

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0061	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/27/2014
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

JD NURSING & MANAGEMENT SERVICES, INC **6120 KANSAS AVE, NW**
WASHINGTON, DC 20011

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H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from March 25, 2014, through March 27, 2014, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to six hundred and thirty-five (635) patients and employs seven hundred and thirty-five (735) staff. The findings of the survey were based observations, record reviews, and interviews with current patients and staff.</p> <p>Please Note: Listed below are abbreviations used in this report.</p> <p>Skilled Nurse (SN) Plan Of Care (POC) Director of Nursing (DON) Home Care Agency (HCA) Home Health Aide (HHA) Licensed Practical Nurse (LPN) Registered Nurse (RN) Physical Therapy (PT) Occupational Therapy (OT)</p>	H 000	<p><i>Received</i> <i>APR 22 2014</i> <i>CM</i></p>	
H 354	<p>3914.3(c) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(c) The goals of the services to be provided, including the expected outcome, based upon the immediate and long-term needs of the patient;</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure the Plan of Care (POC) included the goals of the services to be provided, including the expected outcome, based upon the immediate and</p>	H 354	<p>Meeting scheduled with RN Field Staff and RN Office Staff. All deficiencies were discussed.</p> <p>Some area of the POC will be changed. Staff was instructed to complete the POC in its entirety. Additional staff has been hired to review POC for completeness and compliance before submitting to Data Entry. All areas must be checked, no blanks.</p>	4/31/14

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

TITLE

(X6) DATE

ADMINISTRATOR

4/18/14

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H 354	Continued From page 1 long-term needs of the patient for twenty-two (22) of twenty-five (25) patients in the sample. (Patients #1-17 and #21-25) The findings include: Review of POCs of Patients #1-14 on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., revealed that the POCs did not include the goals of the services to be provided and the expected outcome based upon the immediate and long-term needs of the patient. Review of POCs of Patients #15, #16, #17, #21, #22, #23, #24, and #25 on March 26, 2014, between the hours of 9:30 a.m. and 4:00 p.m., revealed the POCs did not include the goals of the services to be provided and the expected outcome based upon the immediate and long-term needs of the patient. During a face to face interview with the Director of Nursing (DON) and Clinical Supervisor on March 27, 2014, at approximately 4:00 p.m., it was acknowledged that the goals of the services to be provided and the expected outcome based upon the immediate and long-term needs of the patient were not included on the Plan of Care.	H 354	A comprehensive In-service will be scheduled with all RNs on POC.	04/31/14
H 357	3914.3(f) PATIENT PLAN OF CARE The plan of care shall include the following: (f) Provisions relating to the reevaluation of services, discharge planning, referral of services and continuation or renewal of services; This Statute is not met as evidenced by:	H 357	Refer to Page #2 H354	04/31/14

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H 357	Continued From page 2 Based on a record review and interview, it was determined that the agency failed to ensure discharge planning was documented on the Plan of Care (POC) for twenty-two (22) of twenty-five (25) patients in the sample. (Patients #1-17 and #21-25) The findings include: Review of POCs of Patients #1-14 on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., failed to include provisions for discharge planning. Review of POCs of Patients #15, #16, #17, #21, #22, #23, #24, and #25 on March 26, 2014, between the hours of 9:30 a.m. and 4:00 p.m., failed to include provisions for discharge planning. During a face to face interview with the Director of Nursing (DON) and Clinical Supervisor on March 27, 2014, at approximately 4:30 p.m., it was acknowledged that the POC failed to include provisions related to discharge planning for the above-mentioned Patients.	H 357	Refer to Page #2 H354	04/31/14
H 359	3914.3(h) PATIENT PLAN OF CARE The plan of care shall include the following: (h) Prognosis, including rehabilitation potential; This Statute is not met as evidenced by: Based on record review and interview, the agency's Plan of Care (POC) failed to document the rehabilitation potential for twenty (20) of twenty-five (25) patients in the sample. (Patients	H 359	Refer to Page #2 H354	04/31/14

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H 359	Continued From page 3 #1, #2, #3, #4, #5, #6, #7, #9, #10, #11, #12, #13, #14, #15, #16, #17, #21, #22, #24, and #25) The findings include: Review of POCs of Patients #1, #2, #3, #4, #5, #6, #7, #9, #10, #11, #12, #13, #14, on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., revealed the POCs failed to include provisions for rehabilitation potential. Review of POCs of Patients #15, #16, #17, #21, #22, #24, and #25 on March 26, 2014, between the hours of 9:30 a.m., and 4:00 p.m., revealed the POCs failed to include provisions for rehabilitation potential. During a face to face interview with the Director of Nursing (DON) and Clinical Supervisor on March 27, 2014, at approximately 4:15 p.m., it was acknowledged that the POC failed to include provisions related to rehabilitation potential.	H 359	Refer to Page #2 H354	04/31/14
H 364	3914.3(m) PATIENT PLAN OF CARE The plan of care shall include the following: (m) Emergency protocols; and... This Statute is not met as evidenced by: Based on record review and interview the home care agency (HCA) failed to ensure that the Plans of Care (POCs) included specific instructions on the emergency protocol for twenty-five (25) of twenty-five (25) patients in the sample. (Patients #s 1-25) The findings include:	H 364	The emergency protocols on the POC will be re-written.	5/20/14

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H 364	Continued From page 4 Review of POCs of Patients #1-14 on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., revealed a statement as follows: "SN, PT, OT or HHA to call 911 in any emergency situation while in the patient's home." There was no documented evidence on the POCs (#s 1-14) regarding any emergency protocol for employees or patients to follow. Review of POCs #15-25 on March 26, 2014, between the hours of 9:30 a.m. and 4:00 p.m., revealed a statement as follows: "SN, PT, OT or HHA to call 911 in any emergency situation while in the patient's home." There was no documented evidence on the POCs (#s 15-25) regarding any emergency protocol for employees or patients to follow. During a face to face interview with the DON March 27, 2014, at approximately 3:45 p.m., it was acknowledged by the DON that the POC did not include specific instructions on the emergency protocol for Patient's #1, #2, #3, #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #17, #18, #19, #20, #21, #22, #23, #24 and #25. The administrator and clinical director indicated that the agency would add an addendum to the POC to include specific instructions on the emergency protocol for clinical staff to follow when in the home.	H 364	The protocol will identify who is to be notified in case of emergencies and their phone numbers. Staff will be In-serviced on all changes. Emergency Protocol will also include different types of emergencies.	5/20/14
H 399	3915.10(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE Personal care aide duties may include the following: (f) Observing, recording, and reporting the	H 399	The Personal Care Aide visit record would be changed to include area for recording the Patient's physical condition, behavior and appearance. PCAs will be In-serviced regarding the change and proper documentation.	6/1/14

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H 399	<p>Continued From page 5</p> <p>patient's physical condition, behavior, or appearance;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to ensure Personal Care Aides (PCAs) recorded the patient's physical condition, behavior or appearance for twenty-one (21) of twenty-five (25) patients in the sample. (Patient #1, #2, #3, #4, #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #21, #22, #23, #24, #25).</p> <p>The findings include:</p> <p>Review of Patients records # 1-14 on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., revealed HHA time sheets that indicate the dates and times the HHA provided care to their Patients. There was no documented evidence that the HHAs observed their patients' physical condition or appearance.</p> <p>Review of Patients # 15, 16, 21, 22, 23, 24, 25 records on March 26, 2014, between the hours of 9:30 a.m. and 4:00 p.m., revealed HHA time sheets that indicate the dates and times the HHA provided care to their patients. There was no documented evidence that the HHA observed their patient's physical condition or appearance.</p> <p>During a face to face interview with the DON on March 27, 2014, at approximately 3:45 p.m., it was acknowledged by the DON that the HHAs time sheets did not contain documented evidence that the HHAs observed the patients' physical condition or appearance. Additionally, the DON stated that the agency would modify the HHA time sheets to allow the HHA room for documentation</p>	H 399	<p>The time sheet will be reviewed at time of submission for this portion to be completed. Time sheet will not be processed until properly filled out.</p> <p>Refer to Page #5 H399</p>	<p>6/1/14</p> <p>6/1/14</p>	

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H 399	Continued From page 6 of the patients physical condition or appearance.	H 399	Refer to Page #5 H399	6/1/14	
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 record review and interview, it was determined that the skilled nurse failed to ensure that the patient's needs were met in accordance with their POC for one (1) of twenty-five (25) patients in the sample. (Patient #18)</p> <p>The finding includes:</p> <p>On March 26, 2014, at approximately 10:07 a.m., review of Patient #18's POC, with a documented certification period from February 11, 2014 to April 11, 2014, revealed that the skilled nurse was to visit the patient seven (7) times a week for two (2) weeks, five (5) times a week for two (2) weeks and then three (3) times a week for nine (9) weeks. The purpose of the visits were to assess and observe body systems and to perform wound care to the patient's stage three (3) sacral decubitus by "cleansing with normal saline wound cleanser, apply wet to dry dressing, cover with 4 x 4 gauze and secure with allevyn tape".</p> <p>Review of the SN notes dated February 15-21, 2014, February 23, 2014, February 25-28, 2014, March 1, 2014 and March 4-5, 2014, revealed that the SN applied Santyl to the Patient's sacral decubitus during wound care. Further review of</p>	H 453	<p>Wound care In-service will be presented to RNs, emphasis on most appropriate type wound care for certain wounds types. Appropriate frequencies and documentation will be ensured. Our wound care policy will be reviewed and re-written as necessary. Documentation will include weekly measurements, the wound description, evidence of LPN supervision. Charts will be reviewed by Director of Skilled Care. In-service will be conducted by Director of Skilled Care.</p>	5/20/14	

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H 453	Continued From page 7 the SN notes dated February 22 and 24, 2014, and March 6, 2014 revealed that the SN applied hydragel to the Patient's sacral decubitus during wound care. There was no physician order in the clinical record for santyl or hydragel to be applied to the Patient #18's sacral decubitus. During a face to face interview with the DON and Clinical Supervisor on March 26, 2014, at approximately 2:30 p.m., the DON and Clinical Supervisor acknowledged that the physician's order for Santyl was received as a verbal order but was not placed in the clinical record. Additionally, the DON and Clinical Supervisor stated that LPN is used to perform wound care in most cases, but the RN will conduct weekly wound assessments and supervise the LPN.	H 453	Refer to Page #7 H453	5/20/14	
H 455	3917.2(e) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (e) For registered nurses, supervision of nursing services delivered by licensed practical nurses, including on-site supervision at least once every sixty-two (62) calendar days; This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to have evidence that the Registered Nurse (RN) supervised the practices of the Licensed Practical Nurses (LPN) for one (1) of twenty-five (25) patients. (Patient #18).	H 455	Services delivered by Licensed Practical Nurses will be supervised by Registered Nurse. The Director of Skilled Care will do case conferences with RNs checking; SOC dates , visit frequency, verbal orders, signing POC, LPN supervision and documentation.	5/20/14	

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H 455	Continued From page 8 Cross Reference Regulation 3917.2(c) Tag 0453. Based on record review and interview, it was determined that the skilled nurse failed to ensure that the patient's needs were met in accordance with their POC for one (1) of twenty-five (25) patients in the sample. (Patient #18). Further review of the record revealed the aforementioned service was provided by an LPN. The record failed to evidence an RN had supervised the LPN services.	H 455	Refer to Page #8 H455	5/20/14	
H 459	3917.2(i) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (i) Patient instruction, and evaluation of patient instruction; and This Statute is not met as evidenced by: Based on interview and record review, the home care agency's (HCA) skilled nursing staff failed to provide documented evidence that the specific instructions given to patients related to management of their health conditions were understood for twenty-five (25) of twenty-five (25) patients in the sample (Patients #1-25). The findings include: Review of RN notes in Patients # 1-14 clinical records on March 25, 2014, between the hours of 11:00 a.m. and 4:00 p.m., failed to reveal documented evidence that the RNs evaluated the patients understanding of the instructions given to	H 459	RNs will be In-serviced and instructed to document evidence of specific instructions given to patients related to management of their health condition were understood. Staff was instructed not to use term Patient or Client verbalized understanding.	5/20/14	

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H 459	Continued From page 9 them during the RN visit. Review of POCs for Patients' #15-25 on March 26, 2014, between the hours of 9:30 a.m. and 4:00 p.m. failed to reveal documented evidence that the RNs evaluated the patients understanding of their clinical and personal care that was allegedly taught to them during the RN visit. A face to face interview with the DON and Clinical Supervisor on March 27, 2014 at 2:45 p.m., confirmed that the skilled nurses did not document evaluation of teachings to the patients or caregivers during their visits. The DON and Clinical Supervisor stated that he/she will reinforce the need for proper documentation on future nursing in-services.	H 459	In the In-service staff was instructed to document what was taught and the Clients verbal response as evidence of the understanding. The RN visit record has been changed.	5/20/14
H 474	3918.2(c) PSYCHIATRIC NURSING SERVICES Psychiatric nursing services shall be provided by a registered nurse with: (d) American Nurses' Association certification in psychiatric or community health nursing. This Statute is not met as evidenced by: Based on review of six (6) RN personnel files and interview with the DON and Clinical Supervisor it was determined that the agency failed to provide care to their patients' with psychiatric diagnoses with nurses trained in psychiatric care. The findings include: On March 25-26, 2014, Patients' #1-25 clinical records were reviewed.	H 474	An assessment will be done on Clients with Psychiatric diagnoses. Clients will be transferred to Agencies with Registered Nurse with American Nurses' Association certification in Psychiatric or Community Health Nursing.	5/20/14

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H 474	<p>Continued From page 10</p> <p>It was determined that Patients #1-6, Patient #8, Patient #11, Patients' #13-15 and Patient #22 had psychiatric diagnoses.</p> <p>On March 27, 2014 at approximately 2:00 p.m. review of the personnel records for the nurses who provided care to the abovementioned patients failed to include evidence that the nurses were trained in psychiatric nursing care.</p> <p>A face to face interview with the DON on March 27, 2014 at approximately 3:30 p.m., confirmed that the nurses had not been trained in Psychiatric nursing.</p>	H 474	<p>RN staff meeting will be held to notify Staff of change.</p>	5/20/14	