


Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>ALR-0027</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/20/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>JOYE ASSISTED LIVING SERVICES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE  
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R 000	<p>Initial Comments</p> <p>On May 18, 2015, at 1:17 p.m., the Department of Health/Health Regulation and Licensing Administration received a complaint from Adult Protected Services (APS) regarding neglect at the Assisted Living Residence.</p> <p>Due to the nature of this complaint, an investigation was conducted from May 19, 2015 to May 22, 2015 to determine compliance with the Assisted Living Law "DC Code § 44-101.01."</p> <p>Currently, the Assisted Living Residence (ALR) provides care for eight (8) residents and contracts Home Health Aide (HHA) services. The findings of the investigations were based on record reviews, and interviews.</p> <p>Please Note. Listed below are abbreviations used in this report.</p> <ul style="list-style-type: none"> <li>Adult Protective Services - APS</li> <li>Assisted Living Administrator - ALA</li> <li>Assisted Living Residence - ALR</li> <li>Certified Nursing Assistant - CNA</li> <li>Criminal Background Check - CBC</li> <li>Department of Health- DOH</li> <li>Fire and Emergency Medical Services - FEMS</li> <li>Home Health Aide - HHA</li> <li>Health Regulation and Licensing Administration - HRLA</li> <li>Liter - L</li> <li>Metropolitan Police Department - MPD</li> <li>Registered Nurse - RN</li> </ul> <p>Allegation #1: Employee #1 neglected the ALR residents.</p> <p>Findings:</p>	R 000		
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Health Regulation & Licensing Administration

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

*Gloria Richardson*

ADMINISTRATOR

TITLE


Gloria Richardson

(X6) DATE

6/20/2015

Health Regulation & Licensing Administration

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R 000	<p>Continued From page 1</p> <p>- On May 22, 2015, at 9:30 a.m., review of the MPD incident - based event report detailed that on May 16, 2015 at 3:20 a.m., FEMS staff found Resident #1 sitting on the ground wearing a diaper while Employee #1, who was the overnight ALR staff, was asleep. Additionally, "an odor consistent with an alcoholic beverage" was smelled on Employee #1's breath, and an open 1.75 L bottle of gin was removed from the ALR.</p> <p>- On May 20, 2015 at 10:25 a.m., in an interview with the ALA confirmed the details of the aforementioned event. Further interview with the ALA revealed that Employee #1 was terminated from the ALR May 16, 2015.</p> <p>(Note: Employee #1 was arrested by MPD May 16, 2015 and was not available for interview.)</p> <p>Conclusion: This allegation was substantiated.</p>	R 000		
R 282	<p>Sec. 503.11 Dignity.</p> <p>(11) To be free from mental, verbal, emotional, sexual and physical abuse, neglect, involuntary seclusion, and exploitation; and Based on observation, interview and record review, the ALR failed to ensure that eight (8) of eight (8) residents were free from neglect. (Residents #1, #2, #3, #4, #5, #6, #7, and #8)</p> <p>The findings include:</p> <p>On May 22, 2015, at 9:30 a.m., review of the MPD incident - based event report detailed that on May 16, 2015 at 3:20 a.m., FEMS staff found Resident #1 sitting on the ground wearing a diaper while Employee #1, who was the overnight</p>	R 282	<p><i>IN RESPECT OF THE INCIDENT AT ALR 0027 A NEW POLICY WAS INSTITUTED THAT IN ADDITION TO THE CRIMINAL BACKGROUND CHECKS, ALL JOYE ASSISTED LIVING EMPLOYEES SHALL BE REQUIRED TO HAVE A DRUG AND ALCOHOL CLEARANCE PRIOR TO FIRST DAY OF EMPLOYMENT</i></p>	<p><i>6/6/15 AND ONGOING</i></p>

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R 282	Continued From page 2  ALR staff, was asleep. The aforementioned report stated that Employee #1 awakened and became argumentative and combative to officers and caused physical harm to FEMS staff. Additionally, "an odor consistent with an alcoholic beverage" was smelled on Employee #1's breath, and an open 1.75 L bottle of gin was removed from the ALA.  On May 20, 2015 at 10:25 a.m., interview with the ALA revealed that Employee #1 was a new live-in employee, hired on May 14, 2015, who worked from 11:00 p.m. through 7:00 a.m. Employee #1 was terminated from the ALR May 16, 2015 following the aforementioned event.  Note: Employee #1 was arrested by MPD May 16, 2015 and was not available for interview.  The ALR failed to ensure that its residents were free from neglect.	R 282	TO PREVENT THIS MAL PRACTICE ACT FROM RE OCCURRING ALL NIGHT SHIFT EMPLOYEES RECEIVED AN INSERVICE TO CALL ALA EVERY TWO HOURS USING THE HOUSE PHONE ALA SHALL MAKE UNANNOUNCED VISIT TWICE A WEEK TO ALR. ANY EMPLOYEE FOUND TO BE UNDER THE INFLUENCE OF ALCOHOL/DRUGS AND OR SLEEPING ON THE JOB SHALL BE TERMINATED IMMEDIATELY	
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R 595	Sec. 701d8 Staffing Standards.  (8) Assure that each employee has a background check pursuant to federal and District law executed at the time of initial employment; Based on interview and record review, the ALA failed to ensure that all staff had a comprehensive background check prior to employment for one (1) of one (1) staff record reviewed (Employee #1).  The findings include:  On May 20, 2015, at 10:00 a.m., a review of personnel files revealed a background check for Employee #1 that indicated the "Current Fitness	R 595	JOYE SHALL NOT HIRE 5/25/15 ON A PROVISIONAL STATUS HR PERSONELL SHALL ENSURE A CLEAN CRIMINAL BACKGROUND CHECK HAS BEEN OBTAINED, PRINTED AND FILED IN EMPLOYEE RECORD PRIOR TO THE FIRST DAY OF EMPLOYMENT WITH NO EXCEPTIONS TO PREVENT THIS MALPRACTICE FROM RE-OCCURRING.	
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**JOYE ASSISTED LIVING SERVICES**



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R 595 Continued From page 3

Determination" for Employee #1 as "in progress". Additionally, the "Current Employment Status" for Employee #1 is documented as "Provisionally Employed". The ALA failed to provide documented evidence the Employee #1 had a comprehensive background check prior to employment.

On May, 2015, at 10:25 a.m., the ALA acknowledged that results of the background check were pending after conducting an on-line CBC query. Further interview revealed the ALA had no knowledge, prior to hiring Employee #1, that he/she had a criminal background and wore an ankle house arrest bracelet.

Prior to employment, the ALA failed to ensure that Employee #1 had a comprehensive background check completed.

R 595

SEE RESPONSE FOR R 595 ON THE PREVIOUS PAGE

R 605 Sec. 701g2 Staffing Standards.

(2) Possess current and appropriate licensure and certifications as required by law; Based on interview and record review, the ALA failed to ensure that all staff possessed appropriate certification prior to employment for one (1) of one (1) staff record reviewed (Employee #1).

The finding includes:

On May 20, 2015 at 10:00 a.m., during a review of personnel files, the records failed to evidence that Employee #1 had an HHA certification.

During an interview with the ALA on May 20, 2015, at 10:25 a.m., the ALA stated that Employee #1 was hired after showing evidence

R 605

ALA/HR PERSONEL SHALL 5/27/15 CHECK THE BOARD OF AND NURSING WEBSITE FOR VERIFICATION OF LICENSE PRIOR TO THE FIRST DAY OF HIRE. EMPLOYEES WITH A STATUS OF "PENDING" UNTIL AN ACTIVE STATUS IS OBTAINED. ALL NEW EMPLOYEES SHALL BE REQUIRED TO HAVE AT LEAST ONE YEAR OF EXPERIENCE AS A HHA

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R 605	<p>Continued From page 4</p> <p>that he/she had recently, succesfully completed the HHA certification examination.</p> <p>It should be noted that, on May 21, 2015, a certification search conducted on the DOH professional license database revealed that Employee #1's HHA certification status is "pending".</p> <p>At the time of employment, the ALA failed to ensure Employee #1 possessed appropriate certification.</p>	R 605	<p>Cont'd from pg 4 of 5</p> <p>ALA/HR PERSONNEL SHALL REVIEW EMPLOYEE FOLDERS MONTHLY TO ENSURE ALL EMPLOYEE RECORDS HAVE UPDATED DOCUMENTS.</p>	<p>5/22/15</p> <p>ATP</p> <p>ONGOING</p>

