

Health Regulation & Licensing Administration

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>HCA-0056</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____ | (X3) DATE SURVEY<br>COMPLETED<br><br><b>08/21/2013</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>ASAP SERVICES CORPORATION</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1420 K STREET NW 7TH FLOOR<br/>WASHINGTON, DC 20005</b> |
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| H 000                    | <b>INITIAL COMMENTS</b><br><br>An annual survey was conducted, from August 14, 2013 through August 21, 2013, to determine compliance with Title 22 of the District of Columbia Municipal Regulations, Chapter 39 (Home Care Agencies Regulations). The ASAP Services Corporation provides home care services to 168 patients, and employs 273 staff, to include home health aides, nurses and other health care and administrative staff. The findings of the survey were based on a review of 15 patients' records and 25 personnel files. The findings were also based on 4 home visits, and 11 telephone interviews with patients   | H 000               |  |                        |
| H 152                    | <b>3907.2(h) PERSONNEL</b><br><br>Each home care agency shall maintain accurate personnel records, which shall include the following information:<br><br>(h) Copies of completed annual evaluations;<br><br>This Statute is not met as evidenced by: Based on record review and interview, it was determined the agency failed to ensure that four (4) of twenty-five (25) employees had copies of completed annual evaluations in their personnel record.<br>(Employee #1, #2, #17 and #20)<br><br>The finding includes:<br><br>On August 16, 2013, the home care agency's personnel records were reviewed between 11:00 a.m. and 1:30. Four of the 25 home health aides (HCAs #1, #2, #17, and #20) that had been employed for over 1 year, had not been given a performance evaluation. | H 152               | <p><i>Received 9/19/13</i></p> <p>Department of Health<br/>Health Regulation &amp; Licensing Administration<br/>Intermediate Care Facilities Division<br/>899 North Capitol St., N.E.<br/>Washington, D.C. 20002</p> <p>Annual evaluations will be taking place towards the latter part of this month. We are currently in the process of preparing for this effort. Eligible employees should receive an evaluation by October 31, 2013. We will also be paying particular attention to getting evaluations done during our evaluation season on an annual basis. Going forward, annual evaluations will be performed for all eligible staff during the annual evaluation season.</p> |                        |

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| H 000                    | INITIAL COMMENTS<br><br>An annual survey was conducted, from August 14, 2013 through August 21, 2013, to determine compliance with Title 22 of the District of Columbia Municipal Regulations, Chapter 39 (Home Care Agencies Regulations). The ASAP Services Corporation provides home care services to 168 patients, and employs 273 staff, to include home health aides, nurses and other health care and administrative staff. The findings of the survey were based on a review of 15 patients' records and 25 personnel files. The findings were also based on 4 home visits, and 11 telephone interviews with patients   | H 000         |  |                          |
| H 152                    | 3907.2(h) PERSONNEL<br><br>Each home care agency shall maintain accurate personnel records, which shall include the following information:<br><br>(h) Copies of completed annual evaluations;<br><br>This Statute is not met as evidenced by: Based on record review and interview, it was determined the agency failed to ensure that four (4) of twenty-five (25) employees had copies of completed annual evaluations in their personnel record.<br>(Employee #1, #2, #17 and #20)<br><br>The finding includes:<br><br>On August 16, 2013, the home care agency's personnel records were reviewed between 11:00 a.m. and 1:30. Four of the 25 home health aides (HCAs #1, #2, #17, and #20) that had been employed for over 1 year, had not been given a performance evaluation. | H 152         | <p><i>Received 9/18/13</i></p> <p>Department of Health<br/>Health Regulation &amp; Licensing Administration<br/>Intermediate Care Facilities Division<br/>899 North Capitol St., N.E.<br/>Washington, D.C. 20002</p> <p>Annual evaluations will be taking place towards the latter part of this month. We are currently in the process of preparing for this effort. Eligible employees should receive an evaluation by October 31, 2013. We will also be paying particular attention to getting evaluations done during our evaluation season on an annual basis. Going forward, annual evaluations will be performed for all eligible staff during the annual evaluation season.</p> |                          |

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| H 152                    | Continued From page 1<br><br>During an interview with the the Director of Nursing (DON) on August 16, 2013 at approximately 1:30 p.m., confirmed that HCA had not conducted performance evaluation for employees #1, #2, #17, and #20.   | H 152               |   |                        |
| H 162                    | 3907.6 PERSONNEL<br><br>At the time of initial employment of each employee, the home care agency shall verify that the employee, within the six months immediately preceding the date of hire, has been screened for and is free of communicable disease.<br><br>This Statute is not met as evidenced by:<br>Based on interview and review of personnel records, the home care agency (HCA) failed to provide evidence that every employee had a health certificate at the time of hire, for one (1) of seven (7) new employees' in the sample. (Employee #18)<br><br>The finding includes:<br><br>On August 16, 2013, a review of employee #18's personnel file at approximately 11:00 a.m., revealed that the employee was hired on August 8, 2013. Further review of the record failed to evidence the employee had been screened for and was free of communicable disease.<br><br>An interview with the weekend coordinator on August 16, 2013, starting at approximately 2:00 p.m., confirmed that there was no documentation of the employee's communicable disease status in the employee's record. | H 162               | Upon review, it has been determined that the employee health certificate for employee #18 had not yet been added to the employee's personnel file. The document has since been placed in the appropriate file and the issue corrected. We will be making a conscious effort to fully complete personnel files of new hires with an approximate time frame of one week after the employee's hire date. We will be monitoring personnel files with regular file audits to ensure file contents. |                        |

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| H 163  | <p><b>3907.7 PERSONNEL</b></p> <p>Each employee shall be screened for communicable disease annually, according to the guidelines issued by the federal Centers for Disease Control, and shall be certified free of communicable disease.</p> <p>This Statute is not met as evidenced by:<br/>Based on review of personnel records and interview, the home care agency (HCA) failed to ensure that each employee was screened for communicable disease annually and certified free of communicable disease, for one (1) of sixteen (16) employees' in the sample. (Employee #16)</p> <p>The finding include:</p> <p>On August 16, 2013, a record review of the aforementioned employees file starting at approximately 11:00 a.m., revealed Employee #16 was hired on April 21, 2008. Further review of the record failed to evidence the employee was free of communicable disease in 2012.</p> <p>During an interview with the weekend coordinator on August 16, 2013, starting at approximately 2:00p.m., she stated, there is no documentation of the employee's communicable disease status for 2012 in the employee's record.</p> | H 163   | Employee 16 has been notified of suspension from work and has used the time to obtain the required documentation. Regular file audits will be conducted to ensure that the required documentation stays current and up to date. We will seek to utilize our internal database to add the necessary dates in order to ensure that renewal dates are met. |   |
| H 271  | <p><b>3911.2(k) CLINICAL RECORDS</b></p> <p>Each clinical record shall include the following information related to the patient:</p> <p>(k) Discharge summary, including the reason for termination of services and the effective date of</p>  | H 271   |   |   |

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| H 271                    | <p>Continued From page 3</p> <p>discharge;</p> <p>This Statute is not met as evidenced by:<br/>Based on record review and staff interviews, the home care agency (HCA) failed to have a discharge summary for two (2) of five (5) discharged patients in the sample. (Patient #4)</p> <p>The findings include:</p> <ol style="list-style-type: none"> <li>1. On August 15, 2013, review of Patient #4's record, starting at approximately 9:20 a.m., revealed a signed consent for services dated October 23, 2012, an initial assessment dated October 12, 2012 and a skilled nursing note and a consent for services both dated October 23, 2012. There was no documented evidence of a discharge summary in the record at the time of this survey.</li> <li>2. On August 15, 2013, review of Patient #5's record, starting at approximately 9:20 a.m., revealed a signed consent for services dated October 23, 2012, an initial assessment dated October 12, 2012 and a skilled nursing note and a consent for services both dated October 23, 2012. There was no documented evidence of a discharge summary in the record at the time of this survey.</li> </ol> <p>During an interview with the President on August 15, 2013, at approximately 3:00 p.m., it was revealed the agency was unable to locate the patients so discharge summaries were not done.</p> | H 271               | <p>Patients #4 and #5 were both private pay patients receiving only HHA services. In June of 2013 the two patients ceased all communication with ASAP. Since they were private pay they could return to receive services at any time. Additionally private pay services are A la Carte which gives the patient the ability to choose which services they would like to pay for. As a policy all new patients have an initial assessment completed by a nurse. Going forward ASAP has generated a list of all (inactive) patients (more than 30 days without service) which the clinical staff will complete discharge summaries for all individuals not being serviced by ASAP for more than 30 days.</p> <p>The clinical personnel will then be responsible for discharging any patient's on this list.</p> <p>The clinical supervisor will audit the patient "on hold" list on a weekly basis to ensure that all inactive patients for more than 30 days have been discharged.</p> | 9-23-13                  |
| H 350                    | <p>3914.1 PATIENT PLAN OF CARE</p> <p>Each home care agency shall develop, with the</p>  | H 350               |  |                          |



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| H 350  | Continued From page 4<br><br>participation of each patient or his or her<br>representative, a written plan of care for that<br>patient.<br><br>This Statute is not met as evidenced by:<br>Based on a record review and interview, it was<br>determined the agency failed to develop a written<br>plan of care (POC) for two (2) of fifteen (15)<br>patient's.<br>(Patient #4 and #5)<br><br>The finding includes:<br><br>On August 15, 2013, beginning at 9:20 a.m., a<br>review of records revealed that Patient #4 and #5<br>were admitted to the home care agency on<br>October 23, 2012. There was no evidence in the<br>records of a plan of care or that services had<br>been rendered. Interview with the President of the<br>agency on August 15, 2013, at approximately<br>3:00 p.m., revealed that POCs are not required<br>by the agency, if the patients were privately<br>paying for services. | H 350  |  | 4-23-13                  |  |
| H 363  | 3914.3(l) PATIENT PLAN OF CARE<br><br>The plan of care shall include the following:<br><br>(l) Identification of employees in charge of<br>managing emergency situations;<br><br>This Statute is not met as evidenced by:<br>Based on record reviews and interviews, the<br>home care agency (HCA) failed to identify all<br>personnel responsible for emergencies for ten<br>(10) of fifteen (15) patients in the sample. (Patient  | H 363  | Plan of Care for Private Pay Patient Patients<br>#4 and #5 were both private pay. Since they<br>receive private pay services the patient has<br>the option to choose which services fit their<br>needs. These two patients opted not to have a<br>nurse return after the initial intake. It is already<br>a practice of ASAP to open all cases with a<br>nurse and close all case with a nurse. Going<br>forward the clinical Supervisor will review the<br>"On Hold" log weekly to assure that all patients<br>not receiving services within 30 days are<br>discharged.<br><br>Also, going forward all patients will receive a<br>Plan of Care prior to starting services that<br>includes private pay beneficiaries. |                          |  |

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| H 363                    | <p>Continued From page 5</p> <p>#1, #3, #11, #12, #14 and #15)</p> <p>The findings include:</p> <p>The home care agency's (HCA's) plan of cares (POCs) were reviewed on August 14, 2013, August 15, 2013, and August 16, 2014, between 10:30 a.m. and 2:00 p.m. respectively. The agency failed to ensure that the POC for ten (10) of the fifteen (15) patients. (Patient #1, #2, #3, #9, #10, #11, #12, #13, #14 and #15) identified who would be in charge for managing emergency situation when in the patient's home as evidenced below:</p> <ol style="list-style-type: none"> <li>1. Review of Patient #1's record revealed a POC with a documented certification period of May 11, 2013 through July 9, 2013. The POC ordered skilled nursing service two to three times a week for nine weeks. Further review of the POC revealed only personal care aides (PCAs) were responsible for life-threatening, non-life threatening and disaster emergencies. The plan failed to evidence the skilled nurses responsibilities for emergencies.</li> <li>2. Review of Patient #2's record revealed a POC with a documented certification period of May 11, 2013 through July 9, 2013. The POC ordered skilled physical therapy services two (2) times a week for eight (8) weeks. Further review of the POC revealed only PCAs were responsible for life-threatening, non-life threatening and disaster emergencies. The plan failed to evidence the PT's responsibilities for emergencies.</li> <li>3. Review of Patient #3's record revealed a POC with a documented certification period of July 26,</li> </ol> | H 363               | <p>For patients #1, #2, #9, #10, #11, #12, #14, #15</p> <p>All plan of cares have been updated to reflect that all employees at ASAP are responsible for contacting 911 in life threatening, non-life threatening, and disasters. The staff has always been aware of the emergency protocol; however it was an oversight and has been rectified to reflect the correct emergency response process on all patient plan of cares.</p> <p>All staff has been made aware of the change made to the plan of care and reminded of their responsibility in emergencies. It is a practice at ASAP that all staff members are well-trained and know the proper steps to take to ensure the safety and well-being of their patients.</p> <p>Going forward, ASAP nurses will review the patient's plan of care monthly before signing to ensure its accuracy of the emergency information for all staff.</p> | <b>8-26-13</b>           |

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| H 363                    | <p>Continued From page 6</p> <p>2013 through September 23, 2013. The POC ordered skilled physical therapy (PT) services two (2) times a week for eight (8) weeks. Further review of the POC revealed only PCAs were responsible for life-threatening, non-life threatening and disaster emergencies. The plan failed to evidence the PT's responsibilities for emergencies.</p> <p>4. Review of Patient #9's record revealed a POC with a documented certification period of January 11, 2013 through July 10, 2013. The POC ordered skilled nursing services one (1) time a month for six (6) months and PCA services eight (8) hours a day, seven (7) days a week for six (6) months. Further review of the POC revealed only personal care aides (PCAs) were responsible for life-threatening, non-life threatening and disaster emergencies. The plan failed to evidence the skilled nurses responsibilities for emergencies.</p> <p>5. Review of Patient #10's record revealed a POC with a documented certification period of September 14, 2012 through March 12, 2013. The POC ordered skilled nursing services one (1) time a month for six (6) months and personal care aide (PCA) services fourteen (14) hours a day, seven (7) days a week for six (6) months. Further review of the POC revealed only PCAs were responsible for life-threatening, non-life threatening and disaster emergencies. The plan failed to evidence the skilled nurses responsibilities for emergencies.</p> <p>6. Review of Patient #11's record revealed a POC with a documented certification period of May 8, 2013 through November 7, 2013. The POC ordered skilled nursing services one (1) time a month for six (6) months and PCA services eight (8) hours a day, seven (7) days a</p> | H 363               | <p>For patients #1, #2, #9, #10, #11, #12, #14, #15</p> <p>All plan of cares have been updated to reflect that all employees at ASAP are responsible for contacting 911 in life threatening, non-life threatening, and disasters. The staff has always been aware of the emergency protocol; however it was an oversight and has been rectified to reflect the correct emergency response process on all patient plan of cares.</p> <p>All staff has been made aware of the change made to the plan of care and reminded of their responsibility in emergencies. It is a practice at ASAP that all staff members are well-trained and know the proper steps to take to ensure the safety and well-being of their patients.</p> <p>Going forward, ASAP nurses will review the patient's plan of care monthly before signing to ensure its accuracy of the emergency information for all staff.</p> | 8-26-13                  |



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| H 363                    | Continued From page 8<br><br>for life-threatening, non-life threatening and<br>disaster emergencies. The plan failed to evidence<br>the skilled nurses responsibilities for<br>emergencies.<br><br>10. Review of Patient #15's record revealed a<br>plan of care with a documented certification<br>period of May 29, 2013 through November 28,<br>2013. The POC ordered skilled nursing services<br>one (1) time a month for six (6) months and PCA<br>services sixteen (16) hours a day, seven (7) days<br>a week for six (6) months. Further review of the<br>POC revealed only PCAs were responsible for<br>life-threatening, non-life threatening and disaster<br>emergencies. The plan failed to evidence the<br>skilled nurses responsibilities for emergencies.<br><br>During a meeting with the President of the<br>agency, on August 16, 2013, at approximately<br>3:00 p.m., it was revealed that the agency would<br>now include all staff on the plan care who would<br>be responsible for emergencies. | H 363               |  | <b>8-26-13</b>           |
| H 366                    | 3914.4 PATIENT PLAN OF CARE<br><br>Each plan of care shall be approved and signed<br>by a physician within thirty (30) days of the start<br>of care; provided, however, that a plan of care for<br>personal care aide services only may be<br>approved and signed by an advanced practice<br>registered nurse. If a plan of care is initiated or<br>revised by a telephone order, the telephone order<br>shall be immediately reduced to writing, and it<br>shall be signed by the physician within thirty (30)<br>days.<br><br>This Statute is not met as evidenced by:   | H 366               | For patients #1, #2, #9, #10, #11, #12, #14,<br>#15<br><br>All plan of cares have been updated to reflect<br>that all employees at ASAP are responsible for<br>contacting 911 in life threatening, non-life<br>threatening, and disasters. The staff has<br>always been aware of the emergency protocol;<br>however it was an oversight and has been<br>rectified to reflect the correct emergency<br>response process on all patient plan of cares.<br><br>All staff has been made aware of the change<br>made to the plan of care and reminded of their<br>responsibility in emergencies. It is a practice<br>at ASAP that all staff members are well-trained<br>and know the proper steps to take to ensure<br>the safety and well-being of their patients.<br><br>Going forward, ASAP nurses will review the<br>patient's plan of care monthly before signing to<br>ensure its accuracy of the emergency<br>information for all staff. |                          |

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| H 366                    | <p>Continued From page 9</p> <p>Based on record review and interview, the home care agency (HCA) failed to ensure patients' plan of care (POC) were approved and signed by a physician within thirty (30) days of the start of care, for three (3) of fifteen (15) patients in the sample. (Patient # 9)</p> <p>The findings include:</p> <ol style="list-style-type: none"> <li>On August 15, 2013, at approximately 11:20 a.m., a review of Patient #9's record revealed a POC with a certification period from January 11, 2013, through July 10, 2013. The review revealed the aforementioned POC was signed on April 20, 2013, sixty-eight days after the start of care.</li> <li>On August 15, 2013, at approximately 1:36 p.m., a review of Patient #12's record revealed a POC with a certification period from April 28, 2013, through October 27, 2013. The review revealed the aforementioned POC was signed on June 28, 2013, thirty-one days after the start of care.</li> <li>On August 16, 2013, at approximately 10:21 a.m., a review of Patient #15's record revealed a POC with a certification period from May 29, 2013, through November 28, 2013. The review revealed the aforementioned POC was signed on July 18, 2013, nineteen days after the start of care.</li> </ol> <p>During a meeting with the agency's President on August 16, 2013, starting at approximately 2:15 p.m., it was revealed the agency have some difficulties from certain physicians getting POC's signed within the required time period.</p> | H 366               | <p>Several mechanisms are in place to ensure that physicians are notified within the 30 day time frame to sign the beneficiaries' plan of care (POC).</p> <p>An electronic log book has been implemented to track the number of communications the Medical Records Coordinator and/or Intake Coordinator make with respect to Primary care physicians and the follow up steps that were are taken. Other procedures include: 1) Call the Physician's office; 2) fax the POC and follow up with a call; 3) mail the POC and follow up with a call and 4) take the POC to the physician's office for signature.</p> <p>For all documentation needing a physician's signature, ASAP calls the physician's office 2-4 times per week; fax multiple copies of the POC at least twice per week; and during the third and fourth week take the POC to the physician's office. Finally, if all else fails and in extreme cases, the Administrator will report the physician to the appropriate government agency (CMS) regarding the difficulties of acquiring a signature from the physician and inform both CMS and the physician of the potential cease of services for their client if a signature cannot be obtained.</p> <p>On a weekly basis, the medical records coordinator will audit the plan of care log to ensure that documents have been signed and returned. In the case, that the plan of cares has not been signed, the following steps listed above will be implemented.</p> | 8-26-13                  |



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| H 390                    | <p><b>3915.6 HOME HEALTH &amp; PERSONAL CARE AIDE SERVICE</b></p> <p>After the first year of service, each aide shall be required to obtain at least twelve (12) hours of continuing education or in-service training annually, which shall include information that will help maintain or improve his or her performance. This training shall include a component specifically related to the care of persons with disabilities.</p> <p>This Statute is not met as evidenced by:<br/>Based on record review and interview, the Home Care Agency (HCA) failed to ensure after the year of service each aide obtained at least twelve (12) hours of continuing education or in-service training annually for seven (7) of sixteen (16) home health aides in the sample. (Employee #5, #6, #7, #9, #11, #16 and #17)</p> <p>The findings includes:</p> <p>On August 16, 2013, a record review of the aforementioned employees' files starting at approximately 11:00 a.m., revealed the following:</p> <ol style="list-style-type: none"> <li>1. Employee #6 was hired on April 8, 2003, and only received nine (9) hours of training for 2012.</li> <li>2. Employee #7 was hired on December 1, 2009, and only received three (3) hours of training for 2012.</li> <li>3. Employee #9 was hired on November 15, 2011, and only received nine (9) hours of training for 2012.</li> </ol> | H 390               | <p>Going forward, all Home Health Aides will receive a reminder notice on or around June 1 of each year reminding them of the 12 hour annual in-service requirement. Employees will be reminded that ASAP offers in-service training to all Home Health Aide staff. As of the end of the 4<sup>th</sup> quarter, employees not having the required amount of in-service hours will be disciplined.</p> <p>ASAP will continue to track the employee's in-service hours by utilizing the Allegheny system that ASAP has created. A tickler system has been put in place to keep all important dates for all employees.</p> |                          |

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| H 390                    | Continued From page 11<br><br>4. Employee #11 was hired on May 21, 2012, and only received six (6) hours of training for 2012.<br><br>5. Employee #16 was hired on April 21, 2008, and only received six (6) hours of training for 2012.<br><br>6. Employee #17 was hired on May 5, 2004, and only received three (3) hours of training for 2012.<br><br>During an interview with the weekend coordinator on August 16, 2013, starting at approximately 2:00 p.m., it was revealed the aforementioned employees' may have had more training but she was unable to locate it at the time of this interview.        | H 390               |  |                          |
| H 453                    | 3917.2(c) SKILLED NURSING SERVICES<br><br>Duties of the nurse shall include, at a minimum, the following:<br><br>(c) Ensuring that patient needs are met in accordance with the plan of care;<br><br>This Statute is not met as evidenced by:<br>Based on record review and interview, the home care agency's (HCA's) nurse failed to ensure that patient needs were met in accordance with the plan of care (POC), for eight (8) of fifteen (15) patients in the sample.<br>(Patient #1, #9, #10, #11, #12, #13, #14 and #15 )<br><br>The findings include:<br><br>1. On August 14, 2013, at approximately 10:00 | H 453               |  |                          |

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| H 453                    | <p>Continued From page 12</p> <p>a.m., review of Patient #1's POC, with a documented certification period of May 11, 2013 to July 9, 2013, revealed the skilled nurse was to visit the patient's home two - three times a week for nine weeks to conduct skilled observations and complete system assessments and cleanse wound with normal saline, apply santyl to yellow slough, pack with calcium alginate, cover with gauze, Kerlix and change daily, teach sign and symptoms of infection.</p> <p>Review of numerous skilled nursing notes for the month of May 2013, June 2013, and July 2013 failed to evidence the skilled nurse provided teaching for signs and symptoms of infection.</p> <p>The skilled nurse revealed on August 15, 2013, at approximately 11:00 a.m., that teaching of signs and symptoms of infection was conducted, however, the training was not documented in the patients' records.</p> <p>2. On August 15, 2013, at approximately 11:20 a.m., review of Patient #9's POC, with a documented certification period of January 11, 2013, to July 10, 2013, revealed that the skilled nurse was required to visit the home one (1) time a month for six months and the PCA to provide services eight (8) hours a day seven (7) days a week for six (6) months. Further review of the record failed to show evidence that PCA services were provided on March 2, 2013 and March 9, 2013.</p> <p>On August 15, 2013, at approximately 1:14 p.m., an interview with the facility's billing coordinator confirm that the PCA did not work on the aforementioned days and the agency did not provide a PCA substitute.</p> | H 453               | <p>The skilled nurse was counseled on correctly documenting teaching (related to signs/symptoms of infections) that is conducted with the patient. All nurses were made aware at the ASAP monthly clinical meeting that all teaching must be documented in the nurses' notes with every encounter with the patient.</p> <p>We realized that our current skilled nurses' note does not allow enough space to document all teaching areas. Therefore, a new teaching note has been created for the nurses to completely document all teaching areas on their skilled nursing notes.</p> <p>Bi-weekly, the clinical supervisor will review the submitted nurses' notes to ensure that all actions have been performed and thoroughly documented.</p> <p>Going forward, ASAP will do their best to staff all patients with the appropriate approved hours. The staffing coordinators will conduct checks and balances of client hours in coordination with the clinical supervisor and the administrator to ensure that clients receive the required hours. The staffing coordinators/clinical supervisor will diligently work to find a PCA replacement in the case that a PCA is not available for the assigned shift.</p> | <p>9-12-13</p> <p>8-26-13</p> |



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| H 453                    | <p>Continued From page 13</p> <p>3. On August 15, 2013, at approximately 11:20 a.m., review of Patient #10's POC, with a documented certification period of September 14, 2012 to March 12, 2013, revealed the skilled nurse would visit the home one (1) time a month for six months, and the PCA was required to provide services fourteen (14) hours a day, seven (7) days a week for six (6) months. Further review of the record failed to show evidence that skilled nursing services were provided in October 2012 and December 2012. Additionally, the record failed to show evidence that PCA services were provided on November 13, 2012 through November 15, 2012.</p> <p>During an interview with the medical records clerk on August 15, 2013, at approximately 12:54 p.m., the medical record clerk was asked to provide any records that would support the delivery of PCA services for the aforementioned timeframe. The clerk indicated that there were no records currently available, but stated that there were boxes of records that had not been filed.</p> <p>4. On August 15, 2013, at approximately 1:27 p.m., review of Patient #11's POC, with a documented certification period of May 8, 2013 to November 7, 2013, revealed skilled nurse would visit the home one (1) time a month for six months and PCA eight (8) hours a day seven (7) days a week for six (6) months. Further review of the record failed to show evidence that PCA services were provided on May 11, 2013, May 12, 2013, May 24, 2013, June 9, 2013, and July 7, 2013.</p> <p>On August 15, 2013, at approximately 2:00 p.m.,</p> | H 453               | <p>We are conducting bi-weekly open houses to recruit for more home health aides. This will ensure we have sufficient staff and coverage when the PCA is unable to cover the assigned shift due to illness or emergency.</p> <p>On a daily basis, the staffing coordinators and clinical supervisor will review the coverage for all clients. ASAP will make every attempt to ensure that clients will have their needs met on a daily basis. It is ASAP's goal to provide the very best of care to all of its patients at all times without having a lapse in service.</p> | 8-26-13                  |

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| H 453                    | <p>Continued From page 14</p> <p>the billing coordinator confirm that the PCA did not work on the aforementioned days and the agency did not provide a PCA substitute.</p> <p>5. On August 15, 2013, at approximately 1:36 p.m., review of Patient #12's POC, with a documented certification period of April 28, 2013 to October 27, 2013, revealed the skilled nurse was required to visited the patient (1) time a month for six months, and the personal care aide to render services twelve (12) hours a day seven (7) days a week for six (6) months. Further review of the record failed to evidence skilled nursing services were provided in April 2013, and failed to provide evidence that PCA services were rendered from April 28, 2013 through August 16, 2013.</p> <p>6. On August 15, 2013, at approximately 1:36 p.m., review of Patient #13's POC, with a documented certification period of January 15, 2013 to July 14, 2013, revealed the skilled nurse was required to provide services one (1) time a month for six months, and the PCA to render services twelve (12) hours a day seven (7) days a week for six (6) months. Further review of the record failed to evidence PCA services were provided from January 15, 2013 through July 14, 2013.</p> <p>7. On August 16, 2013, at approximately 10:06 a.m., review of Patient #14's POC, with a documented certification period of May 30, 2013 to November 29, 2013, revealed the skilled nurse was required to provide services one (1) time a month for six months, and the PCA to provide services eight (8) hours a day seven (7) days a week for six (6) months. Further review of the record failed to evidence that the</p> | H 453               | <p>In an effort to use ASAP's office space wisely, some charts and documents are kept at a secure off site facility. Attached you will find time sheets for Patient #12, #13 that were not available at the time of audit. Going forward ASAP will process and file all time sheets and keep all current documents on site. This will allow easy accessibility to our records at all times.</p> <p>Going forward, ASAP will do their best to staff all patients with the appropriate approved hours. The staffing coordinators will conduct checks and balances of client hours in coordination with the clinical supervisor and the administrator to ensure that clients receive the required hours. The staffing coordinators/clinical supervisor will diligently work to find a PCA replacement in the case that a PCA is not available for the assigned shift.</p> <p>We are conducting bi-weekly open houses to recruit for more home health aides. This will ensure we have sufficient staff and coverage when the PCA is unable to cover the assigned shift due to illness or emergency.</p> | 9-18-13                  |

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| H 453                    | <p>Continued From page 15</p> <p>PCA services were rendered on June 19, 2013, June 30, 2013 and August 1, 2013.</p> <p>8. On August 16, 2013, at approximately 10:21 a.m., review of Patient #15's POC, with a documented certification period of May 29, 2013 to November 28, 2013, revealed the skilled nurse was required to render services one (1) time a month for six months, and the personal care aide (PCA) to render services sixteen (16) hours a day seven (7) days a week for six (6) months. Further review of the record revealed that PCA services were provided for only eight (8) hours on June 17, 2013 through June 20, 2013. The record also revealed that PCA services were not rendered from June 21, 2013 through July 8, 2013.</p> <p>On August 16, 2013, starting at approximately 2:15 p.m., the above findings were discussed with the home agency's president. He indicated that the services were rendered by PCA and the nurse and that he would fax the missing documents to DOH by August 19, 2013. It should be noted, the documents were not received.</p> | H 453               |  |                          |
| H 459                    | <p>3917.2(i) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(i) Patient instruction, and evaluation of patient instruction; and</p> <p>This Statute is not met as evidenced by:<br/>Based on record review and interview, the home</p>   | H 459               |  |                          |



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| H 459                    | <p>Continued From page 16</p> <p>care agency (HCA) skilled nursing staff failed to evaluate the teaching that was provided for four (4) of fifteen (15) patients' in the sample. (Patient #1, #9, #11, #14)</p> <p>The findings includes:</p> <p>1. On August 14, 2013, at approximately 10:30 a.m., a review of Patient #1's record revealed a number of monthly skilled nursing notes for May 2013, June 2013, and July 2013 that reflected that the patient was taught physiology/disease process and diet, and were explained to the patient. The record also reflected that the patient "verbalized understanding of fall and universal precautions." The nurse however, failed to document the patient's specific level of understanding of the aforementioned health teachings.</p> <p>During an interview with the skilled nurse on August 15, 2013, at approximately 11:45 p.m., it was revealed that the nurse did not document understanding of all the specific health teaching that was provided.</p> <p>2. On August 15, 2013, at approximately 10:30 a.m., a review of Patient #9's record revealed a number of notes in January 2013, February 2013, March 2013, April 2013, May 2013, June 2013, and July 2013.</p> <p>The notes documented that teaching was provided to the patient on diet and safety. The nurse, however, failed to document the patient's specific level of understanding of the aforementioned health teachings.</p> <p>3. On August 15, 2013, at approximately 10:30 a.m., a review of Patient #11's record revealed monthly skilled nursing notes in May 2013, June</p> | H 459               | <p>Patients #1, #9, #11, #14</p> <p>The skilled nurse was counseled on correctly documenting teaching (related to signs/symptoms of infections) that is conducted with the patient. The nurse revised her nurses' note to reflect the patients understanding; by the following statement "verbalizing understanding of physiology/disease process and diet" which replaces "fall and universal precautions". This was an oversight on the nurses' part and going forward all nurses' documentation will reflect more detailed understanding of teaching skills.</p> <p>All nurses were made aware at the clinical monthly meeting that all teaching must be documented in the nurses' notes with every encounter with the patient.</p> <p>A new teaching note has been created for the nurse to completely document all teaching areas on their skilled nursing notes.</p> <p>Bi-weekly, the nursing supervisor will review the submitted nurses' notes to ensure that all actions have been performed and thoroughly documented.</p> | 9-12-13                  |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>HCA-0056</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br>B. WING: _____ | (X3) DATE SURVEY COMPLETED<br><br><b>08/21/2013</b> |
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**ASAP SERVICES CORPORATION**

**1420 K STREET NW 7TH FLOOR  
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H 459

Continued From page 17

2013, and July 2013. The notes documented that teaching was provided on medication effect/side effects, physiology/ disease process, diabetic care and diet. The nurse documented client verbalized understanding of fall and universal precautions. The nurse, however, failed to document the patient's specific level of understanding of the aforementioned health teachings.

4. On August 15, 2013, at approximately 10:30 a.m., a review of Patient #14's record revealed monthly skilled nursing notes in June 2013 and July 2013. The notes documented that teaching was provided on medication effect/side effects, physiology/ disease process and diet. The nurse documented client verbalized understanding of fall, universal and infection control procedures. The nurse, however, failed to document the patient's specific level of understanding of the aforementioned health teachings.

On August 16, 2013, starting at approximately 2:15 p.m., a meeting was held with the home care agency's president to ascertain if there were any additional records and to inform the president of the survey findings. The president stated that they would develop a new form so the nurses will have additional space to document the patient's understanding of teaching provided.

H 999

FINAL OBSERVATIONS

During the survey process several calls were made to patients and the following concerns were rendered by four (4) of eleven patients called. It is recommended that this area be reviewed and a determination be made regarding appropriate actions to prevent a reoccurrence.

H 459

Patients #1, #9, #11, #14

The skilled nurse was counseled on correctly documenting teaching (related to signs/symptoms of infections) that is conducted with the patient. The nurse revised her nurses' note to reflect the patients understanding; by the following statement "verbalizing understanding of physiology/disease process and diet" which replaces "fall and universal precautions". This was an oversight on the nurses' part and going forward all nurses' documentation will reflect more detailed understanding of teaching skills.

All nurses were made aware at the clinical monthly meeting that all teaching must be documented in the nurses' notes with every encounter with the patient.

A new teaching note has been created for the nurse to completely document all teaching areas on their skilled nursing notes.

Bi-weekly, the nursing supervisor will review the submitted nurses' notes to ensure that all actions have been performed and thoroughly documented.

H 999

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| H 999                    | Continued From page 18<br>(Patient #16, #20, #21 and #25)<br><br>1. On August 20, 2013, telephone interview with Patient #16 at approximately 2:00 p.m., revealed the home health aide refuses to do light house keeping and the nurse does not provide teaching for the aide.<br><br>2. On August 21, 2013, telephone interview with Patient #20 at approximately 9:20 a.m., revealed the home health aide coverage is not consistent on weekends and weekday. The patient also indicated the aide uses the cell phone a lot.<br><br>3. On August 21, 2013, interview with Patient #21 at approximately 9:20 a.m., revealed the home health aide coverage was not consistent on weekends and home health aide was not properly trained to provide care for patient.<br><br>4. On August 21, 2013, telephone interview with Patient #25 at approximately 9:48 a.m., revealed the patient is not happy with the skilled nurse's time spans for monthly visits. | H 999               | (Patient #16) The home health aide will be counseled about the duties that they are to perform for the patient on a daily basis. The patient will be notified to make the clinical supervisor aware of any further issues they have with the home health aide. The nurse will also be reminded to provide teaching to the home health aides as needed when they conduct their monthly supervisory visits.<br><br>The home health aides have and will continue to be educated about their duties in the quarterly in-services conducted by ASAP. The nurses will be reminded in the monthly clinical meeting to provide education to the home health aides as needed. If any further teaching is necessary, the nurses will be asked to report this information to the clinical supervisor.<br><br>Verbal knowledge will be assessed of home health aides during the in-service training to ensure that they are aware of their duties. The clinical supervisor will assess whether or not the nurses have provided teaching to the home health aides during the monthly clinical meeting.<br><br>(Patient #20) Going forward ASAP will ensure that staffing coordinators conduct a checks and balance of client hours in coordination with the clinical supervisor and the administrator to ensure that clients receive the required hours. The staffing coordinators/clinical supervisor will diligently work to find a PCA replacement in the case that a HHA is not available for the assigned shift. | <b>9-29-13</b>           |



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| H 999                    |  | H 999               | <p>We are conducting bi-weekly open houses to recruit for more home health aides. This will ensure we have sufficient staff and coverage when the HHA is unable to cover the assigned shift due to illness or emergency.</p> <p>On a daily basis, the staffing coordinators and clinical supervisor will review the coverage for all clients. Every attempt will be made to ensure that the client will have their needs met on a daily basis. It is ASAP's goal to provide the very best of care to all of our patients at all times without having a lapse in service.</p> <p>The home health aide will be given a verbal warning reminding them that they are not to continue to use their cell-phones for non-emergency situations.</p> <p>If cell-phone usage persists, action will be taken against this particular employee per handbook regulation.</p> <p>The home health aides will be reminded about conducting themselves in a professional manner while in the home. They will be reminded not to use their cell phone while taking care of their clients. Bi-annual surveys will be sent to all patients to ensure patient satisfaction. ASAP will follow-up with the results of the bi-annual survey and ensure that the clients are receiving excellent patient care.</p> | 9-29-13                  |

Health Regulation & Licensing Administration

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| H 999  |  | H 999   | <p>(Patient #21) ASAP in the future will ensure that the staffing coordinators conduct a checks and balance of client hours in coordination with the clinical supervisor and the administrator to ensure that clients receive the required hours. The staffing coordinators/clinical supervisor will diligently work to find a PCA replacement in the case that a HHA is not available for the assigned shift.</p> <p>We are conducting bi-weekly open houses to recruit for more home health aides. This will ensure we have sufficient staff and coverage when the HHA is unable to cover the assigned shift due to illness or emergency.</p> <p>On a daily basis, the staffing coordinators and clinical supervisor will review the coverage for all clients. Every attempt will be made to ensure that the client will have their needs meet</p> <p>on a daily basis. It is ASAP's goal to provide the very best of care to all of its patients at all times without having a lapse in service.</p> <p>We will follow-up with the patient to make sure the patient's needs are properly being addressed by the home health aide. If it is determined that the home health aide in question is not a good fit for this patient, the home health aide will be removed. The home health aides skills' level will be assessed by the nurse on the supervisory visit. If it is determined the home health aide needs more training then appropriate measures will be taken to make sure this takes place.</p> | 9-29-1  |

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| H 999                    |  | H 999               | <p>The home health aides will be educated about various topics via the quarterly in-service to ensure that have the skill-set needed to provide proper care to their patients. Informational packets related to the in-service content will be provided to in-service attendees. The home health aides during the in-service will be asked questions related to the content provided to ensure understanding and retention of the information.</p> <p>(Patient #25) I will touch base with the patient and nurse and find out what days and times work best for both parties involved. If an agreement cannot be reached, another nurse will be assigned to the patient that can accommodate the patient's needs.</p> <p>As the clinical supervisor and staff communicate with the patients, we will assess their satisfaction with the care that they are receiving. Bi-annual surveys will be sent to all patients to ensure patient satisfaction. The nurses will also be asked about any issues with their patient's during the monthly clinical meeting.</p> <p>The clinical supervisor will follow-up with any issues where the patients are dissatisfied with their care. ASAP will follow-up with the results of the bi-annual survey and ensure that the clients are receiving excellent patient care.</p> | 9-29-11                  |