



Benchmark of the Week

Top 10 standard-level deficiencies for 2021

Six of the top 10 standard-level survey citations from CMS involve plan-of-care issues. The data reflect 2,452 home health standard surveys conducted through November 2021, according to the Quality, Certification and Oversight Reports (QCOR). (See related story, p. 3.)

The Medicare list mirrors Joint Commission's 2020 home care surveys of 1,246 home care organizations. The Joint Commission survey reports four of the top-10 findings were related to creating and following a complete and accurate home health plan of care; three were related to infection control; and the remaining findings related to not maintaining a complete, reconciled and accurate medication list.

Medicare's full text statement of deficiencies file available on CMS' website includes details of the fiscal year 2021 deficiency findings (https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/HHAs).

Rank	% of surveys	Citation content
1	12.7%	G574 -The individualized <i>plan of care must include</i> the following:
		(i) All pertinent diagnoses;
		(ii) The patient's mental, psychosocial, and cognitive status;
		(iii) The types of services, supplies, and equipment required;
		(iv) The frequency and duration of visits to be made;
		(v) Prognosis;
		(vi) Rehabilitation potential;
		(vii) Functional limitations;
		(viii) Activities permitted;
		(ix) Nutritional requirements;
		(x) All medications and treatments;
		(xi) Safety measures to protect against injury;
		(xii) A description of the patient's risk for emergency department visits and hospital re-admission, and all necessary interventions to address the underlying risk factors.
		(xiii) Patient and caregiver education and training to facilitate timely discharge;
		(xiv) Patient-specific interventions and education; measurable outcomes and goals identified by the HHA and the patient;
		(xv) Information related to any advanced directives; and
		(xvi) Any additional items the HHA or physician may choose to include.
2	8.4%	G536 –A review of all <i>medications</i> the patient is currently using in order to identify any potential adverse effects and drug reactions, including ineffective drug therapy, significant side effects, significant drug interactions, duplicate drug therapy, and noncompliance with drug therapy.
3	6.0%	G572 – Each patient must receive the home health services that are written in an individualized plan of care that identifies patient-specific measurable outcomes and goals, and which is established, periodically reviewed, and signed by a doctor of medicine, osteopathy, or podiatry acting within the scope of his or her state license, certification, or registration. If a physician refers a patient under a plan of care that cannot be completed until after an evaluation visit, the physician is consulted to approve additions or modifications to the original plan.



4	5.6%	G682 - Infection Prevention - The HHA must follow accepted standards of practice, including the use of			
"	3.070				
		standard precautions, to prevent the transmission of infections and communicable diseases.			
5	5.3%	G1022 - Discharge and Transfer Summaries - A completed discharge summary that is sent to the primary care			
		practitioner or other health care professional who will be responsible for providing care and services to the pa-			
		tient after discharge from the HHA (if any) within 5 business days of the patient's discharge; or			
		(ii) A completed transfer summary that is sent within 2 business days of a planned transfer, if the patient's			
		care will be immediately continued in a health care facility; or			
		(iii) A completed transfer summary that is sent within 2 business days of becoming aware of an unplanned			
		transfer, if the patient is still receiving care in a health care facility at the time when the HHA becomes			
		aware of the transfer.			
6	4.8%	G580 - Drugs, services, and treatments are administered only as ordered by a physician			
7	4.8%	G710 - Providing services that are ordered by the physician as indicated in the plan of care			
8	4.6%	G578 – Conformance with <i>physician orders</i>			
9	4.6%	G684 - Infection Control - The HHA must maintain a coordinated agency-wide program for the surveillance, identifica-			
		tion, prevention, control, and investigation of infectious and communicable diseases that is an integral part of the HHA's			
		quality assessment and performance improvement (QAPI) program. The infection control program must include:			
		A method for identifying infectious and communicable disease problems; and			
		A plan for the appropriate actions that are expected to result in improvement and disease prevention.			
10	3.8%	G590 - The HHA must <i>promptly alert the relevant physician(s)</i> to any changes in the patient's condition or needs			
		that suggest that outcomes are not being achieved and/or that the plan of care should be altered.			
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Most challenging POC requirements in 2020

Here's a look at some of the most common deficiencies cited in 1,246 surveys conducted by Joint Commission home care surveyors during 2020 .

Standard	Element of performance (EP)	%
		Noncompliant
PC.01.03.01 The organization plans the pa-	EP 10 For home health agencies that elect to use The Joint	48.8%
tient's care.	Commission deemed status option: The individualized plan of	
	care specifies the care and services necessary to meet the	
	needs identified in the comprehensive assessment	
	EP 5 The written plan of care is based on the patient's goals and the	20.7%
	time frames, settings, and services required to meet those goals.	
	EP 55 For home health agencies that elect to use The Joint	23.7%
	Commission deemed status option: There is a plan for the	
	patient that provides instructions if there is an emergency	
	that might disrupt the care treatment or service provided by	
	the organization	
PC.02.01.03 The organization provides	EP 8 For home health agencies that elect to use The Joint	34.6%
care, treatment,or services in accordance	Commission deemed status option: The organization follows-	
with orders or prescriptions, as required by	physician or allowed practitioner orders when administering	
law and regulation.	medications or providing care, treatment, or services.	
Source: Kaiser, K. Hallmarks of Effective Hom	e Health and Hospice Care Plans. The Source, 19(7), 12-17	