

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HCA-0027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  R 03/15/2013
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NAME OF PROVIDER OR SUPPLIER  PREMIER HEALTH SERVICES, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 7600 GEORGIA AVENUE, NW, SUITE 323 WASHINGTON, DC 20012
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H 000 INITIAL COMMENTS

H 000

On January 17, 2013, the Department of Health/Health Regulation and Licensing Administration (DOH/HRLA) received a telephone complaint that identified concerns related to staffing and patient care. An annual survey, in conjunction with a complaint investigation, was conducted from January 22, 2013, through March 15, 2013, to determine compliance with Title 22, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a random sample of fifty-nine (59) clinical records based on a census of four hundred and sixty nine (469) patients, three (3) discharge records, and twenty-nine (29) personnel files based on a census of five hundred and eighty four (584) employees. Observations and interviews were conducted in patient homes during four (4) home visits and fourteen (14) telephone calls were made to current patients.

On February 6, 2013, HRLA forwarded written notification informing the agency of the preliminary survey/investigative findings. Based on the identified egregious practices, coupled with previous survey findings, the agency demonstrated a repeated failure to comply with local licensure requirements; therefore, a determination was made to convert the agency's full license to a restricted license.

On March 15, 2013, the investigation concluded and the following findings were identified related to the complainant's allegations:

Allegation #1: Complainant has not been paid for approximately one month.

Conclusion: Referred to Wage and Labor Board

*Received 1/3/13*  
Department of Health  
Health Regulation & Licensing Administration  
Intermediate Care Facilities Division  
899 North Capitol St., N.E.  
Washington, D.C. 20002

Health Regulation & Licensing Administration

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

TITLE  
*[Signature]* Administrator

(X9) DATE  
7/3/13

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ANDB11

If continuation sheet 4 of 68

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H 000 Continued From page 1

H 000

Allegation #2: Complainant has never received a valid agency identification.  
Conclusion: Substantiated

Allegation #3: Agency's nurse had not provided any assessment of the patient (Patient #1) since admission.  
Conclusions: Partially substantiated

Allegation #4: Premier never informed or reviewed the patient's (Patient #1) home health aide plan of care with the complainant (home health aide #1).  
Conclusions: Substantiated

Allegation #5: Patient requires wound care treatment. Complainant admits she has been providing wound care treatment to patient.  
Conclusions: Not substantiated

Allegation #6: The home health aide had difficulty contacting the agency via telephone.  
Conclusions: Substantiated

Based on the aforementioned continued egregious practices, it has been determined that the agency remains out of compliance with standards outlined in the Home Care Agency Regulation (Title 22, Chapter 39).

SEE ADDENDUM A

H 054 3903.2(c)(2) GOVERNING BODY

H 054

The governing body shall do the following:  
(c) Review and evaluate, on an annual basis, all policies governing the operation of the agency to

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H 054	Continued From page 2	H 054	H054
	<p>determine the extent to which services promote patient care that is appropriate, adequate, effective and efficient. This review and evaluation must include the following:</p> <p>(2) The evaluation shall include a review of all complaints made or referred to the agency, including the nature of each complaint and the agency's response thereto.</p> <p>This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to include fifty-five of fifty-eight complaints/incidents made or referred to the agency, including the nature of each complaint and the agency's response thereto in its annual evaluation. (Complaints/Incidents 55 of 58)</p> <p>The finding includes:</p> <p>On March 1, 2013, at approximately 2:00 p.m., the home care agency's administrator was asked to make available quarterly reports; however, only two reports were available for 2012. A record review of the agency quarterly review dated May 17, 2012, revealed a graph chart for incidents/complaints for the months of February, March and April 2012. The graph evidence there were approximately fifty-eight incidents/complaints for the aforementioned months. As evidenced below, only three incidents/complaints without resolutions were documented in the report.</p> <p>Patient was found dead after being reported missing;</p> <p>Licensed Practical Nurse was terminated for</p>		<p>Agency accepts the tag with the following plan of corrections.</p> <p>The Agency will review on annual basis all complaints made or referred to the agency, including the nature of each complaint and the agency's response thereto must be evaluated.</p> <p>In the May 2012 Agency did not make a distinction between complaints and minor incidents.</p> <p>Agency will create a complaint tracker that details each complaint and follow up actions. This will be reviewed in all future quarterly board meetings.</p> <p>Agency will change its policy to mandate reviews of all complaints and then distribute the change in policy to all board members to make them aware of the need to review all complaints at board meetings.</p> <p>Agency will conduct first Board meeting on July 22nd 2013 which will cover all complaints from January 1st 2013 to June 30th 2013.</p>

July  
22

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H 054	Continued From page 3  allegedly paying to have her time sheets signed without providing services; and,  Patient was discharged to New Jersey for care near family member after a marked decline in health.	H 054	H120  Agency accepts the tag with the following plan of corrections.  Agency has decided to phase out the use of Staffing Agencies 1 of 4 has received notification of termination of Agreement Agency intends to further reduce the number of staffing agencies by the end of the year.  Agency has created new Staffing Agency agreements to comply with regulations.  Description of the services to be provided shall include but are not limited performance of or assistance in performance of routine activities of daily living , such as to bathing, toileting, skin, nail care, oral hygiene, dressing, meal preparation/feeding, bowel and bladder control; laundry, light housekeeping, hopping for items related to patient's nutritional and health needs, observation and reporting of patient/client condition, accompanying patients to appointments, assistance with ambulation, range of motion exercises.	MAY 3rd
H 120	3906.1(a) CONTRACTOR AGREEMENTS  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:  (a) A description of the services to be provided;  This Statute is not met as evidenced by: Based on record review, the agency failed to include a description of the services to be provided, for four (4) of four (4) contractor agreements. (Contracts #1, #2, #3 and #4)  The finding includes:  On March 1, 2013, at approximately 10:00 a.m., the home care agency's administrator revealed that the agency contracts with four staffing agencies to provide personal care services. Review of these contracts revealed that they failed to include a description of the personal care services to be rendered by the staffing agencies.	H 120		
H 121	3906.1(b) CONTRACTOR AGREEMENTS  If a home care agency offers a service that is provided by a third party or contractor,	H 121	The Agreements will be reviewed by the board to ensure compliance.  SEE ADDENDUM B	July 22

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H 121 Continued From page 4

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:

(b) The location where services are to be provided;

This Statute is not met as evidenced by: Based on record review, it was determined that the home care agency (HCA) failed to ensure that contracts with outside agencies to provide personal care aide services included the location where all services were to be provided in its "Contractual Agreements," for four (4) of four (4) contracts reviewed. (Contracts #1, #2, #3 and #4)

The finding includes:

[Cross-reference H298, Patient # 2]

On March 1, 2013, at approximately 10:00 a.m., review of the HCA's contractor agreements with the four (4) staffing agencies revealed that they failed to include the location of where the personal care aide services will be provided.

H 123 3906.1(d) CONTRACTOR AGREEMENTS

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:

(d) The procedure for submitting clinical and progress notes, periodic patient evaluation, scheduling of visits, and other designated reports;

H 121

H121

Agency accepts and acknowledges the citation with the following plan of corrections..

The Agency previous contracts stated that services will be provided in Washington DC. Agency has amended the contracts to include an addendum with a patient listing that shows the name and home address of each patient staffed by the Staffing Agency PCAs. This addendum will be reviewed and updated on a bi-annual basis to ensure that all names and addresses remain current.

The contracts will be reviewed by the board to ensure compliance.

H 123

H123

Agency accepts and acknowledges the citation with the following plan of corrections.

Agency has amended the Agreements to include the following:

The procedure for submitting timesheets/clinical notes/ progress notes is that the Staffing Agency's PCA shall submit timesheets to the Agency every Monday for the visits completed the previous week.

MAY 3 2013

JULY 22 2013

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H 123	Continued From page 5	H 123	The procedure for scheduling visit is that the Staffing Agency shall submit a completed application for a prospective employee. Agency shall perform all screening including but not limited to criminal background check criminal background checks, Immigration employment eligibility, past employment reference checks. Once approved for employment, Agency Scheduler will assign aide to the appropriate patient and notify HHA of time and frequency of visits HHA's will be oriented to submit all time sheets and progress notes to the Agency on the first Monday of every week. <b>SEE ADDENDUM B</b>
H 124	<p>3906.1(e) 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>(e) The procedure for payment for services and payment terms for services furnished;</p> <p>This Statute is not met as evidenced by: Based on record review, it was determined that the home care agency (HCA) failed to include the procedure for payment for services and payment terms for services furnished, for four (4) of four (4) contract agreements. (Contracts #1, #2, #3 and #4)</p>	H 124	<p>All Clinical visits will be performed by Agency's Registered Nurses. All clinical, progress notes or periodic patient evaluations will be submitted by the supervisory nurse to the Agency on at least a weekly basis. All Start of Care, Recertification or Resumption assessments must be submitted within 72 hours of completion of the visit.</p> <p>The Agreements will be reviewed by the board on a bi-annual basis to ensure compliance.</p>

MAY 30 2013

MAY 3

JULY 22nd

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H 124	Continued From page 6	H 124	H124
	<p>The findings include:</p> <p>On March 1, 2013, at approximately 10:00 a.m., review of the agency's contractor agreements revealed the HCA failed to include the procedure for payment for services and payment terms for services furnished.</p> <p><b>H 125 3906.1(f) CONTRACTOR AGREEMENTS</b></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>(f) The procedures used for managing and monitoring the work of personnel employed on a contractual basis;</p> <p>This Statute is not met as evidenced by: Based on interview, it was determined that the home care agency (HCA) failed to have a procedure for managing and monitoring the work of personnel employed on a contractual basis, for four (4) of four (4) contracted employees. (Home Health Aide #20, HHA #21, HHA #22 and HHA #26)</p> <p>The findings include:</p> <p>Review of the contractor agreements revealed that they failed to include the procedures on how the HCA would manage and monitor the work of the home health aides. (It should be noted the contract indicated the staffing agency would monitor the personal care aide performance and supervision consistent with the HCA's policies.)</p>	<p>H 124</p> <p>H 125</p>	<p>Agency accepts and acknowledges the citation with the following plan of corrections.</p> <p>Staffing Agencies shall submit invoice to Agency on a weekly basis for the services rendered by its PCA's for the previous week. Contractor shall be paid at a rate of \$13.50 per hour for services rendered. Staffing Agencies are required to pay the PCA's at a rate of \$10.50 per hour.</p> <p>Agreements will be reviewed by the board to ensure compliance.</p> <p>SEE ADDENDUM B</p>
			<p>MAY 3rd</p> <p>July 22nd</p>

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H 125	Continued From page 7	H 125	H125
	<p>as evidenced by the following:</p> <ol style="list-style-type: none"> <li>1. On February 6, 2013, at approximately 10:45 a.m., Employee #20 (HHA) was interviewed via telephone to ascertain the HHA duties and responsibilities in providing personal care services to Patient #11 and how these services were monitored. The HHA revealed that she was employed by a nurse staffing agency (NSA) that provided patient instructions and training.</li> <li>2. On February 6, 2013, at approximately 11:45 a.m., Employee #21 (HHA) was interviewed via telephone to ascertain the HHA duties and responsibilities in providing personal care services to Patient #14 and how these services were monitored. The HHA revealed that she was employed by an NSA that provided patient instructions and training.</li> <li>3. On February 6, 2013, at approximately 11:45 a.m., Employee #22 (HHA) was interviewed via telephone to ascertain the HHA duties and responsibilities in providing personal care services to Patient #15 and how these services were monitored. The HHA revealed that she was employed by an NSA that provided patient instructions and training.</li> <li>4. During a telephone interview with Employee #26 (HHA) on February 8, 2013, at approximately 2:00 p.m., he/she indicated he/she was a sub contractor from another agency (licensed staffing agency) and he/she received orientation from the licensed staffing agency. Employee #26 also indicated he/she would contact the licensed staffing agency for any concerns for Patient #24.</li> <li>5. [Cross-reference H411]</li> </ol>		<p>Agency accepts and acknowledges this citation with the following plan of corrections.</p> <p>All PCA's from Staffing Agencies will receive orientation by Agency to re-educate PCA on the duties and responsibilities of a PCA and to orient them on the Agency Policies. PCA will be trained to understand that while they are "employed by Staffing Agencies and receive their payment from Staffing Agency they provide services on behalf of Agency. All issues, incidents, complaints, concerns are to be directed to Agency and not Staffing Agency. PCAs' will be educated that they are supervised by the Agency RN.</p> <p>Supervisory RN shall visit the Patient within 72 hours of any new PCA being assigned to a patient. Supervisory RN shall visit the patient's home to teach the PCA based on the Patient's Plan of Care. In addition RN shall provide instruction to each PCA and provide clinical supervision of each PCA in the Patient's home at a minimum of one onsite visit every 62 days. RN shall perform annual performance evaluations of each PCA onsite. A copy will be placed in the Employee chart and a copy will be forwarded to the Staffing Agency.</p> <p>Agreements will be reviewed by the board basis to ensure compliance.</p> <p>SEE ADDENDUM B</p>

MAY 31st

ongoing

July 22



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H 127	Continued From page 8	H 127	H127
H 127	<p><del>3906.1(h)(1)-CONTRACTOR AGREEMENTS</del></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>(h) Assurance that the contractor will comply with:</p> <p>(1) All applicable agency policies, including the assurance that contract personnel meet the qualifications and fulfill the responsibilities of agency employees as set out in these rules;</p> <p>This Statute is not met as evidenced by: Based on record review, the home care agency (HCA) failed to include the assurance that the contractor will comply with all applicable agency policies, including the assurance that contract personnel meet the qualifications and fulfill the responsibilities of agency employees as set out in these rules, for four (4) of four (4) contractor agreements. (Contracts #1, #2, #3 and #4)</p> <p>The findings include:</p> <p>Review of the four nurse staffing agency (NSA) contracts presented by the HCA on March 1, 2013, at approximately 10:00 a.m., revealed there were no provisions in the contracts which ensured that the contractor would comply with all agency policies and qualification requirements for contracted employees. For example, contracted employees interviewed revealed that they received instructions and training from the staffing agency and all concerns are directed to the staffing agency.</p>	H 127	<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>Agency has amended contract to include the following language: Staffing Agency acknowledges receipt of Agency's policies. Staffing Agency will agree to abide by all Agency Policies.</p> <p>All applications submitted by Staffing Agency to Agency will be reviewed by Human Resources Manager to ensure that applicants meet qualifications and fulfill the responsibilities of agency employees.</p> <p>All PCA's from Staffing Agencies will receive orientation by Agency to re-educate PCA on the duties and responsibilities of a PCA and to orient them on the Agency Policies. PCA will be trained to understand that while they are "employed by Staffing Agencies and receive their payment from Staffing Agency they provide services on behalf of Agency. All issues, incidents, complaints, concerns are to be directed to Agency and not Staffing Agency. PCA's will be taught that they are supervised by the Agency RN.</p> <p>Agreements will be reviewed by the board basis to ensure compliance.</p> <p>SEE ADDENDUM B</p>
			<p>MAY 3<sup>rd</sup> 2013</p> <p>MAY 31 2013</p> <p>JULY 22<sup>nd</sup></p>

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H 127	Continued From page 9	H 127	H170
	<p>[Cross-reference H125, paragraph #4]</p> <p>H 170. 3907.11 PERSONNEL</p> <p>Each home care agency shall ensure that each employee or contract worker shall present a valid agency identification prior to entering the home of a patient.</p> <p>This Statute is not met as evidenced by: Based on observation and interview, it was determined that the home care agency (HCA) staff failed to present a valid agency identification (ID) card or badge prior to entering the home of each patient for seven (7) of seven (7) employees. (Employees #1, #6, #20, #22, #23, #26, #26)</p> <p>The findings include:</p> <p>1. A visit to Patient #1's home on January 30, 2013, at approximately 6:00 p.m., revealed Employee #1 (HHA) was present and not wearing an identification badge. The HHA was interviewed and revealed that an identification badge/card was not provided by Premier (HCA). Interview with the patient revealed "a lot of aides come here without their ID and I send them away."</p> <p>During an interview with assistant administrator (AA) and Human Resources Manager (HRM) on January 31, 2013, at approximately 3:00 p.m., they both were made aware Employee #1 never had an agency ID.</p>	H 170	<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>Agency shall ensure that each employee or Staffing Agency PCA is issued a Premier Health Services identification badge. The worker shall present a valid agency ID badge prior to entering a home of a patient.</p> <p>Employee or Staffing Agency PCA's file shall have a signed document acknowledging that he/she received Premier Health Services ID badge.</p> <p>The HR Manager shall monitor this corrective action plan to ensure that deficient practice does not recur by requiring employees to present their ID badge when they pick up their paychecks.</p> <p>Staffing Agencies will be educated to require all their employees to present their ID badge prior to issuing the employee's checks.</p> <p>During supervisory visits the RN shall observe and document compliance by the PCA. Any non compliant shall be immediately reported to the office.</p> <p>The Quality Assurance Departments shall randomly/routinely visit the patient's home to check and ensure that the employees are in uniform and also wearing an ID badge.</p>

MAY 31

Ongoing

Ongoing

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H 170	Continued From page 10	H 170	
	<p>2. On February 4, 2013, at approximately 10:45 a.m., Employee #6 (HHA) was observed in Patient #1's home without an agency ID. When asked, Employee #6 stated that he/she had been working with Patient #7 since September 26, 2012 and had never been issued an ID.</p> <p>3. During a telephone interview with Patient #11 on February 6, 2013, at approximately 10:30 a.m., it was revealed Employee #20 (HHA) had been his/her HHA for over a year. The HHA provided personal care services Monday through Friday from 8:30 a.m. until 5:00 p.m.</p> <p>During an interview with Employee #20 (HHA) on February 6, 2013, at approximately 10:45 a.m., it was also revealed that the HHA did not have any identification (ID) that verified her as a HHA for Premier. It was stated however, that the nurse staff agency (NSA) where he/she was employed, provided him/her with an ID and with patient instructions when needed.</p> <p>4. During a telephone interview with Patient #16 on February 6, 2013, at approximately 11:45 a.m., it was revealed Employee #22 (HHA) had been working with the patient for approximately 3 years.</p> <p>During an interview with Employee #22 (HHA) on February 6, 2013, at approximately 12:00 p.m., the HHA indicated they worked for another agency (licensed staffing agency) and did not have an ID from Premier.</p> <p>5. During a telephone interview with Employee #23 (HHA) on February 6, 2013, at approximately 12:30 p.m., it was revealed that the HHA had been providing personal care services to Patient #17 for seven (7) months. It was also revealed in</p>		

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H 170	Continued From page 11	H 170	
	<p>the interview that the HHA did not have any identification to verify that he/she was an employee of Premier.</p> <p>6. During a telephone interview with Patient #21 on February 6, 2013 at approximately 2:20 p.m., it was revealed that Employee #28 ( HHA) was newly assigned and provided personal care services two days ago on February 4, 2013. When questioned if the HHA presented any identification, the patient said, No."</p> <p>7. During a telephone interview with Employee #26 (HHA) on February 8, 2013, at approximately 2:00 p.m., it was revealed that the HHA provided personal care services to patient #24. When asked if the HHA had identification verifying employment with the complaint stated, "No."</p> <p>During a telephone interview with Patient #24 on February 8, 2013, at approximately 2:00 p.m., the patient revealed that services from the home care agency had been provided since September 2012. According to Patient #24, Employee #26 (HHA) has been providing personal care services since that time. Continued interview with at approximately 2:00 p.m., Employee # 26 (HHA) was interviewed and revealed that he/she was a sub contractor from a nurse staffing agency and he/she was not provided an identification badge or card from the home care agency.</p>		
H 260	3911.1 CLINICAL RECORDS	H 260	
	Each home care agency shall establish and maintain a complete, accurate, and permanent clinical record of the services provided to each patient in accordance with this section and accepted professional standards and practices.		

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H 260	Continued From page 12	H 260	H260
	<p>This ELEMENT is not met as evidenced by: Based on record reviews and interviews, it was determined that the agency failed to maintain accurate clinical records for four (4) of fifty-nine (59) patients. (Patient #3, #4, #9 and #59)</p> <p>The findings include:</p> <ol style="list-style-type: none"> <li>On January 28, 2013, at approximately 1:10 p.m., a review of Patient #3's record revealed a plan of care (POC) with a certification period from June 25, 2012 through December 24, 2012. The aforementioned POC, approved and signed by the physician on July 9, 2012, ordered home health aide (HHA) services ten (10) hours a days, seven (7) days a week. The POC also ordered skilled nursing services every thirty (30) days for HHA supervision and patient assessment and evaluation of systems.</li> </ol> <p>Review of HHA time sheets, dated November 12, 2012 through December 2, 2012, revealed personal care services were allegedly provided by Employee #2 (HHA).</p> <p>Further review of the time sheets revealed that the agency's registered nurse (RN) documented on the "62 Day Skilled Care Summary" that the patient's vital signs were assessed on November 10, 2012. The RN recorded values as temperature 98.4, pulse 76, respiration 16, and blood pressure 128/79, and mental status was "alert".</p> <p>During an interview with the agency's administrator on January 28, 2013, at 3:27 p.m., she indicated that the HHA was also Patient #3's power of attorney. The HHA provided personal care services from November 12 through</p>		<ol style="list-style-type: none"> <li>Agency will conduct a detailed investigation on this incident and report finding by May 9th 2013.</li> <li>Agency will conduct a detailed investigation on this incident and report finding by April 19th, 2013.</li> </ol> <p>All staff will receive in-service/ re-training on Ethics and consequences of falsifying information. All employees who do not comply with ethic policy will be subject to disciplinary action up and including termination. All staff will receive retraining on company policies</p> <ol style="list-style-type: none"> <li>On a monthly basis Agency reviews DC Medicaid web portal for any changes in patients address or Medicaid codes. If there are any changes, office staff make the appropriate changes in the computer system. A review of patient 9's demographics on the Web Portal reveal that the Web portal has the same address as the Agency. A further investigation revealed that the patient moved to a new address, the patient's supervisory nurse and PCA were aware of the change but did not report it to the office. The new address has been changed in the Agency computer system.</li> </ol> <p>SEE ADDENDUM C</p>
			<p>MAY 9 2013</p> <p>MAY 8 2013</p> <p>APRIL 5th 2013</p>

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H 260	<p>Continued From page 13</p> <p>December 2, 2012. The administrator also indicated the skilled nurse visited the patient on November 10, 2012 and conducted assessments and evaluations.</p> <p>It should be noted, however, a review of the Department of Health's records revealed Patient #3 resided at an assisted living residence (ALR) owned and operated by HHA #2. The records further revealed that the patient was involuntarily discharged from the ALR on November 2, 2012 and relocated to another ALR. Since the discharge (November 2, 2012) the patient had not been receiving HHA and/or nursing services from Premier.</p> <p>2. On January 31, 2013, at approximately 10:21 a.m., a review of Patient #4's record revealed a plan of care (POC) with a certification period from July 26, 2012 through January 21, 2013. The aforementioned POC, approved and signed by the physician on July 9, 2012, ordered personal care aide service (PCA) ten (10) hours a day, seven (7) days a week. The POC also ordered skilled nursing services every thirty (30) days for PCA supervision and nursing assessment and evaluation of systems.</p> <p>Review of Employee #2's (HHA) time sheets, dated November 3, 2012 through November 11, 2012, revealed personal care services were allegedly provided by the HHA.</p> <p>During an interview with the staffing coordinator on January 31, 2013, at approximately 11:27 a.m., it was revealed that personal care services were provided to Patient #4 by the HAH from November 3 through November 12, 2012, and the HAH was the power of attorney for Patient #4.</p>	H 260	<p>All staff will be re-trained on the importance of notifying office of any changes in the patient's demographic information. All supervisory RNs will be expected to review the Plan of Care to ensure that all client information is accurate and to make changes when applicable.</p> <p>4. Moving forward Agency shall conduct a more in depth investigation to all complaints and incidents to include; supporting documents, interviews with both employees and patients, and if warranted, refer to a certified investigator. Human Resources Manager will be responsible to monitor process. Administrator will review on a quarterly basis all incidents to ensure procedure is being followed.</p> <p>All PCAs shall receive in-service training on observing, recording and reporting patient behavior and appearance. All staff will receive In-service/ re-training on Ethics and consequences of falsifying information. All employees who do not comply will be subject to disciplinary action up and including termination. All staff will receive retraining on company policies</p>

MAY 31st

MAY 21st 2013

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H 260	Continued From page 14	H 260		
	<p>It should be noted, however, a review of the Department of Health's records revealed Patient #4 resided at an assisted living residence (ALOR) owned and operated by the HAH. The records further revealed that the patient was involuntarily discharged from the ALOR on November 2, 2012 and relocated to another ALOR. Since the discharge (November 2, 2012) the patient had not been receiving HAH services from Premier.</p> <p>3. During an interview with the director of nursing (DON) on January 31, 2013, at approximately 10:00 a.m., the DON was instructed to set up home visits by giving the surveyor current addresses and phone numbers of three (3) patients. In response to surveyor's request, the DON provided the surveyor with Patient #9's PC that included the patient's name, address and telephone number. The PC also indicated that personal care services were to be provided from January 29, 2013 through July 27, 2013.</p> <p>On February 4, 2013, at approximately 12:00 p.m., the surveyor attempted to visit Patient #9 at the address listed on the aforementioned PC. The surveyor knocked on the door for approximately 10 minutes when another resident in the building opened his door and told the surveyor no one lived in the apartment. He stated "they moved along time ago". It should be noted while on site the surveyor called the number and was informed the phone number did not belong to Patient #9.</p> <p>During a telephone interview with the assistant administrator (AA) on February 5, 2013, at approximately 11:00 a.m. The AA was asked to provide a current address and telephone number for Patient #9, however the same information was</p>			

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H 260	Continued From page 15  listed-on-the-POC-that-was-provided.	H 260		
	<p>4. On March 12, 2013, at approximately 10:30 a.m., review of the home care agency's (HCAs) quarterly report dated May 17, 2012, revealed an incident involving the death of Patient #59. The HCA provided the surveyor with a copy of the incident report filed by Patient #59's HHA. The HHA described the incident as follows:</p> <p>When the HHA came to work for Patient #59 at 8:00 a.m., the patient was not present at his/her apartment. The HHA looked for the patient until 2:00 p.m., then the HHA called the police to file a missing person report. The report indicated that the HHA searched everywhere and reported the situation to the security officer on duty. On February 21, 2012, after the HHA was informed that the police found the patient dead in Rock Creek Park, the HHA returned the patient's food stamp card, identification card and house keys to the patient's community social worker.</p> <p>During a telephone interview with Employee #29 on March 15, 2013, at approximately 1:55 p.m., the employee recounted the events that occurred on February 21, 2012. According to the employee, the HHA reported that she arrived to the patient's apartment at 9:00 a.m., and the door was locked. When no one answered the door, the HHA reported to the security guard.</p> <p>Continued discussion with Employee #29 revealed, "I can't remember if I called the agency on the day the patient was missing." As the interview progressed, Employee #29 recalled that he/she did not call the home care agency to report Patient #59 was missing, instead the he/she reported, "I just left at 9:15 a.m."</p> <p>Continued discussion with Employee #29</p>			



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H 260	Continued From page 16	H 260		
	<p>revealed that he/she did however, call the staffing agency for whom he/she worked on February 18, 2012, after being contacted by the police. The discussion with the HHA revealed that his/her recounting of the incident was not consistent with the incident report (dated February 21, 2012).</p> <p>On March 12, 2013, at approximately 10:30 a.m., review of Patient #59's record revealed an incident report dated February 21, 2012. According to the report, Employee #29 (HHA) documented, "on 02/17/13 when I came to work for [Patient #59] at 8 a.m., my client was not present at [his/her] apartment. I stayed there looking until 2 p.m. then I called the police and filed a missing person report. I have been looking for [him/her] everywhere... I reported the situation to the building security officer on duty."</p> <p>During a telephone interview with Employee #29 on March 15, 2013, at approximately 1:55 p.m., he/she stated, "I can't remember if I called the agency on the day the patient was missing." Further discussion was held with Employee #29 to ascertain information regarding the employee's actions during the aforementioned incident. Employee #29 revealed that he/she did not call the agency to report Patient #59 was missing, instead the employee reported, "I just left at 9:15 a.m." Continued discussion with Employee #29 revealed that he/she did however, call the staffing agency for whom he/she worked on February 18, 2013, after being contacted by the police. According to Employee #29, the police informed him/her that Patient #59 was found dead in Rock Creek Park.</p>	H 298		
H 298	3912.2(c)(6) PATIENT RIGHTS & RESPONSIBILITIES	H 298		

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H 298	Continued From page 17	H 298	H298	
	<p>Each home care agency shall develop policies to ensure that each patient who receives home care services has the following rights:</p> <p>(c) To be informed orally and in writing of the following:</p> <p>(6) The name, business address, and telephone number of the agency supervising the patient's care; and...</p> <p>This Statute is not met as evidenced by: Based on observation, interview and record review, it was determined that the agency failed to ensure each patient was informed of the supervising agency's business address and telephone number, for 2 of 59 patients in the sample (Patients #7 and #25)</p> <p>The findings include:</p> <p>1. On February 4, 2013, at approximately 10:00 a.m., an onsite visit was conducted at Patient #7's home to ascertain information regarding the services provided by the agency. While in the home, another home care agency's admission folder was observed. Interview with the patient revealed that Premier was the only home care agency (HCA) providing services to the patient since 2009. Continued discussion with the patient was conducted to determine if the patient had been informed of the agency's contact information. According to Patient #7, that information had not been provided. There was no evidence that Premier provided Patient #7 with an admission packet that included contact information.</p> <p>The surveyor attempted to contact the HCA via</p>		<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>Upon admission Agency creates admission folder containing the name, business address and telephone number of the Agency and places it in the home. However over time the folder may be misplaced/lost in the patient's home.</p> <p>During all May 2013 Supervisory visit, All RNs shall assess each patients home to locate the admission packet. If the RN cannot locate the admission packet the nurse shall inform the office and an admission packet shall be provided to the patient. RNs will also educate patient that the Agency supervising his/her care is Premier Health Services.</p> <p>To ensure compliance every subsequent supervisory visit the RN must document the presence of the Admission folder. If it is not located the office will issue another one within three business days. RN will also continually re-enforce with the patient that Premier Health Services is supervising care.</p> <p>SEE ADDENDUM D</p>	<p>JUNE 30th 2013</p> <p>origins</p>

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H 298	Continued From page 18	H 298		
	<p>telephone, however, the agency's voicemail indicated that the agency was closed. The patient then provided the surveyor with another number that the patient "always" used to contact the agency. The surveyor called the number and a male answered but refused to identify himself. He instructed the surveyor to continue to call the original telephone number. The surveyor later learned that the number used by the patient was a staffing agency (Staffing Agency #1).</p> <p>During a telephone interview with Premier's assistant administrator (AA) on February 4, 2013, at approximately 10:15 a.m., the AA was made aware of the finding. The AA stated that the HCA's nurse, who was expected to visit the patient that day, would bring an admission package to the patient's home.</p> <p>2. On February 8, 2013, at approximately 2:30 p.m. Patient #25 was interviewed via telephone to ascertain her satisfaction with the quality of care given by Premier. The patient revealed that home care services were not rendered by Premier. The patient revealed that services were being provided by a licensed staffing agency since 2010. The patient reported that if there were any concerns, he/she would notify the staffing agency. The patient also indicated that Premier's contact information was not provided.</p>			
H 363	<p>3914.3(l) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(l) Identification of employees in charge of managing emergency situations;</p> <p>This Statute is not met as evidenced by:</p>	H 363		

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H 363	Continued From page 19	H 363	H363
	<p>Based on record review and interview, the home care agency (HCA) failed to ensure the plan of care (POC) included identification of employees in charge of managing emergency situations for forty-six (46) of fifty-nine (59) patients in the sample. (Patients #1, #3, #4, #6, #7, #8, #9, #10, #11, #12, #13, #14, #21, #27, #28, #29, #30, #31, #32, #33, #34, #35, #36, #37, #38, #39, #40, #41, #42, #43, #44, #45, #46, #47, #48, #49, #50, #51, #52, #53, #54, #55, #56, #57, #58 and #59)</p> <p>The findings include:</p> <p>The agency failed to ensure that plans of care for 46 of 59 patients identified employees who were in charge of managing emergency situations as evidenced below:</p> <ol style="list-style-type: none"> <li>1. Patient #1's POC with certification period of July 18, 2012 through January 13, 2012, failed to include identification of employees in charge of managing emergency situation.</li> <li>2. Patient #3's POC with certification period of June 25, 2012 through December 24, 2012, failed to include identification of employees in charge of managing emergency situation.</li> <li>3. Patient #6's POC with certification period of August 24, 2012 through February 19, 2013 failed to include identification of employees in charge of managing emergency situation.</li> <li>4. On January 28, 2013, at approximately 1:10 p.m., review of Patient #3's POC with certification period of June 25, 2012 through December 24, 2012, failed to include identification of employees in charge of managing emergency situations.</li> </ol>		<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>An addendum shall be attached to all existing plans of care stating that the following:</p> <p>The individual in charge of managing emergency situation is the supervisory nurse or clinical manager. Supervisory nurse or clinical manager can be contacted at (202) 723 3060. In life threatening emergency all staff call 911 then call supervisory nurse or clinical manager in the absence of staff, patient/patient care giver call 911 then notify supervisory nurse or clinical manager at (202) 723 3060.</p> <p>All future plan of cares shall include the above language.</p> <p>The Clinical Manager shall inspect all future Plan of Cares to ensure compliance prior to being sent for the Physician signature, by running the "unverified 485" Report on a weekly basis. Quality Assurance Department shall verify compliance by reviewing at least 25% of all Plan of Cares on a quarterly basis.</p>
			<p>APRIL 31 2013</p> <p>ongoing</p>

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H 363	Continued From page 20	H 363	
	<p>5. On January 31, 2013, at approximately 10:21 a.m., review of Patient #4's POC with certification period of July 26, 2012 through January 21, 2013, failed to include identification of employees in charge of managing emergency situations.</p> <p>6. On January 31, 2013, at approximately 12:00 p.m., review of Patient #7's POC with certification period of September 11, 2012 through March 9, 2013, failed to include identification of employees in charge of managing emergency situations.</p> <p>7. On January 31, 2013, at approximately 12:00 p.m., review of Patient #8's POC with certification period of September 11, 2012 through March 9, 2013, not approved or signed by the physician failed to include identification of employees in charge of managing emergency situations.</p> <p>8. On February 1, 2013, at approximately 10:00 a.m., review of Patient #9's POC with certification period of January 1, 2013 through July 27, 2013, approved and signed by physician on August 22, 2012 failed to include identification of employees in charge of managing emergency situations.</p> <p>9. On February 1, 2013, at approximately 12:30 p.m., review of Patient #10's POC with certification period of October 17, 2012 through April 14, 2013, approved and signed by the physician on October 31, 2012 failed to include identification of employees in charge of managing emergency situations.</p> <p>10. On February 1, 2013, at approximately 1:15 p.m., review of Patient #11's POC with certification period of October 15, 2012 through December 13, 2012,</p>		

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NAME OF PROVIDER OR SUPPLIER  <b>PREMIER HEALTH SERVICES, INC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>7600 GEORGIA AVENUE, NW, SUITE 323 WASHINGTON, DC 20012</b>		
(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 363	Continued From page 21	H 363		
	<p>approved and signed by the physician on October 26, 2012 failed to include identification of employees in charge of managing emergency situations.</p> <p>During an interview with the Assistant Administrator on February 1, 2013 at approximately 2:00 p.m., he acknowledged the finding.</p> <p>11. On February 1, 2013, at approximately 1:00 p.m., review of Patient #12's POC with certification period of November 28, 2012 through May 26, 2013, approved and signed by the physician on December 7, 2012 failed to include identification of employees in charge of managing emergency situations.</p> <p>12. On February 1, 2013, at approximately 1:30 p.m., review of Patient #13's POC with certification period of November 15, 2012 through May 13, 2013, approved and signed by the physician on December 12, 2012 failed to include identification of employees in charge of managing emergency situations.</p> <p>13. On February 1, 2013, at approximately 1:30 p.m., review of Patient #14's POC with certification period of November 28, 2012 through May 26, 2013, not signed by the physician failed to include identification of employees in charge of managing emergency situations.</p> <p>14. Continued review of patient records between February 4-7, 2013, from 11:00 a.m. to 5:00 p.m., revealed the following information:</p>			

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H 363	Continued From page 22	H 363		
	<p>a. Patient # 6's POC with a certification period from August 24, 2012, to February 19, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>b. Patient # 21's POC with a certification period from July 12, 2012, to January 7, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>c. Patient # 27's POC with a certification period from September 4, 2012, to March 2, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>d. Patient # 28's POC with a certification period from October 9, 2012, to April 6, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>e. Patient # 29's POC with a certification period from October 8, 2012, to April 5, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>f. Patient # 30's POC with a certification period from October 2, 2012 to April 2, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>g. Patient # 31's POC with a certification period from September 19, 2012 to March 17, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>h. Patient # 32's POC with a certification period from August 24, 2012, to February 19, 2013;</p> <p>i. Patient # 33's POC with a certification period from July 30, 2012, to January 25, 2013, failed to</p>			

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H 363	Continued From page 23	H 363		
	<p>Identify the employee responsible for managing emergency situations;</p> <p>j. Patient # 34's POC with a certification period from August 22, 2012, to February 17, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>k. Patient # 35's POC with a certification period from August 10, 2012, to February 5, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>l. Patient # 36's POC with a certification period from August 20, 2012, to February 15, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>m. Patient # 37's POC with a certification period from August 1, 2012, to January 27, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>n. Patient # 38's POC with a certification period from August 11, 2012, to February 6, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>o. Patient # 39's POC with a certification period from dated August 6, 2012, to February 1, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>p. Patient # 40's POC with a certification period from September 21, 2012, to March 19, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>q. Patient # 41's POC with a certification period from December 16, 2012, to June 13, 2013, failed</p>			



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H 363	Continued From page 24	H 363		
	<p>to identify the employee responsible for managing emergency situations;</p> <p>r. Patient # 42's POC with a certification period from August 2, 2012, to February 2, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>s. Patient # 43's POC with a certification period from October 9, 2012, to April 6, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>t. Patient # 44's POC with a certification period from November 24, 2012, to May 22, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>u. Patient # 45's POC with a certification period from October 11, 2012, to April 8, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>v. Patient # 46's POC with a certification period from September 23, 2012, to March 21, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>w. Patient # 47's POC with a certification period from September 4, 2012, to March 2, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>x. Patient # 48's POC with a certification period from August 2, 2012, to January 28, 2013, failed to identify the employee responsible for managing emergency situations;</p> <p>y. Patient # 49's POC with a certification period from December 2, 2012, to May 30, 2013, failed</p>			

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to identify the employee responsible for managing emergency situations;

z. Patient # 50's POC with a certification period from August 6, 2012, to February 1, 2013, failed to identify the employee responsible for managing emergency situations;

aa. Patient # 51's POC with a certification period from November 2, 2012, to April 30, 2013, failed to identify the employee responsible for managing emergency situations;

bb. Patient # 52's POC with a certification period from September 2, 2012, to March 2, 2013, failed to identify the employee responsible for managing emergency situations;

cc. Patient # 53's POC with a certification period from September 18, 2012, to March 16, 2013, failed to identify the employee responsible for managing emergency situations;

dd. Patient # 54's POC with a certification period from September 12, 2012, to March 10, 2013, failed to identify the employee responsible for managing emergency situations;

ee. Patient # 55's POC with a certification period from August 6, 2012, to February 1, 2013, failed to identify the employee responsible for managing emergency situations;

ff. Patient # 56's POC with a certification period from November 3, 2012, to May 1, 2013, failed to identify the employee responsible for managing emergency situations;

gg. Patient # 57's POC with a certification period from August 3, 2012, to February 3, 2013, failed

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H 363	<p>Continued From page 26</p> <p><del>to identify the employee responsible for managing emergency situations; and</del></p> <p>hh. Patient # 58's POC with a certification period from September 20, 2012, to March 18, 2013, failed to identify the employee responsible for managing emergency situations.</p> <p>NOTE: This is a repeat deficiency.</p> <p>Review of an investigation concluded on July 25, 2012, revealed the agency failed to enact an effective system to make certain that patients' plans of care identified specific employees responsible for managing emergencies. According to the review of the plan of correction on March 18, 2013, the agency was cited in this domain based on an event that occurred with a patient (Patient #15) that resided in a rooming house. The cited deficiency revealed that Patient #15 was observed by Employee #16, home health aide (HHA) to be in need of emergency medical services. The noted observation occurred after Employee #16 (HHA) had returned from the grocery store. Further review of the plan of correction for the cited deficiency revealed that Patient #15 was observed to be in ill health (fecal matter on the patient and patient's bed linens). Additionally, the patient reportedly complained of fainting and blacking out due to the extreme heat in his/her bedroom. As a result of Patient #15's condition, Employee #16 (HHA) had to call emergency medical services (911) and the patient was transported to the hospital (July 4, 2012). The patient never returned to the rooming house after the hospitalization in July 2012 and expired October 29, 2012.</p> <p>It should be noted that review of the Patient #15's plan of care (POC) dated January 30, 2012 to</p>	H 363	

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H 363	Continued From page 27	H 363	H364
	<p>July 30, 2012, on July 10, 2012, at approximately 1:20 p.m., revealed "in case of emergency, patient should call 911." The POC failed to include the identification of employees in charge of managing emergency situations.</p> <p>Review of the agency's plan of correction for the investigation concluded on July 25, 2012, revealed that the agency would work to correct the plan of care, making certain that employees in charge of managing emergency situations are identified. During an interview with the agency's assistant administrator on January 28, 2013, at approximately 12:10 p.m., it was acknowledged that the agency did not identify the employees who were to manage emergency situations on their past or current POC's as indicated in the aforementioned plan of correction.</p> <p>At the time of the survey/investigation, the agency failed to ensure it's devised plan to address the cited deficiency was effective.</p>		<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>An addendum shall be attached to all existing plan of care stating that the following:</p> <p>In life threatening emergency all staff call 911, then notify supervisory nurse or clinical manager at (202) 723 3060, in the absence of staff patient/care giver call 911 then notify supervisory nurse or clinical manager at (202) 723 3060.</p> <p>Non life threatening emergency all staff call supervisory nurse or clinical manager at (202) 723 3060 and then call physician. In absence of staff, patient/care giver call supervisory nurse or clinical manager then call physician.</p>
H 364	<p>3914.3(m) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(m) Emergency protocols; and...</p> <p>This Statute is not met as evidenced by: Based on record review and interview the home care agency (HCA) failed to ensure the plan of care (POC) included emergency protocols for forty-five (45) of fifty-nine (59) patients in the sample. (Patients #1, #3, #4, #6, #7, #8, #8, #10, #11, #12, #13, #14, #21, #27, #28, #29, #30, #31, #32, #33, #34, #35, #36, #37, #38, #39, #40, #41, #42, #43, #44, #45, #46, #47, #48, #49, #50, #51, #52, #53, #54, #55, #56, #57 and #58)</p>	H 364	<p>Durable Medical Equipment call the vendor as noted on the Equipment and the supervisory nurse or clinical manager at (202) 723 3060</p> <p>Disaster emergency call State Hotline (202) 671 5000 and supervisory nurse or clinical manager at (202) 723 3060</p> <p>Small Fire use fire extinguisher or baking soda then leave home and call supervisory nurse or clinical manager at (202) 723 3060.</p>

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H 364	Continued From page 28	H 364	Large fires, leave home and call 911 then supervisory nurse or clinical manager at (202) 723 3060.
H 366	<p>The finding includes:</p> <p>[Cross Reference H363] The agency failed to ensure emergency protocols included a contingency plan in the event that a patient was unable to perform the duties outlined. Review of 45 of 69 patient records from January 22, 2013 through February 7, 2013, all documented instructions for the patient to contact emergency services in the event of a life threatening situation. There was no evidence however of specific guidance for employees to follow in cases of emergencies.</p> <p>NOTE: This is a repeat deficiency.</p> <p>H 366 3914.4 PATIENT PLAN OF CARE</p> <p>Each plan of care shall be approved and signed by a physician within thirty (30) days of the start of care, provided, however, that a plan of care for personal care aide services only may be approved and signed by an advanced practice registered nurse. If a plan of care is initiated or revised by a telephone order, the telephone order shall be immediately reduced to writing, and it shall be signed by the physician within thirty (30) days.</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to ensure patients' plan of care (POC) were approved and signed by a physician within thirty (30) days of the start of care, for nineteen (19) of fifty-nine (59) patients in the sample, (Patient # 1, #4, #7, #8, #14, #27, #28, #29, #34, #40, #46, #47, #49, #51, #52, #53,</p>	H 366	<p>Agency will hold in-service to re-educate all PCAs on emergency protocol.</p> <p>All future plan of cares shall include the above language.</p> <p>The Clinical Manager shall inspect all future Plan of Cares to ensure compliance prior to being sent for the Physician signature. Quality Assurance shall ensure compliance by reviewing 25% of all Plan of Cares on a quarterly basis.</p>

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H 366	Continued From page 29 #54, #56 and #57)	H 366	H366	
	<p>The findings include:</p> <ol style="list-style-type: none"> <li>1. On January 22, 2013, at approximately 11:10 a.m., a review of Patient #1's record revealed a POC with a certification period from July 18, 2012, through January 13, 2013. The review revealed the aforementioned POC was signed on September 12, 2012, fifty-four (54) days after the start of care.</li> <li>2. On January 31, 2013, at approximately 12:00 p.m., review of Patient #7's record revealed a POC with certification period from September 11, 2012 through March 9, 2013. The review revealed the aforementioned POC was signed on December 7, 2012, ninety-two (92) days after the start of care.</li> <li>3. On January 31, 2013, at approximately 12:40 p.m., review of Patient #8's record revealed a telephone order dated September 12, 2012. The order prescribed personal care aide service to be provided six (6) hours a day 6 days a week, to assist with activities of daily living; however, the order was not approved or signed by the physician.</li> <li>4. On February 1, 2013, at approximately 2:00 p.m., a review of Patient #14's record revealed a POC with certification period November 28, 2012 through May 26, 2013. Continued review the plan of care failed to provide evidence that the physician had approved and signed the plan.</li> <li>5. Review of Patient #21, #28, #29, # 34, #39, #40, #46, #47, #49, # 51, #52, #53, #54, #56, and #57's POC on February 25, 2013 between 6:10</li> </ol>		<p>Agency accepts and acknowledges this citation with the following plan of corrections:</p> <p>Agency has changed its policy to require that RN perform the recertification 60 days ahead of the end of the current certification period to ensure timely signature.</p> <p>The Agency will assist with setting up appointment for the patients with their primary care physicians within 2 weeks of the completion of the Plan of Care if necessary. Agency's physician order processor will notify the Director of Nursing of any plan of cares that the patient's physician has failed to sign within 15 days of the beginning of the certification period. Agency shall notify patient that their physician has failed to sign the plan of care. At the end of the 30 day period if the physician has failed to sign the plan of care, Agency shall send a discharge letter to patient with the required notification period.</p> <p>Agency shall train both the office staff and field staff of this procedure to ensure understanding and compliance.</p> <p>All patients with current plan of cares that are outside of the 30 day window and have not been signed will be notified of Agency's intent to discharge.</p> <p>Administrator shall monitor the process on a bi-weekly basis by reviewing the unsigned orders report to ensure compliance.</p>	<p>MAY 3rd 2013</p>

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H 366	Continued From page 30	H 366		
	<p>p.m. and 7:16 p.m., revealed that the POCs were not approved and signed by a physician within thirty (30) days of the start of care. Home care services, however, were being implemented according to the POC as evidenced by the following:</p> <p>a. Patient # 21's POC with a certification period of July 12, 2012, to January 7, 2013 was signed by the patients's physician on September 12, 2012 (62 days from the start of care);</p> <p>b. Patient # 28's POC with a certification period of September 4, 2012 to March 2, 2013 was signed by the patients's physician on September 25, 2012 (21 days from the start of care);</p> <p>c. Patient # 29's POC with a certification period of October 8, 2012, to April 5, 2013; [failed to evidence physician approval and/or signature];</p> <p>d. Patient # 39's POC with a certification period of August 6, 2012, to February 1, 2013 was signed by the patient's physician on September 24, 2012 ( 49 days from the start of care);</p> <p>e. Patient # 40's POC with a certification period of September 21, 2012, to March 19, 2013 was signed by the patient's physician on November 1, 2012 (41 days from the start of care);</p> <p>f. Patient # 46's POC with a certification period of September 23, 2012, to March 21, 2013 was signed by the patient's physician on November 8, 2012 (46 days from the plan of care);</p> <p>g. Patient # 47's POC with a certification period of September 4, 2012, to March 2, 2013 was signed by the patient's physician on October 18, 2012 (44 days from the start of care);</p>			

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H 366	Continued From page 31	H 366		
	<p>h. Patient # 49's POC with a certification period of December 2 , 2012, to May 30, 2013 was signed by the patient's physician on January 18, 2013 (47 days from the start of care);</p> <p>i. Patient # 52's POC dated September 2, 2012, to March 2, 2013; [failed to evidence physician approval and/or signature];</p> <p>j. Patient # 53's POC with a certification period of September 18, 2012, to March 16, 2013 was signed by the patient's physician on October 26, 2012 (36 days from the plan of care);</p> <p>k. Patient # 54's POC with a certification period of September 12, 2012, to March 10, 2013 was signed by the patient's physician on October 25, 2012 (43 days from the start of care);</p> <p>l. Patient # 56's POC with a certification period of November 3, 2012, to May 1, 2013 was signed by the physician on January 18, 2013 (76 days from the start of care); and</p> <p>m. Patient # 57's POC with a certification period of August 3, 2012, to February 3, 2013 was signed by the physician on September 17, 2012 (45 days from the start of care).</p>			
H 393	3915.9 HOME HEALTH & PERSONAL CARE AIDE SERVICE	H 393		
	<p>Each home care agency shall define the duties of home health aides and personal care aides.</p> <p>This Statute is not met as evidenced by: Based on interview, record review and</p>			



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H 393	Continued From page 32	H 393	H393
	<p>observation, it was revealed the home care agency (HCA) failed to define the duties of home health aides for four (4) of fifty-nine (59) patients in the sample. (Patients #1, #7, #20 and #25)</p> <p>The findings include:</p> <ol style="list-style-type: none"> <li>1. During an interview with Employee #1 (HHA) on January 30, 2013, at approximately 7 p.m., at Patient #1's home, it was revealed that the home health aide (HHA) was contacted "the other day" by the agency and informed to return to the office to complete paper work because of the survey. Upon the HHA's return to the office, the HHA was given Patient #1's plan of care (POC). The POC provided the HHA with the patient's dietary restriction of low sodium. The HHA indicated that she was unaware of the restricted diet of low sodium, although she had been the patient's HHA and preparing meals for the patient since December 26, 2012. Further interview revealed that the agency's nurse failed to define the HHA duties specifically needed for Patient #1.</li> </ol> <p>During an interview with Patient #1 on January 30, 2013, at approximately 7:30 p.m., the patient stated "they need to give them aides some training because I have turned a lot of aides away because they don't know what they are doing when they come out. Some don't even wash their hands and I can't afford to get sick." When asked when was the last time the nurse visited, the patient stated "I haven't seen the nurse from Premier in about (4) months but I see my nurse from VNA often because they check my wound..... I guess because you are in their office, someone from Premier called me the other day and said a nurse was coming to visit me and I told them the nurse had not been here in four months, so if they come out I'm not letting them</p>		<p>During the May 2013 Supervisory visit, All RNs shall assess each patient's home to locate the admission packet. If Nurse cannot locate the admission or the HHA assignment sheets is not in the packet, the Nurse shall inform the office and a complete admission packet including the HHA assignment sheet shall be provided to the patient. During every supervisory visit RN shall verify the presence of the folder/ assignment sheet and review/train the PCA on the duties of the PCA specific to the patient. The Nurse shall document the training and the PCA's understanding of the training.</p> <p>Any new PCA's assigned by the Agency shall receive training within 72 hours of being assigned to the Patient. RN shall document the PCA's understanding of the client specific teaching.</p> <p>Agency shall ensure that a supervisory RN has performed an on-site supervisory visit to every PCA and has defined their duties by June 30, 2013.</p>

JUNE  
30th  
2013

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HCA-0027</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/15/2013</b>
NAME OF PROVIDER OR SUPPLIER  <b>PREMIER HEALTH SERVICES, INC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>7600 GEORGIA AVENUE, NW, SUITE 323, WASHINGTON, DC 20012</b>		
(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 393	Continued From page 33	H 393	To achieve more consistent care and	
	<p>in. They also called my other aide and told her to come to the agency because the surveyors are coming and she needed to complete some paperwork."</p> <p>During an interview with the assistant administrator (AA) on January 31, 2013, at approximately 2 p.m., the AA stated it was the responsibility of the HHA to inform the agency if the HHA plan of care was not available at the patient's home. It should be noted the HHA plan of care define the HHA duties and responsibilities.</p> <p>2. During a interview with Employee #6 (HHA) on February 4, 2013, at approximately 9:45 a.m., it was revealed that the HHA had been providing personal care services to Patient #7 since September 26, 2012. Further interview with the HHA was conducted to ascertain his/her knowledge of the " Home Health/Home Care Aide Assignment Sheet" that was received from Premier during record review. It should be noted the "Home Health/Home Care Aide Assignment Sheet" was developed by the agency's skilled nurse to detail specific services to be provided by the HHA for Patient #7. The HHA indicated he/she was not aware of the assignment of sheet and that the nurse had not provided any instructions related to his/her duties for Patient #7.</p> <p>During an interview with Patient #7 on February 4, 2013, at approximately 10:00 a.m., the patient indicated that Premier was the only home care agency providing services since 2009. When asked by the surveyor if she could provide the admission/information packet from Premier that includes the HHA's defined duties, the patient</p>		<p>continuity of care, Agency will phase out the use of part-time nurses. On 4/1/13 Agency hired three full time RNs. All current and new RN's shall receive In-Service training on the deficiencies on this report on April 16th 2013. One of the topics that will be covered is the roles and responsibilities and expectations of the RN to supervise and train the PCA specific to the Patient.</p> <p>To ensure compliance every supervisory note submitted shall be reviewed by the Clinical Manager to ensure that the PCA is being taught their duties based on the Plan of Care.</p> <p>The Quality Assurance Team will review at least 25 % of the monthly supervisory notes to ensure compliance.</p>	<p><i>ongoing</i></p>

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HCA-0027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  R 03/15/2013
NAME OF PROVIDER OR SUPPLIER  PREMIER HEALTH SERVICES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 7600 GEORGIA AVENUE, NW, SUITE 323 WASHINGTON, DC 20012		
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H 393	Continued From page 34	H 393		
	<p>presented the surveyor with an admission/information packet from another home care agency.</p> <p>Record review of Patient #7's record on January 31, 2013 at approximately 12:00 p.m., revealed unsigned documented entitled " RN Personal Care Aide/Homemaker Supervisory Monthly Visit Form " dated 10/08/12, 11/07/12, 12/05/12 and 01/08/13 . It should be noted the "yes" box was checked indicating the HHA "Follows the Plan of Care Assignment as outlined" on all the aforementioned forms. Additionally, the record review revealed the patients' start of care date was September 25, 2009.</p> <p>3. During a telephone interview with Patient #20 on February 5, 2013, at approximately 2:00 p.m., it was revealed that the patient received services from Premier for the past two years. The patient also indicated that Premier had not provided an information/admission packet.</p> <p>4. A telephone interview with Patient #25 on February 8, 2013, at approximately 2:30 p.m., revealed the patient had received an admission/information packet, however the packet did not include the defined duties of the HHA.</p>			
H 411	3915.11(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE	H 411		
	<p>Home health aide duties may include the following:</p> <p>(f) Observing, recording, and reporting the patient's physical condition, behavior, or appearance;</p>			