

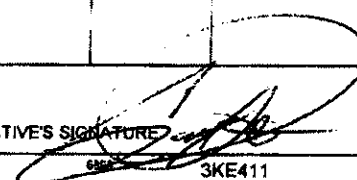
Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0011	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/22/2010
NAME OF PROVIDER OR SUPPLIER ASAP SERVICES CORPORATION		STREET ADDRESS, CITY, STATE, ZIP CODE 201 15TH STREET, SE WASHINGTON, DC 20003		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PRDVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
H 000	INITIAL COMMENTS An annual survey was conducted at your agency on January 21, 2010, through January 22, 2010, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a random sample of fifteen (15) clinical records, fifteen (15) personnel files and five (5) home visits. The findings of the survey were based on observations in the home, interviews with agency staff and patient interviews as well as a review of patient and administrative records.	H 000	<p style="text-align: center;">2/8/10</p> <p style="text-align: center;">GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH HEALTH REGULATION ADMINISTRATION 825 NORTH CAPITOL ST., N.E., 2ND FLOOR WASHINGTON, D.C. 20002</p>	
H 053	3903.2(c)(1) GOVERNING BODY The governing body shall do the following: (c) Review and evaluate, on an annual basis, all policies governing the operation of the agency to determine the extent to which services promote patient care that is appropriate, adequate, effective and efficient. This review and evaluation must include the following: (1) The evaluation shall include feedback from a representative sample consisting of either ten percent (10%) of total District of Columbia patients or forty (40) District of Columbia patients, whichever is less, regarding services provided to those patients. This Statute is not met as evidenced by: Based on a record review and interview, the Home Health Care Agency (HHCA) failed to ensure the governing body reviewed and evaluate their Policies and Procedures on an annual basis. The finding includes:	H 053		All Office staff will be required to review Policies and Procedures Annually.

Health Regulation Administration

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

STATE FORM



TITLE

Administrative 2/8/10

(X6) DATE

3KE411

If continuation sheet 1 of 14

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H 053	Continued From page 1 Review of the HHCA's "Annual Evaluation Policy" on January 21, 2010, at 2:42 p.m., revealed the governing body failed to review and evaluate their Policies and Procedures since 2008. During a face to face interview with the Case Manager Coordinator (CMC) on January 6, 2010, at approximately 2:46 p.m., verified that the above named document was the agency's recent annual report. At the time of the survey, the HHCA failed to provide documented evidence that their governing body had reviewed and evaluated the Policies and Procedures for 2009.	H 053		
H 149	3907.2(e) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (e) Health certification as required by section 3907.6; This Statute is not met as evidenced by: Based on a review of the Home Health Care Agency's (HCA) personnel records and interview, the HHCA failed to ensure one (1) of ten (10) contracted staff (Staff #3, LPN) and one (1) of the five (5) Home Health Aides (HHA) (HHA #11) included in the sample had current health certifications. The findings include: Review of the HHCA's personnel records on January 21, 2010 beginning at 11:21 a.m., revealed Staff #3 and #11's Health Certification had expired on January 22, 2010 and December	H 149	ASAP Services will be implementing a web-based Human Resources application that is administered by ADP. The ADP system will ensure that the ASAP Human Resources department can more accurately track all certification and licensure information with respect to our professional staff. The system will be programmed to notify the HR Department of upcoming recertification's and issue automatic reminders to the Nursing, Case Management, and Home Health Aide Supervisory staff. The implementation of the ADP Human Resources application will help mitigate any potential lapses licensure and certificate recertification's deadlines. The Human Resources department will review staff member #2's 2008 evaluation and complete an evaluation for 2009.	

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H 149	Continued From page 2 2, 2008 respectively. During the face to face exit interview on January 21, 2010, with the Personnel Director, it was verified that both Staff #3 and #11 Health Certificates expired. At the time of the survey, the HCA failed to ensure Staff #3, and #11 had current Health Certificates.	H 149		
H 152	3907.2(h) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (h) Copies of completed annual evaluations; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the Home Health Care Agency (HHCA) failed to maintain personnel records, which did not include copies of completed annual evaluations for one of ten (10) contracted staff records reviewed (Staff #2) included in the sample. The finding includes: Review of Staff #2 (RN's) personnel record on January 21, 2010, at 11:50 a.m., revealed an annual evaluation dated March 30, 2008. During the face to face exit interview on January 21, 2010, beginning at 3:56 p.m., the Personnel Director verified that an annual evaluation had been written for the aforementioned RN for 2009, however, at the time of the survey, there was no documented evidence of a current evaluation for (Staff #2) in the year of 2009.	H 152	ASAP Services will implement a new policy that requires employees to renew all proper licenses and certifications based on the date the documentation was issued; not by the anniversary of their individual hire date. New employees are required to submit all health certificates upon hire. This required documentation must prove that the new hire is free from communicable diseases and this documentation must have been issued within six months prior to the date of hire.	

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H 158	<p>3907.2(n) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(n) Documentation of liability insurance, if applicable.</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the Home Health Care Agency (HHCA) personnel records failed to ensure documentation of liability insurance for one (1) of ten (10) contracted staff, (Registered Nurse) in the sample. (Staff #5)</p> <p>The finding includes:</p> <p>Review of Staff #5's personnel record on January 21, 2010, at approximately 1:16 p.m., revealed a contract for services of a Registered Nurse (RN). Continued review of the personnel record failed to evidence documentation that the RN had liability insurance.</p> <p>During a face to face interview with the Personnel Director during the exit interview on January 21, 2010 at 3:56 p.m., verified the personnel record for the RN failed to provide documented evidence of liability insurance.</p>	H 158	<p>The ADP system will ensure that the ASAP Human Resources department can more accurately track all certification and licensure information with respect to our professional staff. Additionally, the application will mitigate any potential lapses licensure and certificate recertification's deadlines.</p> <p>Staff member #5 has been notified to submit liability insurance. In the event that Staff #5 fails to comply with the Agency's request to submit this information, suspension will occur. From this point forward, the Human Resource Generalist will review the documents submitted in requirement for the positions and a second review will be conducted by the Staffing Coordinator to ensure all documents are on file.</p>	
H 170	<p>3907.11 PERSONNEL</p> <p>Each home care agency shall ensure that each employee or contract worker shall present a valid agency identification prior to entering the home of a patient.</p>	H 170	<p>ASAP Services will issue a memo reminding all employees that they must provide the company issued I.D.'s upon entering any patient's home. Effectively immediately, ASAP Services has instituted a new disciplinary procedure with respect to</p>	

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H 170	Continued From page 4 This Statute is not met as evidenced by: Based on an observation and interview, it was determined that the Home Health Care Agency (HHCA) failed to ensure that three (3) of the five (5) contract Home Health Aides (HHA's) presented valid agency identification prior to entering the home of a patient. (HHA # 16, #17 and #18) The findings include: Observations during home visits of Patients #7, #11, and #14 on January 22, 2010, between the hours of 9:30 a.m. - 11:30 a.m., revealed that the contracted HHA's did not have valid agency identification on their person as evidenced below: a. During an observation at the home of Patient #7 it was revealed that HHA #16 did not have a form of identification from the agency. During a face to face interview with HHA #16, it was acknowledged that she does not wear her agency identification. b. During an observation at the home of Patient #11, it was revealed that HHA #17 did not have her agency identification on her person. During a face to face interview with HHA #17, it was acknowledged the HHA had never issued her any form of identification. c. During an observation at the home of Patient #14, it was revealed that HHA #18 did not have her agency identification on her person. During a face to face interview with HHA #18, it	H 170	providing identification. Our professional staff will be conducting I.D. spot checks during monthly visits. If a home health aide fails to wear proper credentials during a home visit, they will receive a verbal warning. Upon the second infraction, they will receive a written warning notice. If it is discovered for the third time that a Home Health Aide fails to wear proper credentials, the employee will be immediately terminated. Staff numbers: 16, 17, and 18 have been notified that they must provide proper identification upon entering a patient's home.	

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H 170	Continued From page 5 was acknowledged the HHA had never issued her any form of identification.	H 170		
H 279	3911.2(s) CLINICAL RECORDS Each clinical record shall include the following information related to the patient: (s) Documentation of training and education given to the patient and the patient's caregivers. This Statute is not met as evidenced by: Based on interview and record review, the Home Care Agency (HCA) failed to ensure documentation of training and education given to the patient and the patient's caregivers for one (1) of fifteen (15) patients in the sample. (Patient #14) The findings include: Review of Patient # 14's Home Health Certification and Plan of Care (POC) dated September 20, 2009, to March 19, 2010, on January 21, 2010, at approximately 2:50 p.m., revealed the patient had a diagnosis of hypertension and was ordered a two (2) gm. sodium diet. Further review revealed the home health aide (HHA) was to provide meal preparation. During face to face interviews at Patient # 14's home on January 22, 2010, at approximately 9:45 a.m., it was acknowledged by Patient #14 and HHA # 16 , the skilled nurse had never instructed them on the patient's diagnosis of hypertension and two (2) gm. sodium diet.	H 279	On February 3, 2010, the supervisory nurse conducted a conference with all agency nurses regarding regulation 3911.2(s). Patient #14's nurse has been notified about the lack of teaching that was conveyed to the patient and the home health aide. As of March 1, 2010, when conducting a supervisory visit, all nurses will supply the aide and patient with a form that acknowledges the receipt of teaching in accordance with the most up-to-date Plan of Care.	

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H 279	Continued From page 6 There was no document evidence of training and education given to the patient and the patient's caregivers on hypertension and diet therapy.	H 279		
H 355	3914.3(d) PATIENT PLAN OF CARE The plan of care shall include the following: (d) A description of the services to be provided, including: the frequency, amount, and expected duration; dietary requirements; medication administration, including dosage; equipment; and supplies; This Statute is not met as evidenced by: Based on interview and record review, the facility failed ensure the plan of care (POC) described services to be provided, including equipment and supplies for one (1) of fifteen (15) patients in the sample. (Patient #15) The finding includes: Review of Patient # 15's Home Health Certification and Plan of Care (POC) dated August 31, 2009, through March 1, 2010, on January 21, 2010, at approximately 3:16 p.m., did not reveal the patient was on oxygen therapy. Review of a skilled nursing note dated December 11, 2009, on January 21, 2010, at approximately 3:20 p.m., revealed " pt. [patient] is on continuous O2 [oxygen] via nasal prong at 2 (two) liters a min. (minute)". During a face to face interview with the Nursing Supervisor on January 21, 2010, at approximately 4:10 p.m., it was acknowledged the POC had not	H 355	Over the last six months, ASAP Services has conducted an internal review of our Plan of Care acquisition process. A comprehensive plan to ensure that all patient records include timely and up-to-date Plan of Care documentation has been implemented.	01/25/2010

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H 355	Continued From page 7 been updated to include services for oxygen therapy, equipment and supplies. There was no documented evidence the POC was updated to include services for oxygen therapy, equipment and supplies.	H 355		
H 366	3914.4 PATIENT PLAN OF CARE Each plan of care shall be approved and signed by a physician within thirty (30) days of the start of care; provided, however, that a plan of care for personal care aide services only may be approved and signed by an advanced practice registered nurse. If a plan of care is initiated or revised by a telephone order, the telephone order shall be immediately reduced to writing, and it shall be signed by the physician within thirty (30) days. This Statute is not met as evidenced by: Based on interview and record review, the facility's Plan of Care (POC) was not approved and signed by a physician within thirty (30) days of the start of care for four (4) of fifteen (15) patients in the sample. (Patient #3, #4, #9 and #14) The findings include: Review of Patient #3, #4, #9 and #14's Plan of Care (POC) on January 21, 2010, approximately between 10:48 a.m.- 3:05 p.m., revealed the POC was not approved and signed by a physician within thirty (30) days of the start of care, however skilled nursing services was being implemented according to the POC as evidenced by:	H 366	Over the last six months, ASAP Services has conducted an internal review of our Plan of Care acquisition process. A comprehensive plan to ensure that all patient records include timely and up-to-date Plan of Care documentation has been implemented.	01/25/2010

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H 366	Continued From page 8 a. Patient #3's POC dated November 29, 2009; b. Patient #4's POC dated July 28, 2009; c. Patient #9's POC dated November 18, 2009; d. Patient #14's POC dated September 20, 2009 During a face to face interview with the Nursing Supervisor on January 21, 2010, at approximately 3:46 p.m., it was acknowledged the POC was not approved and signed by a physician within thirty (30) days of the start of care for Patient's #3, #4, #9 and #14. There was no documented evidence the POC was approved and signed by a physician within thirty (30) days of the start of care.	H 366		
H 411	3915.11(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE Home health aide duties may include the following: (f) Observing, recording, and reporting the patient's physical condition, behavior, or appearance; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure home health aides recorded, and reported on the patient's physical condition, behavior or appearance for ten (10) of fifteen (15) patients in the sample. (Patient #3, #4, #5, #7, #10, #11, #12, #13, #14, and #15). The findings include: Review of Patient #3, #4, #5, #7, #10, #11, #12,	H 411	Beginning March 1, 2010, ASAP Services will require Home Health Aides to document and report patients' condition, behavior, and appearance. This new form must be attached with the submission of PCA's timesheets.	

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H 411	Continued From page 9 #13, #14, and #15's medical records on January 21, 2010, approximately between 10:00 a.m.- 3:18 p.m., revealed the home health aides had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. During a face to face interview with the Administrator on January 21, 2010, at approximately 4:05 p.m., it was acknowledged the home health aides had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. There was no documented evidence the home health aides recorded and reported the patient's physical condition, behavior, or appearance to the agency.	H 411		
H 457	3917.2(g) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (g) Recording progress notes at least once every thirty (30) calendar days and summary notes at least once every sixty-two (62) calendar days; This Statute is not met as evidenced by: Based on interview and record review, the Home Care Agency (HCA) failed to ensure the nurse recorded progress notes at least once every thirty (30) calendar days for one (1) of fifteen (15) patients in the sample. (Patient #14) The finding includes: Review of Patient # 14's Home Health Certification and Plan of Care (POC) dated September 20, 2009, to March 19, 2010, on	H 457	Registered Nurse notified to complete immediate RN visit or to submit documentation/progress notes for November, December, and January. In our monthly meeting on February 3, 2010 the supervisory nurse will remind all staff that monthly progress notes must be submitted within 48 hours.	

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H 457	Continued From page 10 January 21, 2010, at approximately 2:50 p.m., revealed the Registered Nurse (RN) was to provide skilled nursing services once a month times six (6) months. Review of Patient # 14's medical record on January 21, 2010, at approximately 2:55 p.m., did not reveal any RN progress notes since October 28, 2009. During a face to face interview with the Nursing Supervisor on January 21, 2010, at approximately 3:58 p.m., it was acknowledged the RN had not recorded progress notes at least once every thirty (30) calendar days in Patient # 14's medical record. There was no documented evidence the nurse recorded progress notes at least once every thirty (30) calendar days in the patient's medical record.	H 457		
H 459	3917.2(i) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (i) Patient instruction, and evaluation of patient instruction; and This Statute is not met as evidenced by: Based on interview and record review, the facility's skilled nursing staff failed to ensure documentation of patient instruction, and evaluation of patient instruction for two (2) of fifteen (15) patients in the sample. (Patient #13 and #15)	H 459	As of March 1, 2010, when conducting a supervisory visit, all nurses will supply the Home Health Aides and patients with a form. This form acknowledges the receipt of teaching in accordance with the most updated Plan of Care.	

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H 459	<p>Continued From page 11</p> <p>The finding includes:</p> <p>1. Review of Patient # 13's Plan of Care (POC) dated July 21, 2009, through January 20, 2010, on January 21, 2010, at approximately 1:25 p.m., revealed the Skilled Nurse (SN) was to provide skilled nursing services once a month times six (6) months.</p> <p>Review of Patient # 13's skilled nursing notes dated October 26 and October 28, 2009, on January 21, 2010, at approximately 1:30 p.m., revealed the patient was instructed on diet management and the use of adaptive equipment.</p> <p>During a face to face interview with the Nursing Supervisor on January 21, 2010, at approximately 4:00 p.m., it was acknowledged the skilled nursing staff did not evaluate the instructions given to the patient on diet management and the use of adaptive equipment.</p> <p>There was no documented evidence of patient evaluations on on diet management and the use of adaptive equipment.</p> <p>2. Review of Patient # 15's Home Health Certification and Plan of Care (POC) dated August 31, 2009, through March 1, 2010, on January 21, 2010, at approximately 3:16 p.m., revealed the SN was to provide skilled nursing services once a month times six (6) months.</p> <p>Review of a skilled nursing note dated December 11, 2009, on January 21, 2010, at approximately 3:20 p.m., revealed " pt. [patient] is on continuous O2 [oxygen] via nasal prong at 2 (two) liters".</p> <p>During a face to face interview with the Nursing Supervisor on January 21, 2010, at approximately</p>	H 459		

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H 459	Continued From page 12 4:00 p.m., it was acknowledged the skilled nursing staff did not instruct the patient on oxygen therapy. There was no documented evidence of the patient instructions taught or evaluated on oxygen therapy.	H 459		
H 590	3926.1 SOCIAL SERVICES If social services are provided, they shall be provided in accordance with the patient's plan of care and in consultation with the patient. This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure if social services are provided, they are provided in accordance with the patient's plan of care (POC) for one (1) of fifteen (15) patients in the sample. (Patient #1) The finding includes: Review of Patient # 1's medical record on January 21, 2010, at approximately 10: 25 a.m., did not reveal a POC that included an order for social services. Further review of the record revealed the patient had been provided services by a Licensed Clinical Social Worker (LCSW). During a face to face interview with the Case Manager Coordinator/Marketing Manager on January 21, 2009, at approximately 11:00 a.m., it was acknowledged Patient #1 did not have a POC that included physician orders for social services and Patient #1 had been provided social services.	H 590		

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0011	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/22/2010
NAME OF PROVIDER OR SUPPLIER ASAP SERVICES CORPORATION		STREET ADDRESS, CITY, STATE, ZIP CODE 201 15TH STREET, SE WASHINGTON, DC 20003		
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H 590	Continued From page 13 There was no documented evidence the POC included physician's orders for social services.	H 590		