


Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR-0027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/17/2015
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NAME OF PROVIDER OR SUPPLIER JOYE ASSISTED LIVING SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 
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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 Initial Comments

An annual survey was conducted on September 16, 2015, through September 17, 2015, to determine compliance with the Assisted Living Law " DC Code § 44-101.01."

The Assisted Living Residence (ALR) provides care for six (6) residents and employs seven (7) employees to include a registered nurse, a trained medication employee and home health aides. The findings of the survey were based on observations, record reviews, and interviews.

Please Note: Listed below are abbreviations used throughout the body of this report.

ABBREVIATIONS

- ALA --- Assisted Living Administrator
- cc --- cubic centimeters
- CNA --- Certified Nursing Assistant
- g-tube --- gastrostomy tube
- HHA --- Home Health Aide
- H&P --- History and Physical
- via --- by way of

R 000

Department of Health
Health Regulation & Licensing Administration
Intermediate Care Facilities Division
899 North Capitol St., N.E.
Washington, D.C. 20002

Received 11/10/15

R 292 Sec. 504.1 Accommodation Of Needs.

(1) To receive adequate and appropriate services and treatment with reasonable accommodation of individual needs and preferences consistent with their health and physical and mental capabilities and the health or safety of other residents; Based on record review and interview , the ALR failed to ensure appropriate and adequate services were provided for two (2) of six (6) residents' in the sample. (Residents' #1 and #4)

R 292

The findings include:

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

Catherine Richardson RN

TITLE


ADMINISTRATOR

(X6) DATE

10/10/2015

Health Regulation & Licensing Administration

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R 292	<p>Continued From page 1</p> <p>1. On September 16, 2015, at approximately 9:00 a.m., review of Resident #1's record revealed an H&P dated February 14, 2014. The H&P ordered monthly medical evaluations. The record failed to evidence the resident had a medical evaluation in May 2015.</p> <p>2. On September 16, 2015, at approximately 11:00 a.m., review of Resident #4's record revealed an H&P dated July 15, 2013. The H&P ordered labs every six months. Further review of the record failed to evidence any lab results.</p> <p>During an interview with the ALA on September 16, 2015, starting at approximately 12:00 p.m., it was revealed that both residents have a new doctor and he did not want to continue with the aforementioned orders.</p> <p>At the time of this survey, there was no documented evidence to discontinue Resident #1's monthly medical evaluations and Resident #2's lab orders.</p>	R 292	<p style="text-align: right;">09/17/15 AND DATED</p> <p>To PREVENT THIS PRACTICE FROM RECURRING, ALA SHALL ENSURE THAT ALL NEW RESIDENTS. NEWLY ASSIGNED MD COMPLETE A NEW PHYSICAL ASSESSMENT FORM INDICATING ANY CHANGES IN THE ASSESSMENT FORM. RESIDENT #1 AND #4 PHYSICAL ASSESSMENT FORMS HAVE BEEN SENT TO THEIR RESPECTIVE MD FOR UPDATES.</p>	
R 605	<p>Sec. 701g2 Staffing Standards.</p> <p>(2) Possess current and appropriate licensure and certifications as required by law; Based on observation, interview and record review, it was determined that an employee failed to possess the appropriate license to administer tube feeding for one (1) of (1) resident's receiving tube feeding. (Resident #1)</p> <p>The finding include:</p>	R 605	<p>SEE RESPONSE ON PAGE 3 OF 5.</p>	

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NAME OF PROVIDER OR SUPPLIER **JOYE ASSISTED LIVING SERVICES**
STREET ADDRESS, CITY, STATE, ZIP CODE [REDACTED]

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R 605 Continued From page 2

R 605

On September 16, 2015, at approximately 10:00 a.m., observation of Resident #1's room revealed multiple cans of Jevity 1.5 supplement and a 60 cc syringe[used for g-tube feeding].

On the same day at approximately 9:10 a.m., interview with HHA #3 revealed that the resident receives g-tube feeding four times a day and that he/she administers the 12 noon dose.

On September 16, 2015, at approximately 10:30 a.m., review of Resident #1's record revealed a current physician order dated (September 1, 2015) for Jevity 1.5, one can four times a day via g-tube and water flushes, 250 cc every six hours via g-tube. Further review of the record revealed that all feeding should be held for a residual of 60 cc or greater.

On September 17, 2015, starting at approximately 9:40 a.m., review of HHA #3 personnel file revealed that HHA #3 had a current HHA certification for the District of Columbia and a CNA certification for Maryland.

Review of Chapter 93, Title 17, Home Health Aide Regulations revealed that the only task an HHA can perform when working with a g-tube was listed as follows: Section 9315. 1 (o) that under the supervision of a licensed nurse or health professional the HHA can clean around a gastrostomy site.

During a telephone interview with the ALA post survey, on September 21, 2015, at approximately 9:00 a.m., the ALA indicated that she thought because HHA #3 was also a CNA that he/she could administer the g-tube feeding. The ALA [who is also an RN] then indicated that she would administer all tube feeding going forward.

R605

TO PREVENT THIS PRACTICE FROM RECURRING ALA SHALL CONTINUE TO ADMINISTER ALL G-TUBE FEEDINGS AND ALL OTHER DUTIES ASSIGNED TO AN RN. WHEN IN DOUBT ON RULES AND REGULATIONS GOVERNING A PRESCRIBED TASK, ALA SHALL CONTACT HHA AND BOARD OF NURSING FOR CLARIFICATION.

09/17/15
AND
D.J.G.W.S

Health Regulation & Licensing Administration

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R 605 Continued From page 3 R 605

A post survey interview was conducted on September 21, 2015, at approximately 11:00 a.m., with an employee of the District of Columbia's Board of Nursing. The interview revealed that currently only a licensed nurse can administer g-tube feeding.

At the time of this survey, HHA #3 failed to have a license that allowed him/her to administer g-tube feeding.

SEE RESPONSE ON PG 3 OF F

R 981 Sec. 1004a General Building Interior R 981

(a) An ALR shall ensure that the interior of its facility including walls, ceilings, doors, windows, equipment, and fixtures are maintained structurally sound, sanitary, and in good repair. Based on observations and interviews, the ALR failed to ensure the interior was in good repair.

The finding includes:

During an environmental inspection on September 16, 2015, starting at approximately 8:57 a.m., the following concerns were identified:

1. The enamel on the toilet seat in the upstairs bathroom was worn in multiple places.
2. One of two window screens in Resident #3's room was torn.
3. The facility's food refrigerator temperature failed to maintain proper cooling temperatures as indicated below:

(a). On September 16, 2015, at approximately 10:00 a.m., the temperature inside the

R981

09/17/15
AND
ONGOING

TO PREVENT THIS PRACTICE FROM RECURRING:
ALL NEW STAFF HAVE BEEN TRAINED ON FOOD SAFETY AND CHECKING AND RECORDING REFRIGERATOR / FREEZER TEMPERATURES EVERY SHIFT STAFF HAVE BEEN INSTRUCTED TO NOTIFY ALA IF TEMPERATURES ARE OUT OF THE ACCEPTABLE RANGES OF 41°F → 20°F.

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R 981 Continued From page 4

refrigerator was noted to be 60 degrees Fahrenheit. The refrigerator contained food, condiments, and milk. The ALA was instructed to discard all the refrigerators contents.

(b). On September 16, 2015, at approximately 4:00 p.m., the temperature inside the refrigerator was noted to be 52 degrees Fahrenheit. The refrigerator was empty and all contents had been removed.

(c). On September 17, 2015, at approximately 9:00 a.m., the temperature inside the refrigerator was noted to be 52 degrees Fahrenheit. The refrigerator contained eggs and the ALA was instructed to discard the eggs.

Review of the FDA website revealed that for food safety refrigerator temperatures should be 40 degrees Fahrenheit or lower.

During an interview with the ALA on September 17, 2015, at approximately 10:00 a.m., the ALA was instructed that she could not use the refrigerator until it has been repaired/replaced. Additionally, the ALA indicated that she would have the refrigerator repaired by a refrigerator repairman.

It should be noted that the ALA indicated that the facility had a empty working medication refrigerator that they will use temporarily until the repair/replacement of the food refrigerator.

During a post survey observation on September 21, 2015, at approximately 11:50 a.m., the temperature was 40 degrees Fahrenheit. At the time of this observation, the refrigerator was empty.

R 981

SEE RESPONSE ON PAGE 4 OF 5