

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HSA-0019	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/17/2022
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NAME OF PROVIDER OR SUPPLIER LIFEMATTERS	STREET ADDRESS, CITY, STATE, ZIP CODE 5028 WISCONSIN AVENUE, NW WASHINGTON, DC 20016
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R 000	<p>9900 General Provisions</p> <p>A follow-up survey was conducted from 05/16/2022 through 05/17/2022 to determine compliance with the agency's Plan of Correction following citations issued during the agency's initial survey on 02/18/2022, and to meet the requirements of Title 22B DCMR, Chapter 99 (Home Support Agency Regulations).</p> <p>The surveyors arrived at the agency's location at 5028 Wisconsin Avenue NW at 9:30 AM to conduct the follow-up survey.</p> <p>The Home Support Agency (HSA) was unable to provide clinical and personnel records requested by the survey team. The survey team awaited access to clinical and personnel records on 05/16/2022 and 05/17/2022 but the provider was unable to provide access; as a result, the survey was aborted.</p> <p>The agency will be cited for failing to meet the requirements of:</p> <p>9901.4 Each operating office shall either store at the office in paper form or have immediately available electronically the following records: (a) Client records for all clients served within the District of Columbia; (b) Personnel records for all employees;</p> <p>9901.5 All other records and documents required under this chapter and other applicable laws and regulations that are not maintained within the operating office shall be produced for inspection within two (2) hours after a request by the Department, or within a shorter time if the Department so specifies.</p>	R 000	<p>Please begin typing your responses here:</p> <p>Lifematters was unable to provide the requested information within the specified time frame due to the recent implementation of a brand new EMR system. Much of the existing client and caregiver information had to be copied over manually, and not all information was in the new system at the time. Some information did not copy over correctly from the old system. This resulted in a lengthy process of finding the requested documents, and ensuring that the information provided to the surveyors was accurate. Furthermore, not all staff had been sufficiently trained on all functions of the new system.</p>	

Health Regulation & Licensing Administration LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Michael White, RN, DON</i>	TITLE (X8) DATE 07/08/2022
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R 009	Continued From page 1	R 009		
R 009	<p>9901.4a Operating Office</p> <p>(a) Client records for all clients served within the District of Columbia;</p> <p>Based on interview and observation, the home support agency (HSA) failed to provide six of seven newly admitted client records requested during the survey (Client #12, #13, #14, #15 and #16).</p> <p>The findings included:</p> <p>At 9:30 AM, on 05/16/2022, a follow-up survey commenced. During the entrance conference, the Director of Nursing (DON) offered a list of seven clients that were admitted to the agency since the initial licensure survey of February 18, 2022 (Clients #11, #12, #13, #14, #15, #16 and #17). The surveyor requested the clinical records of the seven clients for review. On 05/17/2022 at 11:19 AM, the DON was able to electronically access one of the seven client records requested (Client #11).</p> <p>At 11:30 AM, on 05/17/2022, the DON stated that it will take some time for him to be able to retrieve the additional records because he was not familiar with the new electronic record system.</p> <p>At 11:45 AM, on 05/17/2022 during a conference with the DON and Director of Operations, the Director of Operations stated that she will have to place a "work order" requesting the additional records that can be emailed to this surveyor.</p> <p>The survey was then aborted.</p> <p>The Home Support Agency failed to have client records immediately available for review.</p>	R 009	<p>To ensure documentation can be provided within the timeframe specified in 9901.5, and to be in compliance with article 3101.3(a) and 3101.3(b)(e) going forward, the following will be implemented:</p> <p>The migration of systems was completed on 06/15/2022. All client and caregiver profiles are being audited for accuracy and completeness in the new system. The audit process is to be completed by 07/15/2022.</p> <p>Education on the proper utilization of the new system for all applicable staff will be conducted by 06/01/2022, to ensure rapid access to client and staff records.</p> <p>Personnel files for all DC staff will be maintained in a separate folder to ensure quick and easy access, compliant with article 3101.3(b)(e). The creation of the mentioned folders will be completed by 07/15/2022.</p>	

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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

LIFEMATTERS

**5028 WISCONSIN AVENUE, NW
WASHINGTON, DC 20016**

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R 009	Continued From page 2 On 05/17/2022 at 11:45 AM, the DON and Director of Operations confirmed the findings during interview.	R 009		
R 010	9901.4b Operating Office (b) Personnel records for all employees; Based on record review and interview, it was determined that the operating office failed to have immediately available, personnel records for 10 of 13 personnel files requested for review (File #2, #3, #4, #5, #6, #7, #10, #11, #12 and #13) Findings Included: On 05/16/2022, an entrance conference was conducted with officials from the agency. During this meeting, 13 personnel records were requested. Of the 13 personnel files requested, three (#1, #8, and #9) files included complete information consistent with the regulations. The survey was aborted 05/17/2022 at 11:45 AM secondary to the inability of the survey team to access necessary documentation to complete the survey. On 05/17/2022 at 11:45 AM, the Director of Nursing and Director of Operations confirmed	R 010		
R 014	9901.5 Operating Office 9901.5 All other records and documents required under this chapter and other applicable laws and regulations that are not maintained within the operating office shall be produced for inspection within two (2) hours after a request by the Department, or within a shorter time if the Department so specifies.	R 014		

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R 014	<p>Continued From page 3</p> <p>Based on record review and interview the HSA failed to provide six of seven clients' records, maintained electronically in the agency's database, for a survey, within two hours after request (Client #12, #13, #14, #15, #16, and #17).</p> <p>Cross Reference Citation #009 Regulation 9901.4(a) above.</p>	R 014		