

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HCA-0002	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  09/05/2013
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NAME OF PROVIDER OR SUPPLIER  
**COMMUNITY CARE NURSING SERVICES OF D**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**6031 KANSAS AVE NW  
WASHINGTON, DC 20002**

(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
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H 000 INITIAL COMMENTS

H 000

An annual survey was conducted for your agency from August 28, 2013, through September 5, 2013, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to 45 patients and employs 81 staff to include licensed nurses, home health aides and other administrative staff. The findings of the survey were based on a review of 11 current patients' records, 3 discharge patients' records, 10 personnel files, 5 home visits and 6 current patients' phone calls.

*Received 10/18/13*  
Department of Health  
Health Regulation & Licensing Administration  
Intermediate Care Facilities Division  
899 North Capitol St., N.E.  
Washington, D.C. 20002

H-148: Documentation of current CPR certification

H 148 3907.2(d) PERSONNEL

H 148

Correction: A new copy of RN # 2 CPR card is enclosed.

Each home care agency shall maintain accurate personnel records, which shall include the following information:

The Home Care Agency will

(d) Documentation of current CPR certification, if required;

1. Utilize a tracking template that will include the name of the employee and the date of expiration
2. Review updated tracking template for accuracy and subsequently make contact with the employees in need of a current CPR by phone and/or by letter correspondence
3. Review personnel files of inactive contractors prior to placing them on the active contractor roster
4. Require that inactive contractor to submit required updates prior to accepting a new assignment
5. Once CPR is received the HR personnel shall copy the CPR to ensure that all the components of the CPR card including the dates are clear and legible.
6. The tracking shall be updated on a monthly basis
7. This task will be completed by the human resources department
8. This corrective action will be completed on or before the 30<sup>th</sup> of November 2013.

This Statute is not met as evidenced by:  
Based on record review and interview, it was determined the Home Care Agency (HCA) failed to include documentation of current CPR certification for one (1) of ten (10) employees files. (RN #2)

The finding include:

On August 29, 2013, a record review of register nurse (RN) #2's record starting at 1:00 p.m., revealed an enlarged copy of a CPR certification/card however the date could not be seen.

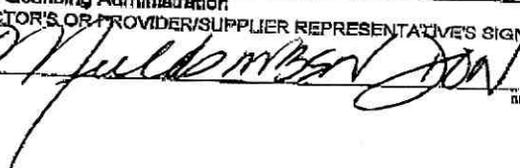
During an interview with the human resources

Health Regulation & Licensing Administration  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE:

STATE FORM



VKQ611

*10/18/13*

If continuation sheet 1 of 10

Health Regulation & Licensing Administration

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H 148 Continued From page 1 H 148

personnel on August 29, 2013, starting at approximately 2:00 p.m., she indicated RN #2's CPR certification was current and she would fax the dated CPR card to DOH/HRLA. It should be noted DOH/HRLA did not receive an e-mail of the dated CPR certification/card.

H 157 3907.2(m) PERSONNEL H 157

Each home care agency shall maintain accurate personnel records, which shall include the following information:

(m) Documentation of acceptance or declination of the Hepatitis Vaccine; and...

This Statute is not met as evidenced by: Based on record review and interview, it was determined the home care agency (HCA) failed to ensure that all personnel records maintained for all home health aides (HHAs) included documentation of acceptance or declination of the Hepatitis B vaccine, for three (3) of ten (10) of employees' in the sample. (Register nurse (RN #2), director of nursing (DON) and RN #3)

The findings include:

1. On August 29, 2013, a review of RN #2's personnel record starting at approximately 1:00 p.m., revealed the acceptance or declination of the Hepatitis Vaccine document was not in the personnel record.
2. On August 29, 2013, a review of the DON's

H-157: Documentation of Acceptance or Declination of Hepatitis B Vaccine

Correction: (See Enclosed)

1. RN #2 now has a Hep B declination form completed
2. The DON had a declination form in a separate HR Medical Record binder
3. RN #3 had a declination form in a separate HR Medical Record binder

The Home Care Agency will

1. Utilize a tracking checklist for new hires that includes a place to note that the Hepatitis B declination/ acceptance form has been obtained/ completed.
2. HR files medical profile records will be readily retrieved by qualified office personnel.
3. The previous large binder of employee medical profile information will be discontinued.
4. The medication profile information will now be placed in a separate folder adjacent to the initial/annual non-medical application requirements and credentials
5. Review personnel files of inactive contractors prior to placing them on the active contractor roster
6. Require that inactive contractor to submit required updates prior to accepting a new assignment
7. This task will be completed by the human resources department
8. This corrective action will be completed on or before November 30<sup>th</sup> 2013.

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H 157 Continued From page 2 H 157

personnel record starting at 1:35 p.m., revealed the acceptance or declination of the Hepatitis Vaccine document was not in the personnel record.

3. On August 29, 2013, a review of RN #3's personnel record starting at approximately 1:45 p.m., revealed the acceptance or declination of the Hepatitis Vaccine document was not in the personnel record.

During an interview with the personnel staff on August 29, 2013, starting at approximately 2:00 p.m., she stated that she would fax the aforementioned staff acceptance or decline Hepatitis B vaccine forms. It should be noted DOH/HRLA did not receive an e-mail of aforementioned employees' acceptance or decline Hepatitis B vaccine forms.

H 163 3907.7 PERSONNEL H 163

Each employee shall be screened for communicable disease annually, according to the guidelines issued by the federal Centers for Disease Control, and shall be certified free of communicable disease.

This Statute is not met as evidenced by: Based on review of personnel records and interview, the home care agency (HCA) failed to ensure that each employee was screened for communicable disease annually and certified free

H-163: Annual Screening for Communicable Disease

Correction: (See Enclosed)

1. RN #2 obtained a physical, but the MD has not filled the official health certificate
2. The administrator had a physical enclosed that evidences being free from communicable disease. An updated physical is being obtained.
3. The DON now has a health certificate that evidences being free from communicable disease

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H 163 Continued From page 3

H 163

of communicable disease, for three (3) of ten (10) employees' in the sample. (Register nurse (RN) #2, Director of Nursing (DON) and Administrator)

The findings include:

1. On August 29, 2013, a review of RN #2's personnel records starting at approximately 1:00 p.m., revealed the record failed to evidence RN #2 was free from communicable disease in concordance to the guidelines issued by the federal Centers for Disease Control.
2. On August 29, 2013, a review of the administrator's personnel record starting at 1:15 p.m., revealed the record failed to evidence the administrator was free from communicable disease in accordance to the guidelines issued by the federal Centers for Disease Control.
3. On August 29, 2013, a review of the DON's personnel record starting at 1:35 p.m., revealed the record failed to evidence the DON was free from communicable disease in accordance to the guidelines issued by the federal Centers for Disease Control.

During an interview with the personnel staff on August 29, 2013, starting at approximately 2:00 p.m., she stated, that she would fax the aforementioned staff communicable disease status to DOH/HRLA. It should be noted DOH/HRLA did not receive an e-mail of aforementioned employees' communicable disease status.

The Home Care Agency will

1. Utilize a tracking checklist for new hires that includes a place to note that the Health Certificate form has been obtained/ completed.
2. Each prospective employee will be given a Health Certificate (if not already obtained) that will include a section to mark whether or not the employee is free from communicable disease
3. HR files medical profile records will be readily retrieved by qualified personnel.
4. Utilize a tracking template that will include the name of the employee and the date of expiration
5. Review updated tracking template for accuracy and subsequently make contact with the employees in need of a current Health Certificate by phone and/or by letter correspondence
6. The tracking will be updated on a monthly basis
7. Review personnel files of inactive contractors prior to placing them on the active contractor roster
8. Require that inactive contractor to submit required updates prior to accepting a new assignment
9. This task will be completed by the human resources department
10. This corrective action will be completed on or before November 30<sup>th</sup> 2013.

H 363: 3914.3(l) PATIENT PLAN OF CARE

H 363

Health Regulation & Licensing Administration

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H 363 Continued From page 4

The plan of care shall include the following:

(I) Identification of employees in charge of managing emergency situations;

This Statute is not met as evidenced by:  
Based on record review and interview, the home care agency (HCA) failed to identify personnel in charge of managing emergencies for seven (7) of eleven (11) patients in the sample. (Patient #3, #6, #7, #8, #9, #10 and #11 )

The findings include:

The home care agency's (HCAs) plan of cares (POCs) for Patient #3, #6, #7, #8, #9, #10 and #11 were reviewed on August 28, 2013 and August 29, 2013, between 10:30 a.m. and 2:00 p.m. respectively. The agency failed to ensure the current POC's for the aforementioned patients identified the personnel in charge of emergencies.

An interview with the director of nursing (DON) on August 29, 2013, at approximately 1:30 p.m., revealed that although the POC's included the emergency protocol, the staff responsible was not identified. The DON stated, " the POC's are written for the staff to follow."

H 363 H-363: Identification of Personnel In Charge of Managing Emergencies

Correction: See Sample Emergency Protocol Sheet enclosed

The Home Care Agency will

1. Preface each Emergency Plan on the Home Health Certification and Plan of Care of every active and every newly admitted patient with the phrase "The HHA/RN/LPN/HHA/PCA will....." (See enclosed).
2. This task will be completed by the DON
3. This corrective action will be completed on or before November 30<sup>th</sup> 2013.

H 390 3916.6 HOME HEALTH & PERSONAL CARE AIDE SERVICE H 390

After the first year of service, each aide shall be required to obtain at least twelve (12) hours of continuing education or in-service training annually, which shall include information that will help maintain or improve his or her performance.

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H 390	<p>Continued From page 5</p> <p>This training shall include a component specifically related to the care of persons with disabilities.</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to ensure after the year of service, each aide obtained at least twelve (12) hours of continuing education or in-service training annually for one (1) of two (2) home health aides (HHA's) in the sample. (HHA #1)</p> <p>The finding includes:</p> <p>On August 29, 2013, a review of HHA #1's personnel record starting at approximately 2:10 p.m., revealed HHA #1 was hired on April 21, 2011. The record failed to evidence HHA#1 had obtained the required 12 hours of continuing education or in-service training for 2012.</p> <p>During an interview with the personnel staff on August 29, 2013, starting at approximately 2:30 p.m., she stated, it was indicated that the HCA maintained records and that she would fax the training HHA #1 had received. It should be noted DOH/HRLA did not receive documentation for HHA#1's hours of training received in 2012.</p>	H 390	<p>H-390: HHA 12 hours of Annual Training Requirement</p> <p>Correction: HHA #1 is no longer working for the agency</p> <p>The Home Care Agency will</p> <ol style="list-style-type: none"> <li>1. Utilize a tracking template that will include the name of the employee and the date of expiration</li> <li>2. Review updated tracking template for accuracy and subsequently make contact with the employees in need of a current training by phone and/or by letter correspondence</li> <li>3. Review personnel files of inactive employee prior to placing them on the active contactor roster</li> <li>4. Require that inactive employee to submit required updates prior to accepting a new assignment</li> <li>5. This task will be completed by the HR department</li> <li>6. The tracking will be updated quarterly</li> </ol>	
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H 453	<p>3917.2(c) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(c) Ensuring that patient needs are met in accordance with the plan of care;</p>	H 453		
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H 453 Continued From page 6

H 453

H-453: Ensuring that Patient Needs are Met

This Statute is not met as evidenced by:  
Based on record review and interview, the home care agency's (HCA's) nurse failed to ensure that patient needs were met in accordance with the plan of care (POC), for one (1) of eleven (11) patients in the sample. (Patient #10)

Correction: The information needed for the patient #10 was sent via fax on 8/30/13. Will resend. See enclosed.

The Home Care Agency Will

The finding includes:

1. Place all submitted notes and timesheets in an organized fashion ie., an alphabetized accordion folder after timesheets are submitted to the corporate office on Wednesday.
2. The filing for the week will be completed by Friday of every week effective immediately.
3. This task will be completed by the administrative assistant

On August 29, 2013, at approximately 12:25 p.m., review of Patient #10's POC, with a documented certification period of June 24, 2013 to August 22, 2013, revealed the skilled nurse was to visit the patient seven (7) days a week for ten (10) hours a week. The record failed to evidence skilled nursing services were provided from August 1, 2013 through August 26, 2013.

An interview with the director of nursing (DON) on August 29, 2013, at approximately 2:00 p.m., revealed skilled services had been provided and the skilled nursing notes had been filed for billing purposes. The DON also stated, the skilled nursing notes would be faxed to DOH/HRLA.

It should be noted DOH/HRLA did not receive faxed skilled nursing notes. Additionally, the surveyor conducted a home visit to the home of Patient #10 on August 30, 2013. The parent of Patient #10 stated, the agency's nurses always come to her home as ordered by the physician.

H 455 3917.2(e) SKILLED NURSING SERVICES

H 455

Duties of the nurse shall include, at a minimum, the following:

(e) For registered nurses, supervision of nursing

Health Regulation & Licensing Administration

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H 455	<p>Continued From page 7</p> <p>services delivered by licensed practical nurses, including on-site supervision at least once every sixty-two (62) calendar days;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to have evidence that the Registered Nurse (RN) supervised the practices of the Licensed Practical Nurses (LPN) for one (1) of eleven (11) patients. (Patient #3)</p> <p>The finding includes:</p> <p>On August 28, 2013, at approximately 11:29 a.m., review of Patient #3's record revealed a plan of care (POC) with certification period dated May 13, 2013 to July 11, 2013. The plan ordered skill nursing services, for respite hours per insurance authorization to perform comprehensive multi-system assessment every shift/visit as needed, obtain vital signs as needed, administer all medication, nutritional requirements and treatments as ordered....</p> <p>Further review of the record revealed the aforementioned services were provided by an LPN. The record failed to evidence a RN had supervised the LPN services.</p> <p>During an interview with the director of nursing (DON) on August 28, 2013, at approximately 1:51 p.m., the DON stated the agency will look for the RN's supervisory visit. It should be noted the surveyor was not provided a copy of the RN's supervisory note at the time of this survey.</p>	H 455	<p>H-455: Ensuring that an RN supervises the practices of the LPN providing care to respite patients</p> <p>The Home Care Agency will</p> <ol style="list-style-type: none"> <li>1. Assign an RN to all respite cases by the end of the first week in October (10/4/13)</li> <li>2. Require that the RN will manage those cases and provide visit in the months the services are provided.</li> <li>3. This task will be completed by the DON</li> </ol>	
H 999	FINAL OBSERVATIONS	H 999		

Health Regulation & Licensing Administration

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H 999 Continued From page 8

H 999

H-999: Allegation of Medication Error

The following allegation was made during the survey process. Although the allegation could not be substantiated, it is recommended that this area be reviewed and a determination be made regarding appropriate actions to prevent a recurrence.

On September 5, 2013, at approximately 3:20 p.m., a telephone interview with the mother of Patient #15, the mother alleged the agency's nurse administered another family members medication to Patient #15 in May 2013. Further interview revealed Patient #15 was seen in the emergency room the day following the medication administration for elevated temperature, listless and no appetite. However, the mother indicated, the emergency room physician could not determine the Advir and Cetrizine administered by the agency's nurse caused the aforementioned symptoms.

Additionally, the mother alleged the agency's nurse did not document medications administered. She also stated the director of nursing (DON) was aware of her concerns but had no follow-up with agency's staff.

During a telephone interview with the DON on September 6, 2013, at approximately 10:00 a.m., the DON, stated, she was unaware of a complaint made by the mother of Patient #15 however she would look for any documentation she might have and fax the documents to DOH/HRLA.

It should be noted DOH/HRLA did not receive any documents in reference to the aforementioned concerns. The mother refused to put her complaint in writing, further indicating she could not remember the specific date in May 2013 the medications were administered, patient #15 only

The DON has:

1. Sent a letter to DOH via fax as requested after investigation with response from the mother pending on 9/10/13.
2. Placed the allegation in the complaint book with follow-up documentation as necessary.
3. Spoken with the mother on 9/11/13 at approximately 12 noon. Stated that she is very pleased with her respite nurse and the staffing coordinator in the office. She mentioned her request for respite for the weekend (9/21 and 9/22) during this conversation and expressed that she looked forward to the care that she was to be provided. She did mention the medication error but could not recall the facts and did not have supporting documentation. Stated that she would supply documentation when she was able to retrieve it. The mother did not mention that she would no longer need our services. She did however, cancel the respite request on 9/20/13.

The Home Health Agency will

1. Continue to ask family members if they are satisfied with the care received on each supervisory visit.
2. Send a patient satisfaction survey to the homes of active patients on a quarterly basis
3. This task will be completed by the administrative assistant
4. This will be initiated no later than November 30<sup>th</sup> 2013

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H 999 Continued From page 9 H 999

receives respite care which is provided by the agency on an as needed basis and requested by the mother. The mother indicated she refuses to use the agency again.