

OASIS Accuracy Case
Home Health Agency Learning Activity

| Item | Description |
|--------------------------|--|
| Objective: | Given a scenario, the surveyor will identify areas of concern, potential citations, and related regulatory requirements. |
| Prior to Class: | Print copies of the scenario. Have the home health regulations available. Have flip charts and markers available. |
| Total Time for Activity: | 60 minutes (The time given is approximate.) |
| Set-Up: | Set class up for small groups as needed.* |

| Step: | Preceptor Instructions: | Activity Time: |
|-------|---|----------------|
| 1. | Divide the class into small groups.* | 5 min. |
| 2. | Each group should select someone to take notes on the flip charts and be prepared to report to class. Groups must answer the questions provided. | 5 min. |
| 3. | Give the teams time to read and discuss the scenario. | 25 min. |
| 4. | As the groups are completing this task, walk around the room and listen to the conversations. Provide direction where appropriate. Warn the class when the time available is down to the last five minutes. | |
| 5. | Debrief each scenario by discussing key points contained in the Preceptor Answer Sheet. | 25 min. |

*For individual assignment, provide the worksheet and support where appropriate during the completion of the activity. Once completed, review answers against the answer sheet, and discuss the key points together from the scenario.

Surveyor:

Date:

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Directions: Read the scenario and working as a team (if able), document your answers on the flip chart provided.

Data Accuracy Scenario

On 11/10/12, during a standard survey, review of 10 clinical records showed the OASIS (Outcome and Assessment Information Set (OASIS) questions required by CMS with comprehensive assessments in home health) contained answers for data collected that did not appear to be accurate in at least three records (numbers three, six, and ten).

Record review showed:

In Record #3: The Start of Care (SOC) assessment, with OASIS data questions, showed nurses answered M2250 (synopsis of care) “yes,” that the physician-ordered Plan of Care (POC) included diabetic lower extremity and/or feet monitoring, and education was to be provided to patient or family caregiver regarding proper foot care. Yet, review of the POC, signed by the physician 09/01/12, failed to show any plan for monitoring the diabetic lower extremities, or a plan to provide any education to the patient/family/caregiver.

In Record #6: The SOC assessment with OASIS questions (done 09/27/12) showed nurses answered M2000 (drug regimen review) “yes,” that a drug regimen review was done and “no problems” were found. However, an agency drug interaction computer program print-out showed a “major” interaction possible between Warfarin (a blood thinner) and two other drugs. The clinical record included hospital discharge orders, which contained two medications (Lidoderm pain patches and Vitamin B12 injections) not listed in the SOC medication review. The admitting nurse also answered M2250 (synopsis of care) “yes,” saying the physician-ordered POC included interventions to prevent pressure ulcers. Yet the POC, signed by the physician 10/23/12, had no interventions for pressure ulcer prevention included.

In Record #10: The SOC (09/23/12) assessment by the nurse showed the admitting nurse marked OASIS item M2250 (synopsis of care) “yes” to indicate the physician-ordered POC included specific parameters to notify the physician of changes or other clinical findings. But review of the patient’s POC, signed by the physician 10/01/12, showed it contained no parameters for reporting vital signs, blood test results, blood pressures and/or blood sugars, or any other clinical measurements.

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Survey Team Questions:

1. In light of the clinical record review findings, what other sources of information or reviews might the surveyor need to access and/or investigate?
2. What questions do you have and who would you ask?

Findings of Further Review

Interviews of nurses showed:

Record #3: Interview on 11/11/12 showed the Registered Nurse (RN A) agreed the SOC OASIS answer for M2250 was incorrect. RN A agreed the POC, signed by the physician, failed to include orders for diabetic foot care, monitoring of lower extremities, or patient and/or caregiver education.

Record #6: Interview on 11/11/12 showed the Registered Nurse (RN B) verified she admitted the patient to home health. RN B agreed the medication record she filled out at SOC failed to include all the medications the patient was taking. Specifically, the medication record at admission failed to include Lidoderm pain patches and Vitamin B12 injections. Therefore, RN B agreed she failed to conduct a full drug regimen review of all medications, and failed to contact the doctor to reconcile a complete drug list. RN B said the patient had a Stage 2 pressure ulcer on the bottom (coccyx) at admission, and RN B verified she failed to include the preventive skin barrier cream in the POC for physician approval.

Record #10: Interview of the Registered Nurse (RN C) showed she “forgot” to include parameters for blood glucose monitoring in the POC sent to the physician at the SOC. RN C agreed the M2250 answer regarding parameters was answered incorrectly, since the physician’s orders failed to include the blood glucose parameters.

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Survey Team Questions:

1. In light of the clinical record review findings, what other sources of information or reviews might the surveyor need to access/ investigate?
2. What deficiency/deficiencies might the surveyor consider citing for these findings?

Preceptor Answer Sheet

1. In light of the clinical record review findings, what other sources of information or reviews might the surveyor need to access and/or investigate?

The surveyor needs to conduct interviews of the nurses who documented the OASIS assessment answers to see if they can describe reasons for the apparent discrepancies, or how they decided to answer as they did. The surveyor may need to review the agency's policy on OASIS and comprehensive assessment completion and may need to interview the agency personnel who enter and transmit OASIS data by computer.

2. What deficiency/deficiencies might the surveyor consider citing for these findings?

We cited G322, due to inaccurate OASIS data item answers. We could also cite failure to complete a drug regimen review (G337) since we found evidence the nurses failed to do a complete review of all medications at the time of the comprehensive assessment.