

Licensed Professional Services Case

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 hospice 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 appropriate.*

Step	Preceptor Instructions	Activity Time
1.	Divide the class into 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. 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.	25 min.
4.	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:

Licensed Professional Services Case

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

Urinary Catheter Removal Scenario

On a Medicare complaint survey, the complainant said the hospice nurse failed to remove the urinary catheter and notify the coroner of the death before the funeral home received the body. Review of the hospice policy titled "Post-Mortem Care" says if a patient dies at home, "...the hospice nurse MUST notify the county or parish coroner immediately." The policy also says nurses who go to a home to verify a death should do the following:

- "If the hospice nurse is not present when the patient dies, the nurse will, on his or her arrival, determine that the death has indeed occurred" and document the time the nurse pronounced the death.
- If the death is not witnessed by a nurse, document quotes from the family and/or caregiver of when they witnessed or discovered the death at home.
- Determine death by listening for heartbeat and/or respirations with stethoscope, and check pupil response with penlight.
- Do not move the body or call the funeral home to pick up the body until given permission by coroner.
- Remove urinary catheter (if present).
- Dispose of the deceased patient's medications according to the Controlled Substance Disposal policy.
- Notify the attending doctor of the death per the doctor's preference (at night or daytime only).

Survey Team Questions:

1. What are your next steps?

Surveyor:

Date:

Licensed Professional Services Case

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

Urinary Catheter Removal: Call the Coroner! Scenario

On survey, clinical record review showed: Coroner not notified of the death when the on-call nurse made the visit and pronounced the patient death on 02/11/10 at 1:20 AM, over an hour and a half after the family called to say the patient apparently died. The coroner was not notified at the time of death. The Notice of Death Form in the clinical record showed on 02/17/10 (six days after the death) the attending doctor said he or she “had not been notified of the patient’s death.” Interview with the on-call hospice nurse, who pronounced the patient’s death, showed: RN admitted he or she called the funeral home to meet him or her at the house prior to arriving to pronounce the patient, and agreed he or she did not call the coroner or attending physician because “they don’t want to be called in the middle of the night,” so staff just faxed death information to them. The Registered Nurse (RN) acknowledged he or she failed to ask the family for the time of death they observed, and only documented “Patient expired in his home with family present.” The RN admitted the patient did have a urinary catheter, but the RN did not remove it prior to sending the body to the funeral home because to remove the catheter requires the use of a “5cc syringe.” The RN said that at the time of the patient’s death, he or she did not have a syringe available. The RN said, “I should have been more prepared.” The RN acknowledged he or she did not take a list of the patient’s medications to the on-call visit, and failed to determine the existence of all medications the patient was taking. Per review of medications in the physician’s orders, and the destruction of only two of these medications by RN on 02/11/10, the RN did not destroy all of the controlled drugs in the home. RN said he or she asked the family if they had a medication list in a folder; they could not find a list.

Survey Team Questions:

1. Would you cite and, if so, what? Defend your answer.

Surveyor:

Date:

Licensed Professional Services Case

Preceptor Answer Sheet

Urinary Catheter Removal

1. What are your next steps?

- Review clinical record for this patient and a sampling of closed records for patients who have died.
- Interview the on-call hospice RN that was involved.

Urinary Catheter Removal: Call the Coroner!

1. Would you cite and, if so, what? Defend your answer.

- We cited L584, Licensed Professional Services: nursing not following policies of agency.

(State Operations Manual Appendix M - Guidance to Surveyors: Hospice 2015)