

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  CPA-0076	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  06/09/2011
NAME OF PROVIDER OR SUPPLIER  ADOPTIONS TOGETHER		STREET ADDRESS, CITY, STATE, ZIP CODE 900 VARNUM STREET NE WASHINGTON, DC 20017		
(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 on June 8, 2011, through June 9, 2011. The survey findings were based on record review and staff interviews. The sample sizes were fifteen (15) personnel records based on a census of fifteen (15), nine (9) home study records based on a census of nine (9) and three (3) post placement records based on a census three (3).  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	1. The Human Resources Coordinator Will contact each of the individuals Whose medical examination is delinquent and ensure that a medical report is received within the next thirty days.  By July 10, 2011	
S 103	1611.1(k) Personnel Records  (k) Physical examination reports required in section 1612.2:  This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to ensure that three (3) of fifteen (15) employee's had available for review, a current physical examination report as required in section 1612.2. (Employees #3, #9 and #12)  The finding includes:  Review of personnel records on June 8, 2011, at approximately 12:00 p.m. revealed that employees #3, #9 and #12 failed to have a current physical examination report in their records.  An interview with the Associate Director on June 8, 2011, at approximately 3:00 p.m. confirmed the findings.	S 103	2. The Human Resources Coordinator will complete an audit of all personnel files in April of each year to notify all staff members of when their medical report must be updated.  By July 10, 2011  3. The Human Resources Manager will Ensure that the Human Resources Coordinator completes #2 above.  By July 10, 2011  4. Staff members who fail to complete Their medical examination and provide a copy of the report to the Human Resources department in a timely manner will be subject to disciplinary actions.  By July 10, 2011	

Health Regulation & Licensing Administration

*Janice Goldwater*  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE *Executive Director* (X6) DATE *6-22-11*

STATE FORM

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If continuation sheet 1 of 1

Department of Health  
Health Regulation & Licensing Administration  
Intermediate Care Facilities Division  
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