

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HCA-0008	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  01/10/2013
NAME OF PROVIDER OR SUPPLIER  MAXIM HEALTHCARE SERVICES			STREET ADDRESS, CITY, STATE, ZIP CODE 6856 EASTERN AVENUE, NW, SUITE 220 WASHINGTON, DC 20012		
(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	INITIAL COMMENTS  An annual survey was conducted at your agency from January 8, 2013, through January 10, 2013, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a random sample of ten (10) clinical records based on a census of twenty (20) patients, ten (10) personnel files based on a census of ninety-one (91) employees and three (3) home visits. The findings of the survey were based on observations in the home, interviews with agency staff and patient interviews as well as a review of patient and administrative records.	H 000	<p><i>Received 2/1/13</i></p> <p>Department of Health Health Regulation &amp; Licensing Administration Intermediate Care Facilities Division 899 North Capitol St., N.E. Washington, D.C. 20002</p>		
H 271	3911.2(k) CLINICAL RECORDS  Each clinical record shall include the following information related to the patient:  (k) Discharge summary, including the reason for termination of services and the effective date of discharge:  This Statute is not met as evidenced by: Based on record review and staff interviews, the home care agency (HCA) failed to have a discharge summary for one (1) of three (3) discharged patients. (Patient # 7)  The finding includes:  On January 8, 2013, review of Patient #7's record, starting at approximately 10:05 a.m., revealed a skilled nursing written plan of care (POC) dated August 21, 2012. The plan of care indicated the patient would be discharged after four visits. There was no documented evidence of a discharge summary in the record at the time of	H 271	<p>Administrative Officer will re-educate internal staff on the discharge process and information needed on the summary including intermittent visits. Reference attachment #1: HH-CL- 021.4. Due date: 02/06/2013</p> <p>Director of Clinical Services/Clinical Designee will complete 100% focused patient chart review of discharges within the past 60 days to ensure proper information was documented. An update will be sent to the physician if non compliance is found. Due date: 02/06/2013</p> <p>Compliance will be monitored by Director of Clinical Services/Clinical Designee or Administrative Officer/Designee during the discharge process and ongoing quarterly medical record reviews. Continued staff education on the discharge process will occur as needed. Due Date: Ongoing.</p>		

Health Regulation & Licensing Administration

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

TITLE

(X6) DATE

STATE FORM

5599

PMV211

If continuation, Sheet 1 of 3

*Administrative Officer* 02/01/13



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H 271	Continued From page 1  this survey.  During an interview with the Clinician on January 8, 2013, at approximately 12:00 p.m., it was revealed the HCA does not write a discharge summary for patients who received five visits or less from the agency. The Clinician indicated the agency would start writing discharge summaries for all patients who received services from the agency.	H 271		
H 453	3917.2(c) SKILLED NURSING SERVICES  Duties of the nurse shall include, at a minimum, the following:  (c) Ensuring that patient needs are met in accordance with the plan of care;  This Statute is not met as evidenced by: Based on interview and record review, the Home Care Agency's (HCAs) nurse failed to ensure that patient needs are met in accordance with the plan of care (POC) for one (1) of (10) patients in the sample. (Patient #8)  The finding includes:  Review of Patient # 8's POC dated November 11, 2012, to January 9, 2013, on January 9, 2013, at approximately 12:10 p.m., revealed the home health aide (HHA) to provide service for five (5) to eight (8) hours, four (4) to seven (7) days a week. Review of Patient #8's HHA time sheets revealed only four hours of services were provided on 11/13/12, 11/15/12, 11/20/12, 11/22/12, 12/01/12, 1/3/13, 1/4/13.	H 453	Administrative Officer will re-educate internal staff on the importance of providing care as established into the care plan. Internal staff will be re-educated on the missed shift policy process. Due date: 02/06/2013.  Administrative Officer/ Designee will complete 100% focused medical record review on missed shifts. Due Date: 04/01/2013.  Compliance will be monitored by Director of Clinical Services/Clinical Designee or Administrative Officer/Designee through quarterly medical record review. Continued staff education on the missed shift policy process will occur as needed. Due Date: Ongoing	

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H 453	Continued From page 2  During a interview with the Administrator on January 9, 2013, at approximately 1:30 p.m., it was revealed there was an issue with the evening HHA providing services as ordered. There was no documented evidence skilled nursing services was consistently ensuring that patient needs are being provided in accordance with the POC.	H 453			