Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	747977	06/08/2023
Name of Provider or Supplier	**Street Address, City, State**	
Quality First Home Health Care Inc	2503 N Us Highway 281, Ste 100, Marble Falls, TX	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
E0000	Purpose of Visit: Recertification Survey Entrance Conference: 06/06/2023 at 11:11 a.m. with the Administrator/Alternate Director of Nursing. Agency Census: Licensed and Certified (L&C)-0 Exit Conference: 06/08/2023 at 4:36 p.m. with the Administrator/Alternate Director of Nursing and the Regional Director of Operations. The preliminary findings were discussed, and written instructions were provided for submitting a plan of correction within ten days of the receipt of the Statement of Licensure Violations. Abbreviations: BBP-Bloodborne Pathogens OSHA-Occupational Safety and Health Administration LVN-Licensed Vocational Nurse

	DON -Director of Nursing CFR -Code of Federal Regulations HHA-Home Health Agency SOC-Start of Care POC-Plan of Care
G0000	Purpose of Visit: Recertification Survey Entrance Conference: 06/06/2023 at 11:11 a.m. with the Administrator/Alternate Director of Nursing. Agency Census: Licensed and Certified (L&C)-0 Exit Conference: 06/08/2023 at 4:36 p.m. with the Administrator/Alternate Director of Nursing and the Regional Director of Operations. The preliminary findings were discussed, and written instructions were provided for submitting a plan of correction within ten days of the receipt of the Statement of Licensure Violations. Abbreviations: BBP-Bloodborne Pathogens OSHA-Occupational Safety and Health Administration LVN-Licensed Vocational Nurse DON -Director of Nursing CFR -Code of Federal Regulations

	HHA-Home Health Agency SOC-Start of Care POC-Plan of Care
G0580	Only as ordered by a physician CFR(s): 484.60(b)(1) Drugs, services, and treatments are administered only as ordered by a physician or allowed practitioner. This ELEMENT is not met as evidenced by: Based on record review and interview, the agency failed to enforce its written policy for signature on physician orders for three of eight (Patient #’s 2, 3 and 6) clients whose records were reviewed. This deficient practice placed clients at risk of not receiving the necessary care and services. The findings included: Review of the agency's policy titled, "Plan of Care", dated 01/01/22, revealed in part, "... II. The Plan of Care will be signed and dated by a physician and/or non-physician practitioner at certification and recertification and before the claim for each sixty (60) day episode for services...VI. The individualized plan of care must be reviewed and revised by the physician and/or non-physician practitioner who is responsible for the home health plan of care and the agency as frequently as the patient’s /client’s condition or needs require, but no less frequently than once every sixty (60) days, beginning with the start of care date…" Review of Patient #2's Plan of Care with certification periods of 07/11/22-09/08/22 revealed a physician signature date of 09/23/22.

	Review of Patient #3's Plan of Care with certification period of 06/15/22-08/13/22 revealed a physician signature date of 08/31/22. Review of Patient #6's Plan of Care with certification period of 06/06/22-08/04/22 revealed no physician signature. During an interview on 06/08/23 at 2:37 p.m., the findings above were reviewed and discussed with the Administrator/Alternate DON; she confirmed that the Plans of care were missing physician signatures or were signed outside of the certification periods.
G0646	Program activities CFR(s): 484.65(c) Standard: Program activities. The HHA's performance improvement activities must-- This STANDARD is not met as evidenced by: Based on record review and interview, the agency failed to enforce written policies on

compliance with the OSHA, 29 CFR Part 1910.1030 and Appendix A relating to Bloodborne Pathogens, in that, two of ten employees (Alternate Administrator (Employee B) and Quality Assurance Nurse (Employee E) whose personnel records were reviewed were not current with annual BBP training.

This failure could place the agency's employees and clients at risk for exposure to communicable and infectious diseases.

The findings included:

Review of the agency's policy titled "Infection Control Program" with a revision date of 07/01/20 revealed in part, "...V. Education A. Employees 1. Upon hire and annually thereafter, all agency employees will be educated regarding the policies and procedures related to: a. Infection Control Program…c. Bloodborne/Airborne /HIV Pathogen Program…”.

Review of the agency's policy titled "Agency Inservices and Education" with a revision date of 01/13/18 revealed in part, "...A. All staff are required to attend the following inservices annually, either internally or externally: 2. Infection Control 3. Exposure Control Bloodborne/Airborne Pathogen Program…”.

Review of the agency's policy titled "Personnel Records" with a revision date of 01/13 /18 revealed in part, "...A. Personnel contents for agency employees may include but not be limited to:...5. Education, training verification…12. Educational attendance…”.

Review of the personnel records revealed in part:

Alternate Administrator had a hire date of 03/22/2022 and the personnel record failed to include BBP training for the year 2023. Further review revealed no documented evidence that the annual bloodborne training was maintained by the agency.[HC(1]

	Quality Assurance Nurse (LVN E) had a hire date of 04/12/2004 and the personnel record failed to include BBP training for the year of 2020, 2021, 2022. Further review revealed no documented evidence that the bloodborne training was maintained by the agency . During an interview and record review on 06/07/2023 at 12:21 p.m., the findings were reviewed and discussed with the Administrator/Alternate DON, the administrator confirmed the findings. OSHA 29 CFR 1910.1030 contains the following in part: "The employer shall train each employee with occupational exposure in accordance with the requirements of this section. Such training must be provided at no cost to the employee and during working hours. The employer shall institute a training program and ensure employee participation in the program. Training shall be provided as follows: At the time of initial assignment to tasks where occupational exposure may take place; at least annually thereafter."