

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR-0004	(X2) MULTIPLE CONSTRUCTION A BUILDING: _____ B WING: _____	(X3) DATE SURVEY COMPLETED 04/03/2015
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NAME OF PROVIDER OR SUPPLIER CHEVY CHASE HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 5420 CONNECTICUT AVENUE, NW WASHINGTON, DC 20015
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(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
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R 000	<p>Initial Comments</p> <p>An annual licensure survey was conducted from April 2, 2015, to April 7, 2015, to determine compliance with the Assisted Living Law "DC Code § 44-101.01."</p> <p>The Assisted Living Residence (ALR) provides care for one hundred and fourteen (114) residents and employs approximately twenty (20) employees to include professional and administrative staff. The findings of the survey were based on observations, record reviews, and interviews.</p> <p>Please Note. Listed below are abbreviations used in this report.</p> <p>Assisted Living Administrator - ALA Assisted Living Residence - ALR Director of Nursing - DON Private Duty Aide - PDA</p>	R 000	<p>APR 21 2015 <i>CMH</i></p> <p>R652: Effective April 15th, 2015, all Private Duty Aides (PDA) providing direct care to any resident of The Chevy Chase House, will be licensed by Department of Health (DOH) and have a current Certified Nursing Assistant (CNA) status. We have created a staff position "Medical Records Specialist" whose focus and responsibility will be to verify the current licensure of every PDA and CNA providing service with The Chevy Chase House. This person has been hired and is currently serving in this capacity.</p> <p>A database has been put in place, tracking the certification status of all current employees and each and every new applicant will provide proof of licensure and will be added to our database with a "tickler" which will render a 60 day expiration notice to the Medical Records employee. At that time, the employee or agency will be reminded that the 60 day renewal period has begun and proof must be provided prior to the expiration date or termination/suspension of services will be immediate.</p>	(X5) COMPLETE DATE
R 652	<p>Sec. 702a1 Staff Training.</p> <p>(1) Be certified as a nurse's aide; Based on record review and interview, it was determine that the ALR failed to ensure a private duty aide providing direct care for a resident was certified as nurse's assistant for one (1) of two (2) private duty aide's in the sample (PDA #2)</p> <p>The finding includes:</p> <p>On April 7, 2015, at approximately 11:00 a.m., review of PDA #2's personnel file fail to evidence that he/she was a certified nursing assistant.</p> <p>During a telephone interview with the DON on</p>	R 652		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Linda Jackson* TITLE: *Executive Dir* (X6) DATE: *4/21/15*

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R 652 Continued From page 1 R 652

April 7, 2015, at approximately at 11:30 a.m., the DON indicated that PDA#2 had worked with Resident #10 since 2013 providing direct hands-on care. Additionally, the DON indicated she was not aware that PDA #2 was not certified as a nursing assistant.

R652:

Director of Nursing, (DON), will be consistently aware of all agency PDA status.

To include:

1. current license status
2. background investigations completed
3. Physical (PPD) free of communicable disease

File will be provided to DON at the initiation of care. *(DON) lj*

R 653 Sec. 702a2 Staff Training. R 653

(2) Be certified as a home care aide as defined in the Medicare criteria in OBRA 1987; Based on record review and interview, it was determine that the ALR failed to ensure a private duty aide providing direct care for a resident was certified as a home health aide for one (1) of two (2) private duty aide's in the sample (PDA #2)

R653: Staff Training:

To ensure that all our staff are properly trained and credentials up to date, we again hired the Medical Records Specialist whose focus will be on file maintenance and in-service training on an annual basis. One of the paramount responsibilities of this position is again, to record and maintain current licensure information on all Agencies with whom we do business and to monitor the status of all Certification of all Nursing Assistants. An audit of all files will be completed by April 30, 2015.

The finding includes:

On April 7, 2015, at approximately 11:00 a.m., review of PDA #2's personnel file fail to evidence that he/she was a certified home health aide.

During a telephone interview with the DON on April 7, 2015, at approximately at 11:30 a.m., the DON indicated that PDA#2 had worked with Resident #10 since 2013 providing direct hands-on care. Additionally, the DON indicated she was not aware that PDA #2 was not a certified home health aide.

R 960 Subheading Fire Safety. R 960

Sec. 1002. Fire safety.

An ALR shall comply with the Life Safety Code of the National Fire Protection Association, NFPA 101, 1997 edition as follows:

Based on record review and interview, the ALR

Linda Jackson
Executive Director
4-21-15

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R 960 Continued From page 2 R 960

failed to conduct fire drills at least quarterly on each shift in 2014.

The finding includes:

On April 2, 2015, at approximately 11:15 a.m., review of the Fire Drill records failed to evidence that the ALR had conducted fire drills as evidenced below:

- The 1st quarter (January-March) there was no documented evidence that a fire drill was conducted on the night shift;
- The 2nd quarter (April-June) there was no documented evidence that fire drills had been conducted on any shift;
- The 3rd quarter (July-September) there was no documented evidence that fire drills had been conducted on any shift; and
- The 4th quarter (October-December) there was no documented evidence that fire drills had been conducted on the evening and night shift.

On April 2, 2015, at approximately 2:50 p.m., interview with the ALA, indicated that the fire drills had been conducted but the files had been misplaced.

R960: Fire Safety: On April 2, 2015 when inspected, the log book was not available. As we made the inspectors aware, we had a sudden change in leadership at The Chevy Chase House with no opportunity for an organized transition. With the departure of the former Executive Director, the logs of our Fire Drills were misplaced and we were unable to locate the log at that time. However, I am very pleased that we were able to find the log book and the documentation of the previously held drills is attached.

The exercises were held on: 2/23/15, 12/23/14, 3/18/14, and 2/27/14. Attached you will also find the signed attendance sheets.

Going forward, fire drills will be conducted quarterly for every shift with the next one scheduled before April 30, 2015.

Linda Jackson
Executive Director
4/12/15