Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED
	NVS5543PCA		11/19/2010

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGEL CARE HOME HEALTH	4080 E LAKE MEAD, STE C101 LAS VEGAS, NV 89115

(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
P 000	Initial Comments This Statement of Deficiencies was generated as a result of a complaint investigation conducted in your facility on 11/17/2010 and finalized on 11/19/2010, in accordance with Nevada Revised Statutes, Chapter 449, Personal Care Agencies. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws. Complaint # NV00026866 - 1. Allegation that the PCA did not provide the services Client #1 needed was not substantiated through review of agency documents, interviews of agency staff, and interviews of the doctor, the HHA Administrator, the Physical Therapist, and the visiting Registered Nurse. 2. Allegation that on 11/3/2010 no service was provided for Client #1 by the assigned PCA or another PCA from the agency. This allegation is substantiated as a deficiency. There is no documentation to show that the agency provided service for Client #1 on this date. 3. Allegation that the PCA waited 30 days before revealing Client #1 had a bedsore is not substantiated through interviews with the HHA Registered Nurse and Physical Therapist. 4. Allegations 4, 5, and 6 that the PCA did not follow the orders of the physical therapist; removed the arm brace which reinjured the client's shoulder; and failed to bathe and groom Client #1 were not substantiated through documentation review and interviews with the Physical Therapist, the Registered Nurse, and Client #1's Doctor. The deficiency of the Administrator's failure to	P 000		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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P 000	Continued From page 1 follow the agency's administrative policies and procedures was substantiated through review of agency documents, review of Client #1's file and interviews with agency staff. See TAG's 0450 and 0060(e) and (f). The investigation included: -Observations of the Personal Care Agency office operation. -Interviews were conducted with the Administrator, Operations Manager, and Personal Care Attendant(PCA) of the PCA agency. There were also interviews conducted with the Interim HHA Administrator, the Physical Therapist, and Registered Nurse who provided in-home services to Client #1; and Client #1's doctor. -Review of agency documents, client files, and personnel records: Client #1's record; records for three agency staff and six agency clients;the personnel record for the PCA who provided in-home services for Client #1. -Review of the agency's Complaint/Incident Log; Administrative Policies and Procedures which included: General Standards of Practice by the PCA's on Work Schedules, Service Delivery by the agency, Procedures for following Client's Care Plan, Complaint Procedures for investigating Client Complaints and/or grievance, and Personal Care Services Not Permitted; also the duties and responsibilities of the Administrator. -The agency had processes in place for complaint/grievance resolution. The agency manual had Administrative Policies and Procedures for conducting an investigation of a	P 000		

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P 000	Continued From page 2 client's complaint and/or grievance, but the Administrator failed to follow those policies and procedures. There was no evidence or documentation to show that the Administrator or the Administrator's designee attempted to ensure that the client's complaint was addressed and/or resolved. The following deficiencies were identified:	P 000		
P 060	Section 14.1(2) Administrator Responsibilities 2. The administrator of an agency shall represent the licensee in the daily operation of the agency and shall appoint a person to exercise his authority in his absence. The responsibilities of an administrator include, without limitation: (a) Employing qualified personnel and arranging for their training; (b) Ensuring that only trained attendants are providing services to a client of the agency and that such services are provided in accordance with the functional assessment of the client, the service plan established for the client and the policies and procedures of the agency; (c) Developing and implementing an accounting and reporting system that reflects the fiscal experience and current financial position of the agency; (d) Negotiating for services provided by contract in accordance with legal requirements and established policies of the agency; (e) Providing oversight and direction for attendants and other members of the staff of the agency as necessary to ensure that the clients of the agency receive needed services; (f) Developing and implementing policies and procedures for the agency, including,	P 060		

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P 060	Continued From page 3 without limitation, policies and procedures concerning terminating the personal care services provided to a client; (g) Designating one or more employees of the agency to be in charge of the agency during those times when the administrator is absent; and (h) Demonstrating to the Health Division upon request that the agency has sufficient resources and the capability to satisfy the requests of each client of the agency related to the provision of the personal care services described in the service plan to the client. This STANDARD is not met as evidenced by: Based on record review and staff interviews, the agency failed to ensure that Client #1 received needed services. 1. There is no documentation or evidence to show that the agency offered to provide services to Client #1 on 11/3/2010, or that the offered services were declined. 2. A review of documentation revealed a lack of communication between the administrator and the client concerning terminating the personal care services provided to Client #1. Severity: 2 Scope: 1	P 060		
P 450	Section 21.1(2) Grievance Procedure 2. The administrator of an agency shall establish and enforce a procedure to respond to grievances, incidents and complaints concerning the agency in accordance with the written policies and procedures of the agency. The	P 450		

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P 450	Continued From page 4 procedure established and enforced by the administrator must include a method for ensuring that the administrator or his designee is notified of each grievance, incident or complaint. The administrator or his designee shall personally investigate the matter in a timely manner. A client who files a grievance or complaint or reports an incident concerning the agency must be notified of the action taken in response to the grievance, complaint or report or must be given a reason why no action was taken. This STANDARD is not met as evidenced by: Based on record review and staff interview, the agency failed to provide a procedure for complaint and grievance resolution that met all regulatory requirements. A review of documentation revealed a lack of communication between the administrator or the designee and the client concerning grievances, complaints and incidents. The administrator failed to document resolution to the client's complaint. Severity: 2 Scope: 1	P 450		