



Department
of Health

Frequently Cited Deficiencies

Center for Home and Community Based Services

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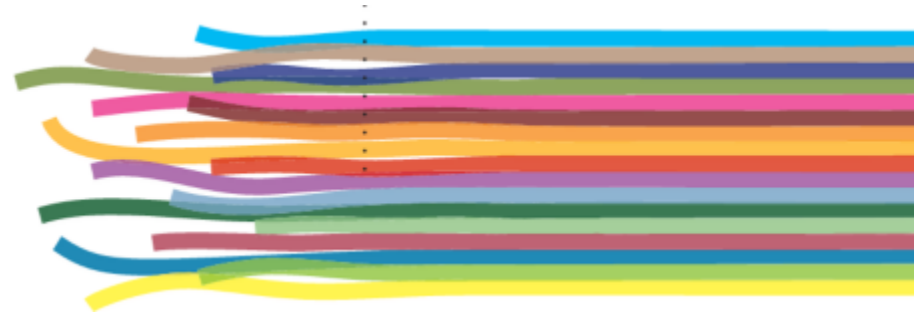
Objectives



Identify the top 10 frequently cited statewide deficiencies for Licensed Home Care Services Agencies (LHCSAs)



To review NYS standards for each of the top ten cited deficiencies



FREQUENTLY CITED DEFICIENCIES

Frequently Cited Deficiencies

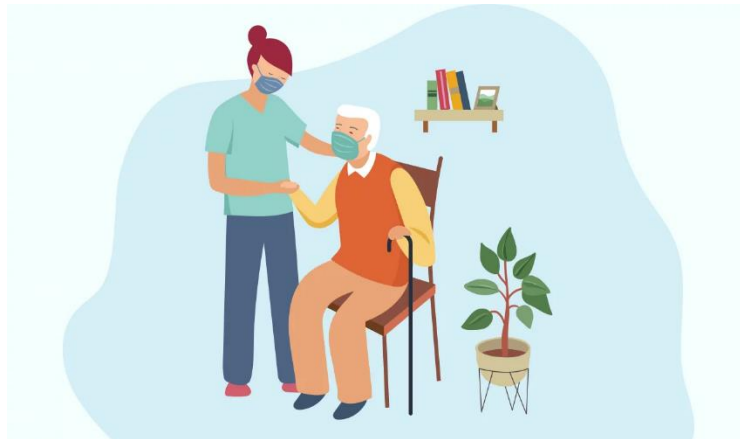
- Statewide for Licensed Home Care Services Agencies (LHCSA) surveys conducted
- Time period of:
June 1, 2021 - May 31, 2022
- Top 10 Citations

Top Ten Deficiencies

- 1 766.3 (b) – Plan of Care
- 2 766.9 (c) – Governing Authority
- 3 766.9 (l) – Governing Authority
- 4 766.3 (d) – Plan of Care
- 5 766.1 (a)(1) – Patient Rights
- 6 766.5 (d) – Clinical Supervision
- 7 766.5 (b)(1) – Clinical Supervision
- 8 766.4 (d) – Medical Orders
- 9 766.9 (d) – Governing Authority
- 10 766.11 (d)(4) – Personnel

#1 - 766.3 (b) Plan of Care

A plan of care is established for each patient based on a professional assessment of the patient's needs and includes pertinent diagnosis, prognosis, need for palliative care, mental status, frequency of each service to be provided, medications, treatments, diet regimens, functional limitations and rehabilitation potential.



#2 - 766.9 (c) Governing authority

(c) Ensure the development of a written emergency plan which is current and includes procedures to be followed to assure health care needs of patients continue to be met in emergencies that interfere with delivery of services, and orientation of all employees to their responsibilities in carrying out such a plan.



Compliance with requirements in DAL DHCBS 16-11 issued December 1, 2016.

#3 - 766.9 (I) Governing Authority

(I) appoint a quality improvement committee to establish and oversee standards of care. The quality improvement committee shall consist of a consumer and appropriate health professional persons. The committee shall meet at least four times a year to:

(1) review policies pertaining to the delivery of the health care services provided by the agency and recommend changes in such policies to the governing authority for adoption;



#3 - 766.9 (l) Governing Authority

(Continued)

(2) conduct a clinical record review of the safety, adequacy, type and quality of services provided which includes:

(i) random selection of records of patients currently receiving services and patients discharged from the agency within the past three months; and

(ii) all cases with identified patient complaints as specified in subdivision (j) of this section;

#3 - 766.9 (l) Governing Authority

(Continued)

- (3) prepare and submit a written summary of review findings to the governing authority for necessary action; and
- (4) assist the agency in maintaining liaison with other health care providers in the community.

#4 - 766.3 (d) Plan of care

The governing authority or operator shall ensure that:

(d) The plan of care is reviewed and revised as frequently as necessary to reflect the changing needs of the patient, but no less frequently than every six months;



#5 - 766.1(a)(1) Patient Rights

The governing authority shall establish written policies regarding the rights of the patient and shall ensure the development of procedures implementing such policies. These rights, policies and procedures shall afford each patient the right to:

(1) be informed of these rights, and the right to exercise such rights, in writing prior to the initiation of care, as evidenced by written documentation in the clinical record;



#6 - 766.5 (d) Clinical Supervision

(d) in-home supervision by professional staff of home health aides and personal care aides occurs:

(1) to demonstrate to and instruct the aide in the treatments or services to be provided with successful re-demonstration by the aide during the initial service visit or where there is a change in personnel providing care, if the aide does not have documented training and experience in performing the tasks prescribed in the plan of care;



#6 - 766.5 (d) Clinical Supervision

(Continued)

(2) where any of the conditions set forth in paragraph (3) of subdivision (b) of this section occur, to evaluate the condition and initiate any revision in the plan of care which may be needed; and

(3) to instruct the aide as to the observations and written reports to be made to the supervising nurse or therapist

#7-766.5 (b)(1) Clinical Supervision

All staff delivering care in patient homes are adequately supervised. The department shall consider the following factors as evidence of adequate supervision:

Staff regularly provide services at the times and frequencies specified in the patient's plan of care and in accordance with the policies and procedures of their respective services.



#8 - 766.4(d) Medical Orders

(d) Medical orders shall reference all diagnoses, medications, treatments, prognoses, need for palliative care, and other pertinent patient information relevant to the agency plan of care; and

(1) shall be authenticated by an authorized practitioner within 12 months after admission to the agency; and

(2) when changes in the patient's medical orders are indicated, orders, including telephone orders, shall be authenticated by the authorized practitioner within 12 months.



#9 - 766.9 (d) Governing authority

(d) adopt and approve amendments to written policies regarding the management and operation of the home care services agency and the provision of health care services;



#10 - 766.11(d)(4) Personnel

(d) that a record of the following tests, examinations or other required documentation is maintained all personnel who have direct patient contact:

for all personnel prior to employment or affiliation, except for personnel with no clinical or patient contact responsibilities who are located in a building or site with no patient care services, an initial individual tuberculosis (TB) risk assessment, symptom evaluation, and TB test (either tuberculin skin test or Food and Drug Administration (FDA) approved blood assay for the detection of latent tuberculosis infection), and annual assessments thereafter. Positive findings shall require appropriate clinical follow-up. The agency shall develop and implement policies regarding follow-up of positive test results, including procedures for facilitating and documenting treatment for latent TB infection where indicated. Annual TB assessment shall include education, individual risk assessment, and follow-up tests as indicated.



Questions

Bureau Mail Log (BML) Links

Home Care: homecare@health.ny.gov

Home Care Licensure and
Certification: homecareliccert@health.ny.gov

Home Care Registry: hcreg@health.ny.gov

HHA Training Programs: hhatp@health.ny.gov

PCA Training Programs: pcatp@health.ny.gov



DOH Regional Offices

MARO- New York City	MARO- New Rochelle	MARO- Central Islip	Capital District	Central New York	Western	Western- Rochester
<p><i>New York City Office 90 Church Street - 14th Fl Between Barclay and Vesey Streets New York, NY 10007-2919 (212) 417-5550</i></p>	<p><i>New Rochelle Office 145 Huguenot Street, 6th floor New Rochelle, NY 10801-5291 (914) 654-7007</i></p>	<p><i>Central Islip Office Court House Corporate Center 320 Carlton Avenue Suite 500-5th Fl Central Islip, NY 11722 (631) 851-4300</i></p>	<p><i>Capital District Office 875 Central Ave Albany, NY 12206-1309 (518) 408-5287</i></p>	<p><i>Central New York Regional Office 217 South Salina Street Syracuse, NY 13202-1380 (315) 477-8472</i></p>	<p><i>Buffalo Office Ellicott Building 295 Main Street, Suite 300 Buffalo, NY 14203 (716) 847-4302</i></p>	<p><i>Rochester Office Eagle's Landing 1565 Jefferson Road, Suite 120 Rochester, NY 14623 (585) 423-8100</i></p>

