FORM APPROVED Health Regulation & Licensing Administration STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B. WING HCA-0005 04/19/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7506 GEORGIA AVENUE. NW KBC NURSING AGENCY & HOME CARE, INC. WASHINGTON, DC 20002 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION ID (X5) PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DATE **DEFICIENCY**) H 000 INITIAL COMMENTS H 000 On March 29, 2016, a complaint was received regarding an allegation of possible neglect on the part of KBC Nursing and Home Care, Inc. and the visiting physician prior to the patients death in December 2015. Due to the nature of the complaint, on April 12. 2016, the Department of Health, Health Regulation and Licensing Administration initiated an investigation, to verify compliance with the basic standards of practice and Title 22B. Chapter 39 (Home Care Agencies Regulations). The findings of the investigation were based on record review and interviews. The following are abbreviations used within the body of this report: DON - Director of Nursing ER - Emergency Room HHA - Home Health Aide LPN - Licensed Practical Nurse **NUS - Nursing Unlimited Services** PCA - Personal Care Aide PCP - Primary Care Physician RN - Registered Nurse SN - Skilled Nurse Allegation #1-The home care agency HHA, skilled nurse and physician, failed to recognize and secure timely medical intervention for wound care/infection prior to patients death.

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

Findings: Based on interviews and record review from April 12, 2016, through April 19, 2016, it was determined that KBC Nursing agency was not providing skilled care to to the Patient as alleged.

TITLE

(X6) DATE

FORM APPROVED Health Regulation & Licensing Administration STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A BUILDING: C B. WING HCA-0005 04/19/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7506 GEORGIA AVENUE, NW KBC NURSING AGENCY & HOME CARE, INC. WASHINGTON, DC 20002 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION ID (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) DATE TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) H 000 | Continued From page 1 H 000 According to the records, another home care agency (NUS), was providing the skilled nursing/wound care to the patient. KBC Nursing agency was providing home health aide service for personal care eight (8) hours a day, seven (7) days a week. The RN from KBC would conduct monthly supervisory visits on the home health aides, and would document the patient's apprehension for the nurse from KBC to look at his ulcers. Additionally, interviews with the aides that attended to the patient revealed that the patient vehemently refused the nurses advise regarding seeking urgent medical attention for wound evaluation and blood glucose monitoring. Review of the patient's plan of care revealed a physician order for skilled nurse to conduct wound care three (3) times a week by cleansing the wound with normal saline, apply silverdine cover with 4 X 4 and secure with tape. Review of the skilled nursing notes from NUS revealed that the

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RN saw the patient on December 25, 2015, and observed the wound "with copious amount of drainage with odor." Further review of the notes revealed that the RN recommended that the patient needed urgent medical attention. The patient became very belligerent and stated " I have the right to refuse my PCP and Nurse Practitioner and I don't need you to tell me what

to do. All you have to do is to change my

Interview with the home health aide present at the time of the home visit, corroborated that the patient refused the recommendation by the nurse.

Interview with NUS administrator revealed he/she received a call from the field RN regarding the

dressing and leave my house."

**FORM APPROVED** Health Regulation & Licensing Administration STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: \_ COMPLETED B. WING HCA-0005 04/19/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 7506 GEORGIA AVENUE, NW KBC NURSING AGENCY & HOME CARE, INC WASHINGTON, DC 20002 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX COMPLETE PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) H 000 Continued From page 2 H 000 patient's "belligerent action". The nurse assessed the wound and felt that the patient should go to the hospital, but he adamantly refused. The administered stated he/she attempted to contact the next of kin listed on their Plan of Care, without success. Further interview and review of NUS documentation revealed the physician had been notified via voice mail of the patient's condition of the wound and his/her refusal to go to the emergency room for treatment. Interview with the office manager from the physician practice revealed that the physician office had no record identifying the next of kin. It should be noted that all documentation revealed, including interview with the physician office manager, that the patient was mentally competent to make decisions pertaining to his health care. Conclusion: The allegation is unsubstantiated. Allegation #2-Patient was diabetic, double amputee. Alleged that KBC failed to monitor sugar levels consistently. Findings: Based on record review and interview KBC was only providing personal care aide (PCA) services to the patient. The RN from KBC conducted monthly supervised visits on the PCA. The RN monthly visits for October 2015, and November 2015, documented a blood glucose of 119 mg/dl in October 2015, and 150 mg/dl in November 2015. All other nursing notes clearly documented the patient's refusal to monitor his

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blood glucose. This was corroborated by

interview with the physician office manager. The office manager also conveyed that the physician office had issued glucometers to the patient to

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