

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0073	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/24/2015
NAME OF PROVIDER OR SUPPLIER MBI HEALTH SERVICES, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 4130 HUNT PLACE NE WASHINGTON, DC 20019		
(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	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from September 22, 2015, through September 24, 2015, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to ten (10) patients and employs eighteen (18) employees. The findings of the survey were based on ten (10) record reviews, five (5) home visits and interviews with patients and staff.</p> <p>Please Note: Listed below are abbreviations used in this report.</p> <p>Director of Nursing (DON) Home Care Agency (HCA) Occupational Therapy (OT) Physical Therapy (PT) Plan of Care (POC) Start of Care (SOC)</p>	H 000		
H 203	<p>3908.4 ADMISSIONS</p> <p>The home care agency shall notify each entity referring a potential patient to the agency, and each individual requesting services from the agency, of the availability or unavailability of service, and the reason(s) therefor, within 48 hours after the referral or request for services.</p> <p>This Statute is not met as evidenced by: Based on record review and interview it was determined that the HCA failed to notify the physician of the unavailability of therapy services, within forty-eight (48) hours of the referral, for two (2) of seven (7) patients. (Patient #1 and #7).</p> <p>The finding includes:</p>	H 203	<p>Corrective Action to address identified deficient practice.</p> <p>The DON shall inform the HCA Administrator of any problems or issues preventing the timely notification of the patient and doctor of availability of services to be provided prior to the 48 hour time limit. The doctor and patient will be notified within 48 hours of the services to be provided and when by the DON as required. If a patient cannot be notified or scheduled within 48 hours as a result of the patient's schedule (as was the case for Patient #1 and #7), the DON will notify the HCA Administrator and doctor and maintain</p>	10/30

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

0899

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If continuation sheet 1 of 3

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H 203	Continued From page 1 1. Review of Patient #1's clinical record revealed a POC with a certification period of July 10, 2015, to September 4, 2015. Review of the POC revealed a physician order for PT services one (1) to three (3) visits weekly for six (6) to nine (9) weeks to evaluate and treat the patient. Further review of the clinical record revealed that PT services were not initiated until July 29, 2015. There was no documented evidence in the clinical record that the physician was notified of the unavailability of PT services. 2a. On September 22, 2015, starting at approximately 10:45 a.m., review of Patient #7's clinical record revealed a POC with a certification period of August 21, 2015 to October 19, 2015. The POC documented that OT services were to be provided one (1) to three (3) times per week for six (6) to nine (9) weeks to evaluate and treat Patient #7. Further review of the record revealed that OT services were not initiated until September 14, 2015. There was no documented evidence in the clinical record that the physician was notified of the unavailability of OT services. 2b. On September 22, 2015, starting at approximately 10:45 a.m., review of Patient #7's clinical record revealed a POC with a certification period of August 21, 2015 to October 19, 2015. The POC documented that PT services were to be provided one (1) to three (3) times per week for six (6) to nine (9) weeks to evaluate and treat Patient #7. Further review of the record revealed that PT services were not initiated until August 26, 2015. There was no documented evidence in the clinical record that the physician was notified of the unavailability of PT services.	H 203	appropriate documentation relative to the action and situation. The DON will ensure that all services will be provided within 48 hours by appropriate health professional and staff. Measures to ensure that deficiency will not recur: The DON will maintain a log of services to be provided within 48 hours and results. The log will be submitted to the HCA Administrator prior to the 48 hour time period and the report will be reviewed by the HCA Administrator. Monitoring Corrective Action: The HCA Administrator will monitor the the policy's implementation along with the Assistant DON. Any such deficiency will adversely affect DON performance appraisal. If the deficiency is the result of personnel other than DON, the staff person will be disciplined according to personnel policies.	10/30 30

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H 203	Continued From page 2 On September 22, 2015, starting at approximately 1:00 p.m., during an interview with the DON, it was acknowledged that there was a delay in the patient receiving PT and OT services without the physician being notified. On October 1, 2015, review of the agency's admission policy documented that "all new initial assessments must be completed within 48 hours of receiving the referral from all sources".	H 203			