

PRINTED: 04/04/2011
FORM APPROVED

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CPA-0069	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/29/2011
NAME OF PROVIDER OR SUPPLIER PCC STRIDE INC		STREET ADDRESS, CITY, STATE, ZIP CODE 3091 BLADENSBURG ROAD NE WASHINGTON, DC 20018		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments An annual inspection was conducted from March 28, 2010 through March 29, 2011. The survey findings were based on record review and staff interviews. The sample sizes were ten (10) personnel records based on a census of ten (10), one (1) foster parent record based on a census of one (1), and five (5) new board member records. The agency was found to be in substantial compliance with Title 29 Chapter 16, Standards of Placement, Care, and Services for Child Placing however deficiencies were cited.	S 000	All deficiencies will be cured by management staff and the identified employees on the project. Notified staff of deficiencies. Quarterly review of records will be instituted in order to comply with regulation.	4/15/2011
S 095	1811.1(c) Personnel Records (c) At least three (3) letters of reference: This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to obtain a letter of reference for one (1) of the ten (10) personnel records reviewed. (Employee #6) The finding includes: Review of personnel records on March 28, 2011, at approximately 12:00 p.m., revealed that Employee #6's record did not have three letters of reference included in the record. An interview with the Program Manager on March 29, 2011, at approximately 3:00 p.m. confirmed the findings.	S 095	Upon initial hire date and on-going. Current staff have completed at least three reference letters to meet regulation compliance. Employee #6 has been notified of infraction and the deficiency will be cured by April 15th.	4/15/2011
S 103	1811.1(k) Personnel Records (k) Physical examination reports required in section 1812.2;	S 103	PCCS will comply with employee requirements for physical exams. Prior to starting employment, all candidates will comply with requirement.	4/15/2011

Health Regulation Administration

Cynthia Crests Marshall
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Executive Director
TITLE

(X5) DATE

4/12/11

STATE FORM

OKC011 P.C.C. Stride

If continuation sheet 1 of 2

Department of Health
Health Regulation & Licensing Administration
Intermediate Care Facilities Division
609 North Capitol St., N.E.
Washington, D.C. 20002

Received 4/19/11

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NAME OF PROVIDER OR SUPPLIER PCC STRIDE INC		STREET ADDRESS, CITY, STATE, ZIP CODE 3001 BLADENSBURG ROAD NE WASHINGTON, DC 20018		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 103	Continued From page 1 This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to ensure that one (1) of ten (10) employees had available for review, a current physical examination report as required in section 1612.2. (Employee #6) The finding includes: Review of personnel records on March 28, 2011, at approximately 12:00 p.m. revealed that Employee #6 failed to have a current physical examination in their record. An interview with the Program Manager on March 29, 2011, at approximately 3:00 p.m. confirmed the findings.	S 103		
S 105	1611.1(m) Personnel Records (m) Job position description. This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to obtain a job position description for two (2) of ten (10) employee's. (Employee #6 and #7) The finding includes: Review of personnel records on March 28, 2011, at approximately 12:00 p.m. and 12:20 p.m. respectively, revealed that employee's #6 and #7 did not have available for review a copy of their job position descriptions. An interview with the Program Manager on February 29, 2011, at approximately 3:00 p.m. confirmed the findings.	S 105	The HR manager will upon setting up a personnel record will have a check list of required HR documents. A quarterly review of the HR files will be instituted by the HR manager and a report will be submitted to the program manager	4/15/2011 4/15/2011