumer in locating an oral medication container, opening the container and retrieving the correct dosage, as directed by the consumer, and assisting the consumer with taking the medication.
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- Direct care workers who are not licensed health professionals cannot administer medications. Administration of a medication includes:
  - obtaining an order for a medication from a licensed health care professional with prescriptive authority
  - checking a medication order for necessary components
  - verifying that the medication is the right medication, is labeled correctly, has not expired and has no contraindications
  - verifying the dose, route and time for medication administration
  - exercising judgment; e.g. deciding if an adverse reaction has occurred, if medication should be halted, or if consultation with the prescriber is necessary
  - Assistance with self-administration of medication also includes applying a topical medicated cream as directed by the consumer.

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- A licensed practical nurse or registered nurse employed by a home care agency or home care registry to provide home care services may perform services within the scope of her/his license; however, the nurse may not delegate nursing functions to an unlicensed direct care worker or train or supervise the direct care worker in the performance of a nursing function. For example, a direct care worker may not do tube feedings or provide wound care.