

Health Regulation & Licensing Administration

PRINTED: 12/05/2017
FORM APPROVED

Received 12/14/17

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0084	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/30/2017
--	--	--	--

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CAPITAL CARE, INC

6210 KANSAS AVENUE, NW
WASHINGTON, DC 20011

(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
--------------------	--	---------------	---	--------------------

H 000 INITIAL COMMENTS

An annual survey was conducted on 11/30/17, to determine compliance with Title 22B DCMR, Chapter 39 (Home Care Agency's Regulations). The home care agency provides home care services to one (1) patient and employs five (5) staff. The findings of the survey were based on a review of administrative records, (1) active patient record, two (2) discharged patient records, and five (5) employee records. The findings were also based on one (1) patient telephone interview with the active patient.

The following are abbreviations used within the body of this report:

DON - Director of Nursing
HCA - Home Care Agency
RN - Registered Nurse

H 000

H 162 3907.6 PERSONNEL

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.

This Statute is not met as evidenced by:
Based on record review and interview, the HCA failed to verify newly hired employees, within the six (6) months prior to hire, had been screened and were free of communicable disease for one (1) of five (5) employee records (RN #1).

Findings included:

On 11/30/17, beginning at 9:54 AM, review of all of the HCA's personnel records revealed that RN

H 162

The Director of Nursing has been written up for this deficiency; assigning personnel who has not yet completed the hiring process, no orientation prior to assigning staff and absence of Health Certificate by date of hire.

A Human Resources Assistant has been hired to assist with the hiring process and

12/8/17

Health Regulation & Licensing Administration
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Paul Henry

TITLE

Administrator

(X6) DATE

12/14/17

STATE FORM

5512

AQFO11

If continuation sheet 1 of 3

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0084	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/30/2017
---	--	--	--

NAME OF PROVIDER OR SUPPLIER CAPITAL CARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6210 KANSAS AVENUE, NW WASHINGTON, DC 20011
--	---

(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)	(X6) COMPLETE DATE
H 162	Continued From page 1 #1 was hired 05/01/17. The RN's file showed a health certification dated 06/05/17, thirty-five (35) days after initial employment. There was no documented evidence that the HCA obtained a health certificate at the time of RN #1's employment application. During an interview on 11/30/17 at 1:52 PM, the DON stated that the RN's last health certificate had expired. Additionally, the HCA would ensure new employees have health certificates completed within 6 months prior to hire.	H 162	<i>to verify that all required documents are submitted with Application.</i> <i>The DON and QA coordinator will verify all applications and documents for completeness before assigning the new hire, they will also ensure that all new hires are oriented prior to being assigned.</i>	
H 999	FINAL OBSERVATIONS The following observation was made during the survey process. It is recommended that this area be reviewed and a determination be made regarding appropriate actions to prevent a reoccurrence. Findings included: On 11/30/17, starting at 9:54 AM, review of the HCA's personnel records showed that RN #1 was hired and oriented to the facility on 05/01/17. On 11/30/17, starting at 12:08 PM, review of patients' medical records showed the following: - RN #1 conducted a supervisory visit with Patient #1 on 04/29/17; - RN #1 conducted a supervisory visit with Patient #2 on 04/28/17; and - RN #1 conducted a skilled nursing visit and supervisory visit with Patient #3 on 04/28/17.	H 999	<i>The DON has been written up for these observations.</i> <i>A Human Resources Assistant has been hired to assist with the hiring process and to verify that all required documents are submitted with application. QA and DON will ensure that all staff are oriented prior to being assigned.</i> <i>The QA and DON will verify all applications for completeness and ensure each new hire has been oriented prior to being assigned.</i>	<i>12-8-17</i>

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0084	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/30/2017
---	---	--	---

NAME OF PROVIDER OR SUPPLIER CAPITAL CARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6210 KANSAS AVENUE, NW WASHINGTON, DC 20011
---	---

(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
H 999	<p>Continued From page 2</p> <p>On 11/30/17 at 12:49 PM, review of the HCA's policy entitled "Employee Orientation" was conducted. The policy indicated, "All employees shall be required to complete an orientation program prior to the start of their assigned duties and responsibilities."</p> <p>On 11/30/17 at 1:40 PM, during an interview, the DON said that RN #1 was hired 05/01/17, however, was asked to perform skilled nursing and supervisory visits before the date of hire due to an agency staffing emergency. The DON said the RN was hired and oriented afterwards as the agency's Quality Assurance Specialist.</p>	H 999		