

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: H3A-0014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 06/11/2021
NAME OF PROVIDER OR SUPPLIER HHA HOME CARE, LLC D/B/A SMITHLIFE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 4000 ALBERMARLE STREET, NW WASHINGTON, DC 20016			
(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	
R 000	<p>9900 General Provisions</p> <p>9900 General Provisions An unannounced initial licensure survey was conducted virtually 06/08/2021, 06/09/2021, 06/10/2021 and 06/11/2021 to determine compliance with the Home Support Agency Regulations, Title 22B DCMR, Chapter 99.</p> <p>The Home Support Agency provided care for six clients and employed 54 personnel, to include professional and administrative staff. A random sample of six active client records, and 11 personnel records were selected for review. The findings of the survey were based on client and administrative record review, and on six client and staff interviews.</p> <p>Listed below are abbreviations used throughout the body of this report:</p> <p>DON - Director of Nursing HHA - Home Health Aide HSA - Home Support Agency RN - Registered Nurse CPR - Cardiopulmonary Resuscitation</p>	R 000			
R 143	<p>9909.2k Personnel</p> <p>(k) A position description signed by the employee;</p> <p>Based on record review and interview, the home support agency (HSA) failed to maintain accurate personnel records to include current documentation of current position descriptions for four of 11 personnel records reviewed (Director of Nursing (DON), Director of Community Relations, and Home Health Aides (HHAs) #1 and #2.</p> <p>Findings included:</p>	R 143			

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

TITLE

(X6) DATE

STATE FORM

6899

DHJP11

If continuation sheet 1 of 21

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R 143	<p>Continued From page 1</p> <p>A review of the facility's personnel records was conducted on 06/08/2021 beginning at 2:25 PM, and 06/11/2020 at 12:04 PM revealed the following:</p> <ol style="list-style-type: none"> The Director of Nursing's personnel record showed a position description entitled Director of Nursing. Further review of the description revealed no signature and no date. The Director of Community Relations position description showed that the employee signed the description on 05/17/2018. It should be noted that the Home Support Agency (HSA) did not receive a provisional license until 07/10/2020. Home Health Aide (HHA) #1's personnel file showed that she was hired on 08/22/2020. There was no documented evidence that a position description had been provided, reviewed and/or signed and dated by HHA #1 Home Health Aide (HHA) #2's personnel file showed that she signed his job description on 11/02/2018. It should be noted that the Home Support Agency (HSA) did not receive a provisional license until 07/10/2020 <p>During an interview on 06/11/2020 at 12:10 PM, the Administrator stated that she was under the impression that since the agency was previously licensed as a Home Care Agency, she did not have to require past employees to be rehired for the new licensed Home Support Agency (HSA).</p> <p>At the time of the survey, the home support agency failed to maintain accurate personnel records for the DON, the Director of Community Relations and HHAs #1 and #2</p>	R 143	<p>1) The corrective action taken was we updated all Job Description signatures to reflect the date after we applied for the license for Office positions and Caregivers so that they are re-signed to reflect the date after June 2020.</p> <p>2) In the future, if we apply for a new License or different License type in DC, we will ensure that a new Job Descriptions are signed with the date after we applied for that new License type. All employees will be rehired when apply for a new license.</p> <p>3) The quality assurance program that will be implemented will include a review of all Job Descriptions to ensure that they are signed after the date the license was applied for should we apply for a licenses in the future again.</p>	07/01/2021	

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R 145	Continued From page 2	R 145	<p>1) The HR policy for hiring was reviewed with our current HR Manager, and she signed it again, acknowledging what was to be included in a complete hiring record.</p> <p>2) A workflow for onboarding was created as a cheat sheet for the HR Manager to review, in addition, we have since implemented an electronic application process to capture all documents required.</p> <p>3) As part of our monthly quality assurance reviews done in the organization, now Employee files will also be reviewed and spot checked.</p>	07/06/2021	
R 145	<p>9909.2m Personnel</p> <p>(m) Documentation of acceptance or declination of the Hepatitis Vaccine; and Based on record review and interview, the home support agency (HSA) failed to maintain accurate personnel records to include current documentation of acceptance or declination of the Hepatitis Vaccine for four of 11 personnel records reviewed (Administrator, Director of Community Relations, Home Health Aides (HHAs) #2 and #3).</p> <p>Findings included:</p> <p>A review of the facility's personnel records was conducted on 06/08/2021 beginning at 2:25 PM, and 06/11/2020 at 12:04 PM revealed the following:</p> <p>1. The Director of Community Relations signed her acceptance or declination of the Hepatitis Vaccine form on 06/06/2018. The HSA's Administrator signed her form on 09/14/2018, and HHA #2 signed her form on 11/02/2018. It should be noted that the HSA did not receive their provisional license until 07/10/2020.</p> <p>2. HHA #3 failed to have any documented evidence of the Hepatitis Vaccine acceptance or declination completed and maintained in their personnel record.</p> <p>During an interview on 06/11/2020 at 12:10 PM, the Administrator stated that she was under the impression that since the agency was previously licensed as a Home Care Agency (HCA), she did not have to require past employees to be rehired for the new licensed Home Support Agency</p>	R 145			

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R 145	Continued From page 3 (HSA). At the time of the survey, the HSA failed to maintain accurate and current documentation of the acceptance or declination of the Hepatitis Vaccine for the Administrator, the Director of Community Relations and HHAs #2 and #3.	R 145	1) The HR policy for hiring was reviewed with our current HR Manager, and she signed it again, acknowledging what was to be included in a complete hiring record. 2) A workflow for onboarding was created as a cheat sheet for the HR Manager to review, in addition, we have since implemented an electronic application process to capture all documents required.		
R 150	9909.6 Personnel 9909.6 At the time of initial employment, the home support agency shall verify that the employee, within the six months immediately preceding the date of hire, has been screened for and is free of all communicable diseases. Based on record review and interview, the home support agency (HSA) failed to verify that each employee was free of all communicable diseases within the six months immediately preceding the employee's date of hire for seven of 11 personnel records reviewed (Director of Nursing (DON), Director of Community Relations, Agency Scheduler and Home Health Aides (HHAs) #2, #3, #4 and #5). Findings included: A review of the facility's personnel records was conducted on 06/08/2021 beginning at 2:25 PM, and 06/11/2020 at 12:04 PM revealed the following: 1. The Home Support Agency's (HSA) Director of Nursing (DON) was hired on 05/05/2020. On 08/14/2019, nine months prior to her date of hire, the DON was screened and certified free from any communicable disease. 2. The Home Support Agency's Director of	R 150	3) As part of our monthly quality assurance reviews done in the organization, now Employee files will also be reviewed and spot checked.	07/07/2021	

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R 150	Continued From page 4 Community Relations was hired on 05/17/2018. It should be noted that the home support agency (HSA) did not receive a provisional license until 07/10/2020. Review of her personnel record showed a Tuberculin Screening Questionnaire dated 06/28/2020. There was no documented evidence that the Director of Community Relations was screened and certified free from any communicable disease within six months prior to her date of hire. 3. Home Support Agency's Scheduler was hired 11/30/2020. There was no documented evidence that the agency's scheduler was screened for and certified free of any communicable disease within six months prior to her date of hire. 4. Home Health Aide (HHA) #2 was hired on 11/07/2020. Review of HHA's personnel record showed two Tuberculin Screening Questionnaires dated 11/07/2019 and 12/9/2020. There was no documented evidence HHA #2 was screened for and certified free of any communicable disease within six months prior to their date of hire. 5. Home Health Aide (HHA) #3 was hired 04/30/2021. Review of HHA's personnel record showed a Tuberculin Screening Questionnaire dated 12/18/2020. There was no documented evidence HHA #3 was screened for and certified free of any communicable disease within six months prior to their date of hire. 6. Home Health Aide (HHA) #4 was hired 6/08/2020. Review of HHA's personnel record showed two Tuberculin Screening Questionnaire dated 12/18/2020. There was no documented evidence that HHA #4 was screened for and certified free of any communicable disease within six months prior to their date of hire.	R 150	1) The HR policy for hiring was reviewed with our current HR Manager, and she signed it again, acknowledging what was to be included in a complete hiring record. 2) A workflow for onboarding was created as a cheat sheet for the HR Manager to review, in addition, we have since implemented an electronic application process to capture all documents required. 3) As part of our monthly quality assurance reviews done in the organization, now Employee files will also be reviewed and spot checked.	07/07/2021	

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R 150	Continued From page 5	R 150			
R 171	<p>9910.4 Admissions</p> <p>9910.4 Each home support agency shall conduct an initial assessment by a registered nurse to ensure that the client does not require services outside of the scope of personal care services. The assessment shall include a home visit and a review of information provided by the prospective client or the client representative and any other pertinent data and shall take place prior to the time that personal care services are initially provided to the client. The assessment must determine whether the home support agency has the ability to provide the necessary services in a safe and consistent manner.</p> <p>Based on record review and interview, the registered nurse failed to determine the agency's ability to provide services during the initial assessment for six of six clients (Clients #1, #2, #3, #4, #5 and #6).</p> <p>Findings included:</p> <p>1. On 06/08/2021 at 8:35 AM, review of Client #1's clinical record showed an Assessment and Care Plan dated 05/07/2021, which the home support agency's (HSA) Clinical Director said was their admission and Service care plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were</p>	R 171	<p>1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary.</p> <p>2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood.</p> <p>3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.</p>	07/06/2021	

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R 171	<p>Continued From page 6</p> <p>initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client's representative. The nurse also failed to document in the assessment if the agency was able to provide safe care, based on the client's needs.</p> <p>2. On 06/08/2021 at 10:30 AM, review of Client #2's clinical records showed an Assessment and Care Plan" form dated 02/11/2021, which the home support agency's (HSA) Clinical Director said was their admission and Service care plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client's representative. The nurse also failed to document in the assessment if the agency was able to provide safe care, based on the client 's needs.</p> <p>3. On 06/08/2021 at 12:10 PM, review of Client #3's clinical records showed an Assessment and Care Plan Form dated 03/30/2021, which the home support agency's (HSA) Clinical Director said was their admission and Service Care Plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client representative. The nurse also failed to document in the assessment if the agency was able to provide safe care, based on the client 's needs.</p> <p>4. On 06/09/2021 at 8:30 AM, review of Client #4 's clinical records showed an Assessment and</p>	R 171	<p>1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary.</p> <p>2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood.</p> <p>3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.</p>	7/06/2021	

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R 171	<p>Continued From page 7</p> <p>Care Plan dated 02/11/2021, which the home support agency's (HSA) Clinical Director said was their admission and Service care plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client's representative. The nurse also failed to document in the assessment if the agency was able to provide safe care, based on the client's needs.</p> <p>5. On 06/09/2021 at 10:35 AM, review of Client #5's clinical records showed an Assessment and Care plan" form dated 05/06/2021, which the home support agency's (HSA) Clinical Director said was their admission and Service care plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client representative. The nurse also failed to document in the assessment if the agency was able to provide safe care, based on the client's needs.</p> <p>6. On 06/09/2021 at 1:30 PM review of Client #6's clinical records showed an Assessment and Care plan" form dated 10/20/2020 which the home support agency's (HSA) Clinical Director said was their admission and Service care plan form. The assessment lacked evidence of a home visit prior to the time that personal care services were initially provided to the client and lacked a review of pertinent data related to the client and any information provided by the prospective client or the client's representative. The nurse also failed to document in the</p>	R 171	<p>1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary.</p> <p>2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood.</p> <p>3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.</p>	7/06/2021	

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R 171	Continued From page 8 assessment if the agency was able to provide safe care, based on the client's needs. On 06/09/2021 at 2:30 PM, review of the agency's policy for accepting or denying service was conducted. The policy stated that a requirement for admission would be based on the determination, during the initial nursing assessment of the agency's ability to provide care. On 06/10/2021 at 3:28 PM, during an interview, the agency's Director acknowledged the findings. The Director said that she will follow-up with the nurse to ensure the information is documented moving forward. At the time of the survey, the home support agency (HSA) failed to provide documentation that the registered nurse assessed if the agency could provide services to each client safely during the initial assessment.	R 171	1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary. 2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood. 3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.	7/06/2021	
R 206	9913.3a Client Service Plan (a) The scope and types of services, frequency and duration of services to be provided, including any diet, equipment, and transportation required; Based on record review and interview, the home support agency (HSA) failed to include diets consistent with the nutritional needs of clients, as it relates to their diagnoses, in six of six active records reviewed (Clients #1, #2, #3, #4, #5 and #6). Findings included: 1. On 06/08/2021 at 8:35 AM, review of Client #1's Assessment & Care Plan showed a start of	R 206			

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R 206	<p>Continued From page 9</p> <p>care date of 05/07/2021. The Assessment & Care Plan did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which was diet or special diet, and the duties to be performed by the Home Health Aide, "e.g." cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client.</p> <p>2. On 06/08/2021 at 10:30 AM, review of Client #2's Assessment & Care Plan showed a start of care date of 05/07/2021. The Assessments & Care Plan did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which you have diet or special diet, and the duties to be performed by the Home Health Aide, "e.g." cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client.</p> <p>3. On 06/08/2021 at 12:10 PM, review of Client #3's Assessments & Care Plan form showed a start of care date of 05/07/2021. The Assessments & Care Plan form did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which you have diet or special diet, and the duties to be performed by the Home Health Aide, "e.g." cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client.</p> <p>4. On 06/09/2021 at 8:30 AM review of Client #4's Assessments & Care Plan form showed a start of care date of 05/07/2021. The Assessments & Care Plan form did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which you</p>	R 206	<p>1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary.</p> <p>2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood.</p> <p>3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.</p>		7/06/2021

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(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	
R 206	Continued From page 10 have diet or special diet, and the duties to be performed by the Home Health Aide, "e.g.," cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client. 5. On 06/09/2021 at 10:35 A.M, review of Client #5's Assessments & Care Plan form showed a start of care date of 05/07/2021. The Assessments & Care Plan form did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which you have diet or special diet, and the duties to be performed by the Home Health Aide, "e.g.," cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client. 6. On 06/09/2021 at 1:30 PM review of Client #6's Assessments & Care Plan form showed a start of care date of 05/07/2021. The Assessments & Care Plan form did not document the client's diagnosis. Further review of the form showed a section titled "Meals" under which you have diet or special diet, and the duties to be performed by the Home Health Aide, "e.g.," cooking and meal preparation. This section was left blank. There was no evidence that the form included dietary needs specific to the client. During an interview on 06/10/2021 at 3:00 PM, the Clinical director stated that the home support agency will review their documentations and ensure the nurses capture all the required client information during their assessments to include the client's diet.	R 206	1) Our Registered Nurse was informed that additional information was not being captured in her initial assessments of Clients. She added the information that was missing, re-visiting the Clients as necessary. 2) A new RN Admissions policy was written and reviewed with the RN and she signed it acknowledging the training and that she understood. 3) As part of our monthly quality assurance, our DON agreed to spot check at least 5 Client records to ensure that new Initial Assessments capture all the necessary information.	7/06/2021	
R 208	9913.3c Client Service Plan	R 208			