Iowa Center for Home Care
HHA Survey Review G-Tags
4th Quarter 2020

Total # of reports: 6
Recertification surveys: 2
Complaint: 3
Extended: 0
Revisits: 1
Inability to competize = 1
Validation survey = 0

Old CMS description of G-tags

New G tags

E006

- Agency did not ensure the emergency preparedness program included a documented, facility-based and community-based risk assessment, utilizing an all-hazards approach specific for the rural health clinic. The Emergency Preparedness Plan, revealed the policy did not include a policy to identify pandemic or COVID-19 related emergencies.

E017

- Agency failed to ensure the clinical record included a copy of an individualized emergency plan developed as part of the comprehensive assessment and/or failed to ensure each patient received a copy of the individualized emergency plan to keep in the home. On the update to the comprehensive assessment at recertification, the chart lacked documentation of a safety assessment to determine the individualized needs of the patient during a disaster or emergency.

E019

- Agency failed to ensure the policy included the development of a procedure to inform state and local officials specifically of homebound patients in need of evacuation due to an emergency situation.

E021

- Agency failed to complete a written emergency preparedness plan that included procedures to inform state and local officials of any on duty staff and patients they

are unable to contact in the event of an interruption of services related to an emergency.

E024

- Agency failed to complete a written policy or procedure to outline the use of emergency staffing strategies which included state and federally designated health care professional. Failure to ensure the agency developed policies and procedures to address the use of state and federally designated volunteers during an emergency, place the agency patients at risk for not having help to meet safety and health care needs.

E037

- Agency failed to ensure training in emergency preparedness specific to a pandemic or COVID-19 for all employed staff and all individuals providing services under arrangement (contract staff).

G514

- Agency failed to provide an initial assessment visit within 48 hours of receipt of referral, and or return home.

G520

- Agency failed to ensure agency staff completed the comprehensive assessment at the start of care by the 5th day after the SOC.

G536

- Agency failed to accurately complete a drug regimen review, including completion of all required components within the required time frames as part of the comprehensive assessment. Recertification lacked documentation of significant side effects. Recertification lacked documentation of a DRR.
- Agency failed to identify medication discrepancies at the time of the drug regimen review. Patients POC included medication that she had not taken for months, but they had not been removed from the POC

G546

- Agency clinicians failed to complete updates to the comprehensive assessment at recertification in the last 5 days of each certification period.

G548

- Agency failed to ensure accurate completion of all pertinent components of the update to the comprehensive assessment within 48 hours of the agency's knowledge of return home from an inpatient facility.

G574

- Agency failed to ensure the accurate completion of all components comprising the POC, including a description of the patient's risk for emergency department visits and hospital readmission with any necessary intervention to address the underlying risk factors.

G576

- Agency failed to update the POC with all new physician orders. Clinical records lacked documentation of updated POC with the interim physician orders for physical and occupation therapy.
- Agency failed to update the POC with all new physician orders. Plans of care lacked new medication orders, lacked interim orders for extra skilled nursing visit, interim order for wound care, and lacked updated POC with the physical therapy plan of care orders.

G582

- Agency failed to identify current vaccination status at the comprehensive assessment completed at the SOC. Nurses would click on the influenza vaccine and pneumonia vaccine options in the visit note, this indicates they have assessed these areas and places the intervention on the visit note, but the intervention note box next to the items are left blank.

G710

- Agency failed to ensure skilled professionals provided care as ordered by the physician in the POC. The nurse failed to follow the physician order for wound care.

G726

- Agency failed to provide nursing services under adequate supervision of a RN, allowing licensed practical nurses-skilled professional assistants to supervise home health aides, evaluate/triage patient needs during agency after hours and care planning/coordination with the physician without documented oversight by the RN. Clinical record included documentation of home health aide supervisory visits by an LPN. An LPN by regulation is defined as a skilled professional assistant and cannot supervise home health aides. Clinical record included an interim physician order, dated and signed by an LPN and was not co-signed by an RN.

G808

- Agency failed to ensure a RN or other appropriate skilled professional who is familiar with the patient, the patient's POC, and the written patient care instructions described in 484.80(g), must make an onsite visit to the patient's home no less frequently than every 14 days. The home health aide does not have to be present during the visit. The aide supervision was performed by an LPN.

G1022

- Agency failed to complete and send a discharge summary to the physician or other health care professional responsible for providing care to the patient after discharge within 5 business days of the patients discharge.
- Found operating in substantial compliance with all previously cited standard level deficient practices related to the Establishment of Emergency Preparedness.
- Agency failed to complete and send a transfer summary to the physician or other health care professionals responsible for providing care to the patient while in a health care facility within 2 business days of knowledge of the occurrence of the transfer.

G1024

- Agency failed to ensure all documentation in the clinical record included a date, time, staff signature and staff title. Physical Therapy note lacked signature of time. Home Health Aide handwritten notes lacked staff title.