

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/06/2015
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NAME OF PROVIDER OR SUPPLIER KBC NURSING AGENCY & HOME CARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 7506 GEORGIA AVENUE, NW WASHINGTON, DC 20002
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H 000	<p>INITIAL COMMENTS</p> <p>On January 30, 2015, the Department of Health/Health Regulation and Licensing Administration (DOH/HRLA) received information alleging that Patient #1 did not receive daily wound care, wound care supplies and PT services twice a week as ordered. In addition, Patient #2 did not receive PT services twice a week as ordered. Due to the nature of the information presented, on February 4, 2015, DOH/HRLA initiated an onsite investigation, to verify compliance with the basic standards of practice and Title 22, Chapter 39 (Home Care Agencies Regulations). The findings of the investigation were based on record reviews and interviews.</p> <p>Please Note: Listed below are abbreviations used in this report.</p> <p>Department of Health (DOH) Director of Nursing (DON) Health Regulation and Licensing Administration (HRLA) Home Care Agency (HCA) Physical Therapy (PT) Plan of Care (POC) Registered Nurse (RN)</p> <p>Allegation #1 - Patient #1 was not receiving daily wound care as ordered.</p> <p>Findings-Review of Patient #1's record revealed a prescription dated January 26, 2015, that ordered the skilled nursing to provide wound care to Patient #1's right leg daily. Also noted was a verbal order dated January 30, 2015 that ordered the agency's skilled nurse and the Patient's</p>	H 000	<p style="text-align: center;"><i>Bedinger</i> RECEIVED MAR 20 2015</p> <p>Allegation # 1</p> <p>KBC Nursing Agency and Home Health Care has instituted a new policy for new referrals received. All referrals are now centrally received and categorized. In order to prevent recurrence of this deficiency, KBC has taken the following steps: On February 5, 2015 the Quality Assurance Review Board met and identified a staff member who will be responsible for retrieving and identifying all incoming documents from all sources, and dispatching them to the appropriate staff. If the documents are not handed directly to the applicable staff, but instead are left in a designated area/bin, the designated staff will execute a verbal communication before close of business to ensure that the applicable staff received the documents.</p>	2/5/15 and on going
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Health Regulation & Licensing Administration
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

C. Williams

TITLE

Administrator

(X8) DATE

3/19/15

Health Regulation & Licensing Administration

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H 000	<p>Continued From page 1</p> <p>caregiver to provide wound care to the right leg daily. The record failed to evidence that the agency's skilled nurse provided wound care to the right leg from January 26, 2015 through January 29, 2015 and February 3, 2015.</p> <p>Conclusion- This allegation was substantiated.</p> <p>Allegation #2- The agency failed to provide wound care supplies timely.</p> <p>Findings-Review of Patient #1's record revealed a prescription dated January 26, 2015, that ordered the skilled nurse to provide wound care to the Patient's right leg daily. Interview with the complainant revealed he/she had to provide the wound care supplies for Patient #1 from January 26, 2015 through January 30, 2015, because the home care agency failed to provide the necessary supplies for the new right leg wound. Interview with the agency's DON revealed that the agency is responsible for providing wound care supplies.</p> <p>Conclusion- This allegation was substantiated.</p> <p>Allegation #3- Patient #1 did not receive PT services twice a week as ordered.</p> <p>Findings-Review of Patient #1's record revealed that PT services were ordered 1-3 times a week. Further review of the record failed to evidence PT services were provided for the weeks of December 28, 2014 and January 4, 2015.</p> <p>Interview with the agency's DON revealed that Patient #1's PT services had been put on hold for the weeks of December 28, 2014 and January 4,</p>	H 000	<p>Retrieval and distribution of patient care orders/documents will be treated with the highest priority so patient care/services can begin in a timely manner. All new referrals and any client issues are presented and discussed during our Monday morning meetings. This new process will be monitored by the Director of Nursing/Quality Assurance Director.</p> <p>Allegation # 2</p> <p>KBC has basic wound care dressing supplies which are made available for the nurses. Some dressing supplies are left in the home. Going forward Antimicrobial elements that require prescriptions from physicians will be communicated so that the supplies are obtained and available for wound dressing by the skilled nurse. The Director of Nursing will be responsible for ensuring that this deficiency does not recur.</p>	2/5/15 and on going

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H 000	<p>Continued From page 2</p> <p>2015 because Patient #1 had a recently been discharged from the hospital.</p> <p>Conclusion- This allegation was substantiated.</p> <p>Allegation #4- Patient #2 did not receive PT services twice a week as ordered.</p> <p>Review of Patient #2's record revealed that PT services were ordered 2-3 times a week. Further review of the record failed to evidence PT services were provided for the week of January 4, 2015.</p> <p>Interview with the agency's DON revealed that the agency did not have written PT notes to verify that PT services had been provided for Patient #2 for the week of January 4, 2015.</p> <p>Conclusion- This allegation was substantiated.</p>	H 000	<p>Allegation # 3</p> <p>KBC has established a communication method whereby all individuals involved in a patient's care will be notified of any changes in the status and care of that patient. In addition, the agency will ensure that clinicians conduct their visits in compliance with the visit frequency established in each patient's plan of care by monitoring the visit frequency weekly. The Director of Quality Assurance will be responsible for monitoring the visits and ensuring that the appropriate communication and documentation occurs in a timely manner.</p>	2/6/15 and on going
H 453	<p>3917.2(c) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(c) Ensuring that patient needs are met in accordance with the plan of care;</p> <p>This Statute is not met as evidenced by: Based on interviews and record reviews, it was determined that the HCA's skilled nurse failed to ensure that the patient's need was met in accordance to his/her POC, for one (1) of (1) patient's in the sample. (Patient #1)</p> <p>The finding includes:</p>	H 453	<p>Allegation #4</p> <p>The measures to prevent recurrence and monitoring of this deficiency are the same as in allegation #3.</p> <p>KBC has established a communication method whereby all individuals involved in a patient's care will be notified of any changes in the status and care of that patient. In addition, the agency will ensure that clinicians conduct their visits in compliance</p>	2/6/15 and on going

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H 453	<p>Continued From page 4</p> <p>because she/he was told by the agency's DON that the complainant who is a nurse was providing wound care for Patient #1 from Monday through Friday.</p> <p>On February 4, 2015, starting at approximately 1:50 p.m., interview with RN #2 revealed that the complainant had agreed to help with providing wound care to an older sacral wound but not the new right leg wound.</p> <p>On February 4, 2015, starting at approximately 2:00 p.m., interview with the DON revealed that on January 26, 2015 the agency received an e-fax prescription for Patient #1 to receive daily wound care to right leg. In addition, the agency's skilled nurse had not provided the wound care from January 26, 2015 through January 29, 2015 and February 3, 2015. The DON also stated that "We will provide the wound care daily."</p>	H 453	<p>If the documents are not handed directly to the applicable staff, but instead are left in a designated area/bin, the designated staff will execute a verbal communication before close of business to ensure that the applicable staff received the documents.</p> <p>Retrieval and distribution of patient care orders/documents will be treated with the highest priority so patient care/services can begin in a timely manner. All new referrals and any client issues are presented and discussed during our Monday morning meetings. This new process will be monitored by the Director of Nursing/Quality Assurance Director.</p>	
H 560	<p>3923.1 PHYSICAL THERAPY SERVICES</p> <p>If physical therapy services are provided, they shall be provided in accordance with the patient's plan of care.</p> <p>This Statute is not met as evidenced by: Based on interview and record review, the HCA failed to ensure physical therapy services were provided in accordance with the patient's plan of care for two (2) of two (2) patients in the sample.</p> <p>The findings include:</p> <p>1. On January 30, 2015, starting at approximately 10:15 a.m., telephone interview with the complainant revealed that the agency</p>	H 560	<p>The measures to prevent recurrence and monitoring of this deficiency are the same as in allegation #3. KBC has established a communication method whereby all individuals involved in a patient's care will be notified of any changes in the status and care of that patient. In addition, the agency will ensure that clinicians</p>	2/6/15 and on going

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H 560	<p>Continued From page 5</p> <p>was not providing Patient #1 with PT services twice a week as ordered.</p> <p>On February 4, 2015, starting at approximately 10:15 a.m., review of Patient #1's record revealed a POC dated November 13, 2014 through January 11, 2015 that ordered PT services 1-3 times a week. Further review of the record failed to evidence PT services had been provided for the weeks of December 28, 2014 and January 4, 2015.</p> <p>On February 4, 2015, starting at approximately 1:15 p.m., interview with the PT revealed that he/she had provided PT services for Patient #1 for the weeks of December 28, 2014 and January 4, 2015. Additionally, the PT indicated that if he/she found PT notes for that week he/she would submit them to the agency.</p> <p>On February 6, 2015, at approximately 10:30 p.m., telephone interview with the agency's DON revealed that Patient #1's PT services had been put on hold for the weeks of December 28, 2014 and January 4, 2015 because Patient #1 had a recently been discharged from the hospital.</p> <p>2. On January 30, 2015, starting at approximately 10:15 a.m., telephone interview with the complainant revealed that the agency did not provide Patient #2 with PT services twice a week as ordered.</p> <p>On February 4, 2015, starting at approximately 11:15 a.m., review of Patient #2's record revealed a POC with a certification period of November 18, 2014 through January 16, 2015 that ordered PT services 2-3 times a week. Further review of the record, failed to evidence that PT services were provided for the week of January 4, 2015.</p>	H 560	<p>conduct their visits in compliance with the visit frequency established in each patient's plan of care by monitoring the visit frequency weekly. The Director of Quality Assurance will be responsible for monitoring the visits and ensuring that the appropriate communication and documentation occurs in a timely manner.</p>	
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H 560	<p>Continued From page 6</p> <p>On February 4, 2015, starting at approximately 1:15 p.m., interview with the PT revealed that he/she had provided PT services for Patient #2 for the week of January 4, 2015. Additionally, the PT indicated that if he/she found PT written notes for that week he/she would submit them to the agency.</p> <p>On February 6, 2015, starting at approximately 10:30 a.m., telephone interview with the agency's DON revealed that the agency did not have PT written notes to verify that PT services had been provided for Patient #2 for the week of January 4, 2015.</p>	H 560		



7506 Georgia Ave. Washington, DC 20012

March 11, 2015

Ms. Sharon Mebane
Program Manager
Department of Health
Health Regulation & Licensing Administration
825 North Capital Street NE 2nd Floor
Washington, DC 20002

Dear Ms. Mebane:

Please find enclosed our Plan of Correction for the deficiencies found during the investigation conducted on February 6, 2015 by the Department of Health, Health Regulation & Licensing Administration.

KBC Nursing Agency & Home Healthcare, Inc. would like to thank your agency for giving us the opportunity to improve our services to the residents of the District of Columbia. In our plan of corrections, KBC has implemented steps to prevent these deficiencies from recurring.

Should you have any questions please feel free to contact me at 202 291-6973.

Sincerely,

A handwritten signature in black ink that reads 'Christine Williams'.

Christine Williams,

Administrator

KBC Nursing Agency