

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  ALR-0007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  05/10/2013
NAME OF PROVIDER OR SUPPLIER  SUNRISE ASSISTED LIVING ON CONNECTICUT		STREET ADDRESS, CITY, STATE, ZIP CODE 5111 CONNECTICUT AVENUE NW WASHINGTON, DC 20008		
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R 000	Initial Comments  An annual licensure survey was conducted from May 12, 2013 to determine compliance with Assisted Living Law " DC Code § 44-101.01 ". A random sample of five (5) resident records from a census of 102 patient records and five (5) staff from a census of 155 were reviewed. The deficiencies cited were based on observations, record review and patient and staff interviews.	R 000		
R 481	Sec. 604b Individualized Service Plans  (b) The ISP shall include the services to be provided, when and how often the services will be provided, and how and by whom all services will be provided and accessed. [ D.C. Official Code § 44-106.04 (b ) ]  Based on record review and interview, the Assistant Living Residence (ALR) failed to include on the individual service plan (ISP) by whom, when and how often services will be provided for three (3) of five (5) residents . (Residents #3, #4 and #5).  The finding includes:  1. On May 10, 2013, at approximately 12:36 p.m., a review of resident #3's record revealed that the resident was receiving hospice (started on 01/22/13) and wound care services (started on 04/26/13). The resident's ISP, dated January 13, 2013, however, failed to reflect by whom, when and how often hospice and wound care services were to be provided.  During a interview with the director of nursing (DON) on May 12, 2013, at approximately 12:30 p.m., the DON acknowledged the failure to	R 481	<p>Department of Health Health Regulation &amp; Licensing Administration Intermediate Care Facilities Division 899 North Capitol St., N.E. Washington, D.C. 20002</p> <p>Resident #3 Individualized Service plan Has been updated by the Health Care Coordinator/Director of Nursing to include service providers, such as hospice and wound care services by whom, how often and when services are provided to resident.</p>	6/1/13 and can quote original

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6099

BLD111

TITLE

(X6) DATE

If continuation sheet 1 of 5

6/7/2013

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R 481	<p>Continued From page 1</p> <p>update the ISP.</p> <p>2. On May 10, 2013, at approximately 1:36 p.m., a review of Resident #4's record revealed the resident was receiving oxygen therapy and hospice services. Further review of the record revealed an ISP, dated October 16, 2012. The ISP, however, failed to include information concerning the provisions of oxygen therapy and hospice services.</p> <p>During an interview with the DON on May 10, 2013, at approximately 2:00 p.m., the DON stated, the resident receives oxygen as needed and hospice service three times a week.</p> <p>3. On May 10, 2013, at approximately 11:00 am., an interview with Resident 5's private duty aide (PDA), revealed aide services had been provided since admission (Monday through Friday, six hours a day). Another aide provides weekend services. Duties consisted of assisting the resident with activities of daily living (ADLs). Additional interview with the PDA, revealed services rendered were through the family.</p> <p>On May 10, 2013, starting at approximately 2:30 p.m., a review of Resident's #5's record revealed an admission date of June 21, 2006. Further review of the record revealed an ISP dated 02/11/13. The ISP, however, failed to include information concerning the provisions of private duty aide services.</p> <p>During an interview with the director of nursing (DON) on May 10, 2013, at approximately 2:00 p.m., the DON confirmed that the resident receives private duty aide services.</p>	R 481	<p>Resident #4 Individualized Service plan has been updated by the Health Care Coordinator/Director of Nursing to include service providers, such as hospice and wound care services by whom, how often and when services are provided to resident.</p> <p>Resident #5 Individualized Service plan has been updated by the Health Care Coordinator/Director of Nursing to include service providers, such as hospice and wound care services by whom, how often and when services are provided to resident.</p> <p>An audit will be completed by the Executive Director and the Health Care Coordinator/Director of Nursing to ensure all Individualized Service Plans reflect service providers, whom, when, and how often services are Provided.</p>	<p>6/1/13 and each quarter ongoing</p> <p>6/1/13 and each quarter ongoing</p> <p>7/1/13 and ongoing</p>	

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R 483	Continued From page 2	R 483		
R 483	<p>Sec. 604d Individualized Service Plans</p> <p>(d) The ISP shall be reviewed 30 days after admission and at least every 6 months thereafter. The ISP shall be updated more frequently if there is a significant change in the resident's condition. The resident and, if necessary, the surrogate shall be invited to participate in each reassessment. The review shall be conducted by an interdisciplinary team that includes the resident's healthcare practitioner, the resident, the resident's surrogate, if necessary, and the ALR.</p> <p>[ D.C. Official Code § 44-106.04 (d) ]</p> <p>Based on record review and interview, the Assisted Living Residence (ALR) failed to ensure three (3) of five (5) resident's Individualized Services Plan's (ISP's) were reviewed by the residents' healthcare practitioner. (Resident's #1, #2, and #4)</p> <p>The findings include:</p> <p>1. On May 10, 2013, starting at approximately 12:00 p.m., a review of Resident #1's record revealed an ISP dated December 3, 2012. The ISP failed to evidence that it had been reviewed by a healthcare practitioner.</p> <p>During an interview on May 10, 2013, at approximately 12:10 p.m. with the Director of Nursing (DON), the DON indicated the aforementioned ISP had not been reviewed by a healthcare practitioner.</p> <p>2. On May 10, 2013, starting at approximately 12:30 p.m., a review of Resident #2's record revealed an ISP dated December 20, 2012. The</p>	R 483	<p>-Resident #1 Individualized Service Plan has been updated to include health care practitioner signature. The Health Care Coordinator/Director of Nursing sent the Individualized Service Plan to the health care practitioner for review and signature.</p> <p>Resident #2 Individualized Service Plan has been updated to include health care practitioner signature. The Health Care Coordinator/Director of Nursing sent the Individualized Service Plan to the health care practitioner for review and signature.</p>	<p>6/11/13 and org with gaur</p> <p>6/11/13 and org with gaur</p>

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R 483	Continued From page 3  ISP failed to evidence that it had been reviewed by a healthcare practitioner.  During an interview on May 10, 2013, at approximately 1:10 p.m. with the Director of Nursing (DON), the DON indicated the aforementioned ISP had not been reviewed by a healthcare practitioner.  3. On May 10, 2013, starting at approximately 1:36 p.m., a review of Resident #4's record revealed an ISP dated October 16, 2012 which failed to evidence that it had been reviewed by a healthcare practitioner.  During an interview on May 10, 2013, at approximately 2:15 p.m. with the Director of Nursing (DON), the DON indicated the aforementioned ISP had not been reviewed by a healthcare practitioner.	R 483	Resident #4 Individualized Service Plan has been updated to include health care practitioner signature. The Health Care Coordinator/Director of Nursing sent the Individualized Service Plan to the health care practitioner for review and signature.  An audit will be completed by the Health Care Coordinator/Director of Nursing and the Executive Director of all resident service plans to ensure Individualized Service Plans reflect service providers, Whom, when & how often services are provided.  Any new admission will have an Individualized Service Plan completed Prior to admission to facility signed by a health care practitioner.	6/1/13 and engorg ear gator 7/1/13 and ear gator engorg engorg	
R 600	Sec. 701d13 Staffing Standards.  (13) Complete the training required by section 702 and 12 additional hours of training, annually, conducted by a nationally recognized organization that possesses experience in training staff in dementia care, such as the Alzheimer's Disease and Related Disorders Association, on managing residents who are living with cognitive impairments. Based on record review and interview, it was revealed that the Assistant Living Facility failed to provide documentation that all staff had the required annual 12 hour in-service training on managing residents. (Private Duty Aides #1 and #2)  The finding includes:	R 600	Private Duty Aide #1 will be provided with the required 12 hours of training by a qualified trainer – facility Health Care Coordinator/Director of Nursing.  Private Duty Aide #2 will be provided with the required 12 hours of training by a qualified trainer – facility Health Care Coordinator/Director of Nursing.	7/1/13  7/1/13	

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R 600	<p>Continued From page 4</p> <p>On May 10, 2013, at approximately 12:10 p.m., a review of the personnel records for private duty aides #1 and #2 failed to evidence that all of the required training had been received.</p> <p>During a face to face interview with the assistant living administrator (ALA) and the human resources personnel staff on May 10, 2013, at approximately 3:00 p.m., it was indicated the training records would be forwarded to this office. However, the required annual 12 hour training on managing residents was not recieved.</p>	R 600	<p>An audit will be completed of all private duty aide records to ensure all private duty aides have completed the required 12 hours of training.</p> <p>Any new Private Duty Aide will be informed of the required 12 hours of training and will be provided the facility training calendar for the 12 hours of training, taught by facility Health Care Coordinator/Director of Nursing. Attendance will be verified on sign in form and will be placed in private duty aide file kept in facility.</p>	<p>7/1/13 and orig  orig</p>	