

Division of Licensing and Protection  
103 South Main Street, Ladd Hall  
Waterbury, VT 05671-2306  
<http://www.dail.vermont.gov>  
Voice/TTY (802) 871-3317  
To Report Adult Abuse: (800) 564-1612  
Fax (802) 871-3318

June 20, 2013

Ms. Tracy Chellis, Director  
Bayada Home Health Care  
110 Kimball Avenue, Suite 250  
So Burlington, VT 05403-6925

Dear Ms. Chellis:

Enclosed is a copy of your two acceptable plans of correction for the complaint investigation conducted on April 30, 2013, in regards to State and Federal Regulatory violations. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,



Frances L. Keeler, RN, MSN, DBA  
Assistant Division Director  
Director State Survey Agency



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

FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  477019	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  C 04/30/2013
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NAME OF PROVIDER OR SUPPLIER  BAYADA HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 110 KIMBALL AVENUE, SUITE 250 SO BURLINGTON, VT 05403
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G 000	INITIAL COMMENTS	G 000		
G 158	484.18 ACCEPTANCE OF PATIENTS, POC, MED SUPER  Care follows a written plan of care established and periodically reviewed by a doctor of medicine, osteopathy, or podiatric medicine.  This STANDARD is not met as evidenced by: Based on medical record review and staff interviews, the home health agency failed to notify the primary physician of a missed nursing visit for 1 of 1 clients (# 1). The specifics are as follows:  Per medical record review on 04/30 2013 in the afternoon, Client # 1 was admitted for home care services on 12/22/2012 after a hospital stay for acute osteomyelitis. Physician admission orders were for Skilled Nursing visits 1x/week x 1 week, 2x/week x 1 week, and 1x/week x 7 weeks. During the week of 12/23/2012, the 2nd week of services, only 1 nursing visit is documented as having been done. There is no evidence in the medical record to support that the physician was notified that the visit frequency for skilled visits was not as ordered on admission and no evidence to suggest that a 2nd visit was made.  This is confirmed during interview with the clinical director on 04/30/2013 at 3:15 pm.	G 158		
G 170	484.30 SKILLED NURSING SERVICES	G 170	In-service will be provided to all staff caring for clients  On following the plan of care and all missed visits will  Have supporting documentation on reason for the missed  Visit and evidence of MD notification. Inservice will be  Completed on or before June 23,2013.  <i>accepted POC 6/18/2013 J. Coleman, MD</i>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  <i>[Signature]</i>	TITLE  Director	(X6) DATE  6/3/13
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Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that their safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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G 170 Continued From page 1  
The HHA furnishes skilled nursing services in accordance with the plan of care.

This STANDARD is not met as evidenced by:  
Based on medical record review and staff interview, the agency failed to furnish skilled nursing services in accordance with the plan of care for 1 client in the sample of 1. The specifics are as follows:

Per medical record review on 04/30/2013 in the afternoon, Client # 1 was admitted for home care services on 12/22/2012 after a hospital stay for acute osteomyelitis. Physician admission orders were for Skilled Nursing visits 1x/week x 1 week, 2x/week x 1 week, and 1x/week x 7 weeks. During the week of 12/23/2012, the 2cd week of services, only 1 nursing visit is documented as having been done. There is no evidence in the medical record to reflect why an ordered visit was missed.

G 170

initial competencies will be conducted on all RN staff caring for IV clients on/or before 6/23/13

Annual competencies will be adhered to per policy #

By all RN staff caring for IV clients. Written documentation

Of these competencies will be kept in employee file

Annual competency will be built into electronic minimum Requirements for all RN staff caring for IV clients to Prevent scheduling if RN is not compliant with current Policy.

*accepted POC 6/18/2013 K Coleman, RN*

G 174 This is confirmed during interview with the clinical director on 04/30/2013 at 3:15 pm.  
484.30(a) DUTIES OF THE REGISTERED NURSE

G 174

The registered nurse furnishes those services requiring substantial and specialized nursing skill.

This STANDARD is not met as evidenced by:  
Based on medical record review and staff interview the home health agency failed provide adequately trained registered nurses who could furnish those services requiring substantial and

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G 174 Continued From page 2  
specialized nursing skill for 1 client (Client # 1), requiring care of a PICC (peripherally inserted central catheter) line. The specifics are as follows:

Per review of employee records and agency policies and procedures for care of PICC lines, the agency failed to assure that nurses caring for Client # 1 had current competencies around client high tech needs. PICC line competency for 1 registered nurse (RN) was documented as having been last done on 05/10/2010. Per review of agency task assignments, this RN is responsible for instructing nurses in the care of PICC lines.

During interview with the RN at 3:15 pm s/he confirms that there has been no current competency evaluation since 2010 and that this nurse is responsible for in-servicing other staff in caring for PICC lines.

G 174

MONTHLY MINIMUM REQUIREMENT REPORT WILL BE RUN AT THE BEGINNING OF EACH MONTH TO DETERMINE WHICH CLINICIANS ARE IN NEED OF ANNUAL IV COMPETENCIES AND CLINICAL MANAGER WILL BE RESPONSIBLE FOR ENSURING THAT ALL CLINICIANS ARE UP TO DATE WITH IV TRAINING ON A MONTHLY BASIS.

ALL REPORTS WILL BE KEPT IN A LOG BOOK FOR REVIEW

*accepted POC 6/18/2013 K. Coleman, ea*

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H 001	Initial Comments  An unannounced, on-site self report and complaint investigation was conducted by the Division of Licensing and Protection on 04/30/2013. The following state regulatory deficiencies were identified:	H 001		
H 822 SS=D	8.2(b) Skilled Nursing Services  VIII. Skilled Nursing Services  8.2 The registered nurse shall:  (b) Regularly re-evaluate the patient's nursing needs;  This REQUIREMENT is not met as evidenced by: Based on review of agency policies, client medical record review and staff interviews, the home health agency failed to regularly re-evaluate the patient's nursing needs for 1 client in the sample. The specifics are as follows:  Per medical record review on 04/30/2013 in the afternoon there is no evidence in the chart of Client # 1 to indicate that the agency policy as stated in Bayada policy # 0-790 PICC Line - Dressing change and site care was followed. There is no documentation to support that the external portion of the catheter of a PICC (peripherally inserted central catheter) was measured with dressing changes during nursing visits dated 01/08/2013, 01/04/2013 12/27/2012 or 12/21/2013 This is confirmed during interview with the clinical director on 04/30/2013 at 3:15 pm.	H 822	In-service will be provided to all RN staff  Providing care to IV clients on proper picc line maintenance as per policy #0-790 and evidence of such in-service will be placed in employee file. Completion of in-service will be done on/or before 6/23/13  initial competencies will be conducted on all RN staff caring for IV clients on/or before 6/23/13  Annual competencies will be adhered to per policy #  By all RN staff caring for IV clients. Written documentation of these competencies will be kept in employee file  Annual competency will be built into electronic minimum Requirements for all RN staff caring for IV clients to Prevent scheduling if RN is not compliant with current Policy.	6/23/13

Division of Licensing and Protection  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*[Handwritten Signature]*

accepted POC 6/18/2013 K. Colon  
TITLE Director (X6) DATE 6/3/13

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H 824

Continued From page 1

H 824

H 824  
SS=D

8.2(d) Skilled Nursing Services

H 824

VIII. Skilled Nursing Services

8.2 The registered nurse shall:

(d) Furnish those services requiring substantial and specialized nursing skill;

This REQUIREMENT is not met as evidenced by:  
Based on review of agency policies, client medical record review and staff interviews, the home health agency failed to assure that nursing personnel providing high tech care to 1 client were properly trained to furnish specialized services. The specifics are as follows:

Per review of personnel records and agency policies, the facility failed to assure that the RN providing services and responsible for the instruction of other staff members was current in competencies for care of I/V/ PICC lines. The last competency evaluation for 1 nurse is dated 05/10/2010. During interview on 04/30/2013 at 3:15 pm, the clinical director confirms that inservices for specialized care are not current and the expectation is that they be done at least annually.

MONTHLY MINIMUM REQUIREMENT REPORT WILL BE RUN AT THE BEGINNING OF EACH MONTH TO DETERMINE WHICH CLINICIANS ARE IN NEED OF ANNUAL IV COMPETENCIES AND CLINICAL MANAGER WILL BE RESPONSIBLE FOR ENSURING THAT ALL CLINICIANS ARE UP TO DATE WITH IV TRAINING ON A MONTHLY BASIS.  
ALL REPORTS WILL BE KEPT IN A LOG BOOK FOR REVIEW

*accepted POC 6/18/2013 K Coleman, PA*