

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>CPA-0074</b>	<input checked="" type="checkbox"/> MULTIPLE CONSTRUCTION A BUILDING _____ B WING _____	(X3) DATE SURVEY COMPLETED  <b>03/09/2012</b>
NAME OF PROVIDER OR SUPPLIER  <b>FAMILY MATTERS OF GREATER WASHINGTON</b>		STREET ADDRESS, CITY, STATE, ZIP CODE 1509 16 <sup>th</sup> Street Washington, DC 30036	
(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 8, 2012 through March 9, 2012. The survey findings were based on record review and staff interviews. The sample sizes were sixteen (16) personnel records, five (5) foster parent records, and nine (9) foster child records.	S 000	
S 100	1611.1(h) Personnel Records  (h) Documentation of participation in in-service training;  This CONDITION is not met as evidenced by: Based on record review and interview, the child-placing agency (CPA) failed to ensure that two (2) of sixteen (16) employees had proof that they had participated in in-service training. (Employees #8 and #11)  The finding includes:  On March 9, 2012, beginning at 9:30 a.m., review of personnel records revealed the CPA failed to ensure that Employees #8, and #11 had participated in in-service training.  Interview with the Chief Officer Of Program Evaluation, Risk and Resources, and the Director of Human Resources on February 17, 2012, at approximately 3:00 p.m., verified that the aforementioned employees had not participated in in-service training.	S 100	Employee #8 and #11 are non-licensed staffs, who receive FMGW on-going training and development including an additional 20 hours of in-service training annually (see attached list of Employees #8 & #11 completed in-service trainings). HR will continue to revise and update its annual Training Calendar to ensure staff is enrolled and receiving required trainings. In addition, HR conducts quarterly internal audits of personnel files to ensure compliance is adhered to under the organization's Performance Quality Improvement Program.
S 109	1612.2 Staff Functions And Qualifications  Each child-placing agency shall require a written report on the applicant's mental and physical conditions including addictions which could adversely affect the applicant's capacity to work	S 109	

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*Nolia Melton*

TITLE Director Human Resources

(X6) DATE 3/24/2012

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

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NAME OF PROVIDER OR SUPPLIER  <b>FAMILY MATTERS OF GREATER WASHINGTON</b>		STREET ADDRESS, CITY, STATE, ZIP CODE 1509 16 <sup>TH</sup> STREET, NW WASHINGTON, DC 20036	
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S 109	<p>Continued From page 1</p> <p>with children.</p> <p>This CONDITION is not met as evidenced by: Based on record review and interview, the child-placing agency (CPA) failed to ensure employees had current physical examination reports, for five (5) of sixteen (16) employees. (Employees , #8, #12, #14, #15, and #16)</p> <p>The finding includes:</p> <p>On March 9, 2012, beginning at approximately 9:30 a.m., revealed the agency failed to ensure that Employees #8, #12, #14, #15, and #16 had current physical examinations in their records.</p> <p>Interview with the Chief Officer Of Program Evaluation, Risk and Resources and the Director Of Human Resources on March 9, 2012, at approximately 3:00 p.m., verified that there were no current physical examination reports available for review.</p>	S 109	<p>Employee #8 will be completed by 4/06/2012 Employee # 12 will be completed by 4/06/2012 Employee # 14 will be completed by 4/06/2012 Employee # 15 will be completed by 4/06/2012 Employee # 16 will be completed by 4/06/2012</p> <p>A newly designed check checklist to be used as a cover sheet in each personnel file will serve as a tickler system and will be audited on a quarterly basis by our Human Resource Director and designated Human Resource Generalist on a quarterly basis. Medical documents are requested from program staff on an annual basis.</p>