

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0079	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/29/2017
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Received 1/25/18

NAME OF PROVIDER OR SUPPLIER UNIVERSAL HOME HEALTHCARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1220 12TH STREET, SE WASHINGTON, DC 20003
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H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from September 27, 2017 through September 29, 2017 to determine compliance with Title 22B DCMR, Chapter 39 (Home Care Agency's Regulations). The home care agency provides home care services to ninety-five (95) patients and employs one hundred sixty-three (163) staff. The findings of the survey were based on a review of administrative records, four (4) complaints, eight (8) active patient records, two (2) discharged patient records, and fifteen (15) personnel records. The findings were also based on five (5) home visits, ten (10) patient telephone interviews, and interviews with patients, family and staff.</p> <p>The following are abbreviations used within the body of this report:</p> <p>APS - Adult Protective Services DON - Director of Nursing HCA - Home Care Agency HHA - Home Health Aide PCA - Personal Care Aide POC - Plan of Care RN - Registered Nurse SN - Skilled Nurse SOC - Start of Care</p>	H 000		
H 126	<p>3906.1(g) CONTRACTOR AGREEMENTS</p> <p>If a home care agency offers a service that is provided by a third party or contractor, agreements between the home care agency and the contractor for the provision of home care services shall be in writing and shall include, at a minimum, the following:</p> <p>(g) The duration of the agreement, including provisions for renewal, if applicable; and...</p>	H 126	<p>3906.1 (g) Contract Agreement</p> <p>The contract was corrected to reflect the duration of the contract and the term of renewal. To ensure that other staff were not affected by this deficient practice the HR Director will review the contractual agreements of all contracted staff. The DON and/or Administrator will ensure that all areas</p>	<p>10/12/17 to ongoing</p>

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

Wendell D. McLaughlin

TITLE

President

(X6) DATE

1/25/2018

Health Regulation & Licensing Administration

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H 126	<p>Continued From page 1</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to specify the duration of the agreement and include provisions for renewal for one (1) of one (1) contract agreements reviewed (RN #2).</p> <p>The finding includes:</p> <p>On September 27, 2017 at 9:15 a.m. during the entrance conference, the HCA's DON said that the agency obtained contractor agreements for skilled nursing services. At 1:57 p.m., review of the HCA's personnel files showed that RN #2's Professional Services Agreement did not include a duration for the contractual arrangement by specifying a beginning and an ending date. Additionally, there was no provision within the agreement to address terms of renewal.</p> <p>During the exit interview with the Administrator on September 28, 2017 at 3:00 p.m., the Administrator indicated that the contractual agreements are renewed annually and any information missing from RN #2's agreement would be added.</p> <p>At the time of survey, the HCA failed to ensure that all contractual personnel agreements were complete.</p>	H 126	<p>3906.1 (g) Contract Agreement (cont'd.)</p> <p>are completed upon hire prior to assignment to patients. The HR Director will be in-serviced by the DON or Administrator on the need for accurate completion of all hiring documents prior to assignment. Staff who remain non compliant will be suspended or terminated.</p>	10/12/17 to ongoing
H 151	<p>3907.2(g) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(g) Documentation of reference checks;</p>	H 151	<p>3907.2 (g) Personnel Files</p> <p>The reference checks were completed and each was placed in the respective personnel file of RN #2 and RN #5. All clinical staff will be in-serviced by the DON on the need to ensure that</p>	10/12/17 to ongoing

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H 151	<p>Continued From page 2</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to maintain accurate personnel records, which included documentation of reference checks for two (2) of fifteen (15) personnel included in the sample (RN #2 and RN #5).</p> <p>The findings include:</p> <p>On September 27, 2017 at 11:43 a.m., review of the personnel records for RN #2 and RN #5 showed that they were contracted on May 4, 2017 and May 1, 2017, respectively. Further review of the personnel records showed no documented evidence that reference checks had been conducted.</p> <p>At 1:30 p.m., the HCA's office manager reviewed the aforementioned personnel records and verified that the agency failed to provide documented evidence of reference checks for RN #2 and RN #5 since their contract initiation in May 2017.</p>	H 151	<p>3907.2 (g) Personnel Files (cont'd)</p> <p>all hiring documents are completed upon hiring and that staff will not be assigned to patients until all hiring documents are completed. To ensure that no other staff are affected by this deficient practice, all personnel files will be reviewed by the HR Director and corrections will be requested, where necessary. Staff who fail to comply with the corrective action will be suspended or terminated until the corrected action is completed. The HR Director will review personnel files on a monthly basis and report to the DON those individuals who are not in compliance with the stated statutes. DON will then consult with the involved staff and may suspend or terminate the staff where necessary.</p>	10/12/17 to ongoing
H 154	<p>3907.2(j) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(j) Documentation of all personnel actions;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to maintain accurate personnel records, which included documentation of personnel</p>	H 154	<p>3907.2 (j) Personnel</p> <p>The professional and HHA staff will be in serviced by the DON regarding Abuse, Neglect, timely reporting and documentation thereof. All HHA's will be also in-serviced on the need to call the office immediately and notify the DON of all incidents. The Office Manager will be in-serviced by the DON to ensure that all documents are filed timely and in the correct personnel files. To ensure that other staff are</p>	10/12/17 to ongoing

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H 154	<p>Continued From page 3</p> <p>actions for one (1) of fifteen (15) employees included in the sample (HHA #15).</p> <p>The findings include:</p> <p>On September 27, 2017 at 2:32 p.m., review of the HCA's complaint log showed a complaint was received from a doctor's office within a local hospital on June 20, 2017. Further review of the complaint revealed that HHA #15 was accused of an allegation of abuse. The complaint indicated that the HHA was observed being "verbally overtoned, raising her voice and pushing and pulling on the patient."</p> <p>On September 27, 2017 at 2:34 p.m., interview with the HCA's Administrator revealed that an internal investigation was conducted by the HCA, which resulted in HHA #15 being reported to APS and employment being terminated. Further interview with the Administrator indicated that, per the HCA's personnel management protocol, a disciplinary note was to be added to the HHA's personnel record to reflect her termination following the HCA's internal investigation of the abuse allegation.</p> <p>On September 28, 2017, review of HHA #15's personnel record showed no documented evidence of any disciplinary action or employment termination resulting from the allegation. During an interview on the same day at 3:30pm, the DON stated that the HHA had a face-to-face interview in the HCA's office on June 20, 2017, however the written documentation of the meeting was misplaced. It should be noted that at the time of the survey, the DON provided a note entitled "Interdisciplinary Narrative Note" dated June 2, 2017, which documented his disciplinary meeting with HHA #15. The DON was questioned</p>	H 154	<p>3907.2 (j) Personnel (cont'd.)</p> <p>not affected by this deficient practice, the DON will review the Incident Report Log weekly and take corrective action, were necessary. All incident reports and HHA timesheets will be reviewed weekly by the DON for completeness of the incident investigation and the HHA's timesheet.</p> <p>The documentation of the HHA's personnel action will be completed and placed in the HHA's personnel file immediately by the DON. Staff who remain noncompliant will be suspended or terminated.</p>	10/12/17 to ongoing
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H 154 Continued From page 4
regarding the note and verified that the note was rewritten from recall on September 27, 2017 as a replacement for the missing document.

At the time of the survey, the HCA failed to ensure HHA #15's personnel record was maintained to include written documentation of her termination and referral to APS on June 20, 2017.

H 154

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 patient's physical condition, behavior, or appearance;

This Statute is not met as evidenced by:
Based on record review and interview, the agency failed to ensure PCAs observed, recorded and reported the patient's physical condition, behavior or appearance for eight (8) of eight (8) active patients in the sample. (Patients #1, 2, 3, 4, 5, 6, 7, and 8)

The findings include:

On September 27, 2017 at 10:00 a.m. through September 29, 2017 at 4:00 p.m., review of clinical records for Patients #1, 2, 3, 4, 5, 6, 7 and 8 revealed HHA timesheets indicating that the patients were receiving PCA services. There was no documented evidence in the clinical records that the assigned HHAs had observed, recorded and reported the patient's physical condition,

H 399

3915.10 (f) Home Health and Personal Care Aide Services

All PCA's will be in-serviced by the DON on the need to ensure that the information is completed on the timesheet on a daily basis as worked. The DON will review the timesheets weekly prior to submission for filing in the clinical record. All incomplete notes will be immediately returned to the HHA for completion. The corrected and completed note must be resubmitted within 1-3 business days and will again be reviewed by the DON prior to submission for filing in the patient's clinical record. Staff who are noncompliant will be suspended or terminated.

12/01/17 to ongoing

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H 399	Continued From page 5 behavior or appearance during assigned shifts. On September 29, 2017 at 3:00 p.m., interview with the DON and Administrator confirmed the surveyor findings. Additionally, the Administrator stated that the HHA timesheets will be revised to allow the HHAs to observe and document the physical condition, behavior or appearance of all patients to whom they are assigned.	H 399		
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 record review and interview, the HCA failed to ensure patients' needs were met in accordance with the POC for two (2) of eight (8) active patients in the sample (Patients #2 and #5). The findings include: 1. On September 27, 2017 at 11:00 a.m., review of Patient #2's POC revealed a SOC date of February 16, 2017, and a certification period from February 16, 2017 through January 16, 2018. The POC indicated Patient #2 had a diagnosis of major depressive disorder and diabetes. According to the POC, the SN was to conduct monthly visits to teach client and caregiver on blood glucose monitoring, medication dosage, route and side effects. Additionally, the POC indicated that the HHA was to provide five (5)	H 453	3917.2 (c) Skilled Nursing Services A verbal order was sent to the physician of Patient #2 indicating that the patient was refusing services for 5 hours per day and requested to reduce the hours to 4 hours per day X 7 days per week. The missed visit notes were placed in the clinical record. The transfer documentation for Patient #5 was completed and placed in the clinical record. The transfer/discharge order of patient #5 was sent to the physician for signature. The DON will review the submission of timesheets and clinical notes weekly to ensure that the deficient practice does not recur. The DON will in-service the professional and HHA/PCA staff on the need for compliance with these statutes. Staff who remain noncompliant will be suspended or terminated.	10/12/17 to ongoing

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H 453	<p>Continued From page 6</p> <p>hours a day, seven (7) days a week for personal care, assist with transfers, ambulation, and meal preparation.</p> <p>Review of monthly nursing notes from April 1, 2017 through September 27, 2017 failed to include any documented evidence that the SN visited the patient in May 2017. Further review of the clinical record showed that the HHA visited the patient for four (4) hours a day on the following dates:</p> <ul style="list-style-type: none"> a. July 2 through July 7, 2017 b. July 10 through July 14, 2017 c. July 24 through July 28, 2017 d. August 7 through August 11, 2017. <p>On September 29, 2017 at 3:05 p.m., interview with the DON confirmed the surveyor findings. The DON stated that the patient had been refusing the prescribed 5 hours of service and wanted only 4 hours. The DON further stated that a verbal order would be obtained from the physician reducing the hours of PCA service from five to four hours.</p> <p>2. On September 28, 2017 at 11:10 a.m., review of Patient #5's POC revealed a SOC date of March 10, 2017, and a certification period from March 10, 2017 through February 10, 2018. The POC indicated Patient #5 had a diagnosis of "muscle weakness (generalized), and diabetes". According to the POC, the HHA was to provide services eight (8) hours a day, seven days a week for personal care, assist with transfers and ambulation and meal preparation.</p> <p>Review of HHA timesheets revealed that the HHA did not visit the patient on the following days:</p> <ul style="list-style-type: none"> a. May 14 through May 29, 2017 b. June 1 through June 10, 2017 	H 453		
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H 453	Continued From page 7 c. June 12 through June 16, 2017 On September 29, 2017 at 3:10 p.m., interview with the DON and Administrator confirmed the surveyor findings. The Administrator stated that the patient had been refusing the services and was later transferred to another agency on September 5, 2017. There was no documented evidence in the clinical record that Patient #5 was refusing the services.	H 453		
H 456	3917.2(f) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (f) Supervision of services delivered by home health and personal care aides and household support staff, as appropriate; This Statute is not met as evidenced by: Based on record review and interview, the RN failed to document the supervision of services being delivered by each patient's personal care aide (PCA) or home health aide (HHA), for three (3) of the eight (8) sampled active patients (Patients #1, #2, and #5). The findings include: 1. On September 27, 2017 at 10:00 a.m., review of Patient #1's clinical record showed a POC with a certification period of May 16, 2017 through April 16, 2018. This POC contained a physician's order for monthly skilled nursing visits for HHA supervision and health assessment. Further review of Patient #1's clinical record	H 456	3917.2 (f) Skilled Nursing Services The missed visit notes for the RN & HHA for patients #1, #2 and #5 were completed and placed in the clinical records by the DON. To ensure that this deficient practice does not recur the DON will review all clinical records monthly. The DON will in-service the clinical staff and the HHA to enforce upon them the need to comply with these statutes. Staff who remain noncompliant will be suspended or terminated.	10/12/17 to ongoing

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H 456	<p>Continued From page 8</p> <p>showed the SN did not visit the patient in July 2017, and there was no documentation of supervision of care provided by the HHA.</p> <p>2. On September 27, 2017 at 11:00 a.m., review of Patient #2's clinical record showed a POC with a certification period of February 16, 2017 through January 16, 2018. This POC contained a physician order for monthly skilled nursing visits for HHA supervision and health assessment.</p> <p>Further review of Patient #2's clinical record showed the SN did not visit the patient in August 2017, and there was no documentation of supervision of care provided by the HHA.</p> <p>3. On September 28, 2017 at 11:10 a.m., review of Patient #5's clinical record showed a POC with a certification period of March 10, 2017 through February 10, 2018. This POC contained a physician's order for monthly skilled nursing visits for HHA supervision and health assessment.</p> <p>Further review of Patient #5's clinical record showed the SN did not visit the patient in August 2017, and there was no documentation of supervision of care provided by the HHA.</p> <p>On September 29, 2017 at 3:30 p.m., interview with the DON and Administrator confirmed the surveyor findings. Additionally, the Administrator stated that an in-service will be conducted with the skilled nurses to inform them of the importance of supervision of the HHAs.</p>	H 456		
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