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
	NVN5445PCA		01/25/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALL VALLEY HOME HEALTH CARE	368 GRANT DR STE A RENO, NV 89509

(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 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. This Statement of Deficiencies was generated as a result of the Focused State Relicensure survey conducted in your agency on 1/10/11 and finalized on 1/25/11. The Focused State Relicensure survey was conducted at your agency by authority of Chapter 449, Personal Care Agencies. The patient census was 88. Ten client records were reviewed. One client home visit was conducted. Six client telephone interviews were conducted. Ten employee files were reviewed. The following regulatory 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,	P 060		

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 060	Continued From page 1 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, 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 interview, the agency failed to provide oversight and direction for attendants (PCA) and other members of the staff of the agency as necessary to ensure that the clients of the agency receive needed services for 2 of 10 clients. (Clients #4 and #2) 1. During the home visit to Client # 4 on 1/13/11,	P 060		

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P 060	Continued From page 2 an interview with the client and the caregiver in the home of Client #4 revealed that laundry service that was part of the client's service plan was not being consistently provided because the client did not have the money to pay for laundry supplies and the use of a washing/dryer machines. The client stated that he had recently hand washed the cleaning cloths used by the attendant for his housekeeping services. The attendant stated that she did not have paper towels available for cleaning. An interview with the PCA, during the home visit, revealed that she had not informed the administrator of the services not being provided because she thought that the agency couldn't do anything to solve the problem. The attendant revealed that she had not been instructed to report all client information to the administrator. In a follow up interview with the administrator on 1/24/11 the administrator denied having been informed of the services not being provided to the client. 2. Review of Client #2's record and staff interview revealed that this client was refusing the services established on the care plan, being verbally abusive to the attendants and living with unsanitary conditions in her home and with her personal hygiene from 11/5/10 to the date of discharge on 1/22/11. No evidence of home visits or telephone calls addressing the supervisory oversight as required in Tag 0280 was found in client's file dated after 8/11/10. A serious occurrence report was submitted regarding the client's self neglect. No evidence of an investigation of the reports made by the attendant was found. The Training Certificate does not include the required training for Dealing With Difficult	P 060		

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P 060	Continued From page 3 Behaviors. Scope: 1 Severity: 2	P 060		
P 080	Section 14.1(4) Administrator Responsibility Abuse/Neglect 4. The administrator of an agency shall ensure that: (a) The clients of the agency are not abused, neglected or exploited by an attendant or another member of the staff of the agency, or by any person who is visiting the client when an attendant or another member of the staff of the agency is present; and (b) Suspected cases of abuse, neglect or exploitation of a client are reported in the manner prescribed in NRS 200.5093 and 632.472. This STANDARD is not met as evidenced by: Based on record review and interview, the agency failed to report suspected cases of patient neglect as required under NRS 200.5093. for 1 of 10 clients reviewed. (Clients #1) 1. Review of Client #1's record revealed documentation of client's endangerment of self and others by using a hot plate on an unstable, flammable surface on 6/28/10, 8/21/10, 8/26/10, and 9/ 7/10. Record review and staff interview revealed no report was made to Elderly Protective Services. Review of documentation on 8/21/10 concerning a call from the caregiver revealed that the administrator was aware that the client was endangering himself as evidenced by the entry made in the care note, "t/c from the pca, he said that the client is arguing with him	P 080		

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P 080	Continued From page 4 and wants to have the hot plate turned on and left on, I told the pca absolutely not and if terry wont listen or throws a fit, I'm going to call eps, because he is endangering his own life...cd". (b) Documentation of concerns that client is abusing self with excessive use of laxatives was noted on 8/7/10, 8/9/10, 9/7/10, 9/13/10, 9/17/10 and 9/21/10. Review of documentation and staff interview revealed that that the administrator was aware of the client's self neglect/self abuse as evidenced by receiving a request by the client's caseworker on 9/17/10 to "call EPS and let them know about his self neglect". Documentation on 9/21/10 revealed a follow up call from the caseworker was made to the agency, "she wanted to make sure we were sending an SOR and forming a referral to EPS. "I let her know I was waiting on Tammies document, and now it's in so I can send it over." No evidence of documentation relating to a report to EPS was found in client's file. A call made by surveyor 28436 on 1/21/11 to EPS to verify that a report had been made confirmed that a home visit was made by their agency on 9/22/10 to investigate self neglect, abusing laxatives, alcohol abuse, verbal abuse and the use of a hot plate. Scope: 1 Severity: 2	P 080		
P 140	Section 15(5) Infectious Disease 5. Provide for the prevention, control and investigation of infections and communicable diseases; This STANDARD is not met as evidenced by: Based on review of documentation and staff	P 140		

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P 140	Continued From page 5	P 140		
	interview, the agency failed to provide an infection control policy that would allow for the prevention, control and investigation of infections and communicable diseases as required for 2 of 10 clients. (Clients # 1 and #2) Review of the policy and procedure manual, the agency's standard forms and documentation and staff interview revealed that the agency failed to investigate and follow up hospitalizations of clients that involved infectious diseases. Client #1 The agency delayed reporting the worsening condition of the client's infected wound to the agency responsible for providing health care services. There was a six day delay between the agency's plan to notify the client's care coordinator and the actual notification. Client #2 Documentation of a phone call on 10/10/10 to the agency from the hospitalized client revealed a report from the client a diagnosis of a "severe bladder infection" . The client was discharged on 10/11/10 and resumed care. The agency failed to provide documentation of any investigation, verification or follow up to the reported infection. Scope: 1 Severity: 2			
P 230	Section 16.1(a-i) Personnel File Sec. 16. 1. A separate personnel file must be kept for each attendant of an agency and must include, without limitation: (a) The name, address and telephone number of the attendant; (b) The date on which the attendant began working for the agency; (c) Documentation that the attendant has had the	P 230		

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P 230	Continued From page 6 tests or obtained the certificates required by NAC 441A.375; (d) Evidence that the references supplied by the attendant were checked by the agency; (e) Evidence of compliance with NRS 449.179 by the administrator of the agency or the person licensed to operate the agency with respect to the attendant; (f) Proof that, within 6 months after the attendant began working for the agency, the attendant obtained a certificate in first aid and cardiopulmonary resuscitation issued by the American National Red Cross or an equivalent certificate approved by the Health Division; (g) Proof that the attendant is at least 18 years of age; (h) Proof of possession by the attendant of at least the minimum liability insurance coverage required by state law if the attendant will be providing transportation to a client in a motor vehicle; and (i) Documentation of all training attended by and performance evaluations of the attendant. This STANDARD is not met as evidenced by: Based on record review and interview, the agency failed to provide the required documentation for employee files for 6 of 10 employees. (Employees #1, #2, #4, #5, #6 and #7) 1. (c) Employee # 1, and #4 files lacked evidence of a pre-employment physical examination. Employee #4 physical examination did not contain the required information. Employee # 7 annual TB test was given late.	P 230		

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P 230	Continued From page 7 2. (d) Employee # 1, #2, #4, #5, and #6 files lacked evidence that the references provided by the employee were checked as required by statute. Scope: 3 Severity: 2	P 230		
P 430	Section 20.1(2) Disclosure Statement 2. The written disclosure statement must include a description of and information concerning the personal care services offered by the agency, including, without limitation: (a) A statement which is easily understandable to the client indicating that it is not within the scope of the license of the agency to manage the medical and health conditions of clients should the conditions become unstable or unpredictable; (b) The qualifications and training requirements for the attendants who provide personal care services to the clients of the agency; (c) The charges for the personal care services provided by the agency; (d) A description of billing methods, payment systems, due dates for bills for personal care services and the policy for notifying clients of increases in the costs of personal care services provided by the agency; (e) The criteria, circumstances or conditions which may result in the termination of personal care services by the agency and the policy for notifying clients of such termination of personal care services; (f) Procedures for contacting the administrator of the agency or his designee during all hours in which personal care services are provided and the on-call policy of the agency; and (g) Information concerning the rights of clients and the grievance procedure of the	P 430		

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P 430	Continued From page 8 agency. This STANDARD is not met as evidenced by: Based on record review and staff interview, the agency failed to provide disclosure statements to clients that included all mandated requirements for 9 of 10 clients. (Clients # 2, #3, #4, #5, #6, #7, #8, #9 and #10) The disclosure statements lacked documented evidence of the following: (a) A statement which is easily understandable to the client indicating that it is not within the scope of the license of the agency to manage the medical and health conditions of clients should the conditions become unstable or unpredictable. (b) The qualifications and training requirements for the attendants who provide personal care services to the clients of the agency; (f) Procedures for contacting the administrator of the agency or his designee during all hours in which personal care services are provided and the on-call policy of the agency; and (g) Information concerning the rights of clients of the agency. Scope: 3 Severity: 2	P 430		
P 470	Section 21.1(4) Client Rights 4. The agency shall develop a written description of the rights of clients and provide a copy to each client or a representative of the client upon initiation of the service plan established for the client. A signed and dated copy of the receipt of this information by the client or a representative of the client must be maintained in the record of the client.	P 470		

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P 470	Continued From page 9 This STANDARD is not met as evidenced by: Based on record review and staff interview, the agency failed to provide a copy of the description of the Client's Rights to the clients for 9 or 10 records reviewed. (Clients #2, #3, #4, #5, #6, #7, #8, #9, and #10) Record review and staff interview revealed a lack of evidence that the client had received a copy of the description of the Client's Rights. (Clients #2, #3, #4, #5, #6, #7, #8, #9, and #10) Scope: 3 Severity: 2	P 470		
P 490	Section 22.1(1-2) Initial Client Screening Sec. 22. 1. The administrator of an agency or his designee shall conduct an initial screening to evaluate each prospective client ' s requests for personal care services and to develop a service plan for the client or to accept a service plan established for the client. 2. The initial screening and the development or acceptance of a service plan must be documented. The documentation must be dated and signed by the person who conducted the initial screening and developed or accepted the service plan. This STANDARD is not met as evidenced by: Based on record review and staff interview, the agency failed to provide documentation that included the date and signature of the person who conducted the initial screening and developed or accepted the service plan. Review of documentation revealed that the Initial	P 490		

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P 490	Continued From page 10 Screening document lacked documented evidence of a place for the signature of the screener and the date it was completed. Scope: 3 Severity: 1	P 490		

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