

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HCA-0090</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>11/17/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MBI HOME HEALTH SERVICES, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1221 TAYLOR STREET NW WASHINGTON, DC 20011</b>
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H 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual licensure survey and complaint (DC12316) investigation was conducted on 11/08/2023, 11/09/2023, 11/13/2023, 11/14/2023, 11/15/2023, 11/16/2023 and 11/17/2023 to determine compliance with Title 22 B DCMR, Chapter 39 (Home Care Agency Regulations). The Home Care Agency provided home care services to 218 patients and employed 449 staff. The findings of the survey were based on the review of administrative records, 21 active patient records, three discharged patient records, 25 personnel records, and a review of the agency's response to one complaint and other incidents received. The survey findings were based on the completion of three home visits.</p> <p>The complaint alleged personal care services were lacking. The findings of the investigation determined the allegation was unsubstantiated.</p>	H 000	<p><b>H122: 3906.1(c) CONTRACTOR AGREEMENTS</b></p> <p>The Agency acknowledges this deficiency and shall ensure that the agency's contractor agreement is updated in compliance with the current regulations to include the manner in which services will be controlled, coordinated and evaluated by the home care agency. Each current contractor shall be required to review and sign the updated contract agreement.</p>	02/15/2024
H 122	<p><b>3906.1(c) 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>(c) The manner in which services will be controlled, coordinated and evaluated by the primary home care agency;</p> <p>This Statute is not met as evidenced by:</p> <p>Based on record review and interview, the home care agency (HCA) failed to ensure that the personnel employed on a contractual basis included the method in which services would be</p>	H 122	<p>The agency shall henceforth ensure that all contractor agreements include the manner in which services will be controlled, coordinated and evaluated by the home care agency in compliance with current regulations. Each new hire shall be required to review and sign the updated contractor agreement prior to extending any job offer. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the contractor has reviewed and signed the updated agreement. After the employee has been hired, the Director of Nursing shall complete a second review ensuring that any new contractor has the updated agreement prior to authorizing any new assignment.</p>	

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

Razak Abudu *[Signature]*

TITLE

Administrator

(X6) DATE

01/08/2024

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H 122	<p>Continued From page 1</p> <p>controlled, coordinated, and evaluated by the agency for six of six registered nurses (RNs #1, 2, 3, 4, 5, and #6) included in the sample.</p> <p>Findings included:</p> <p>On 11/13/2023 at 10:20 AM, during the survey entrance conference, agency leadership shared that contractors were utilized to supplement nursing services.</p> <p>Review of the contractual agreements on 11/09/2023 and 11/13/2023 at 1:28 PM and 10:28 AM, respectively for the provision of nursing services (RNs #1, 2, 3, 4, 5, and #6) showed no documented evidence that the agency included the method in which services would be controlled, coordinated, and evaluated by the agency.</p> <p>During the exit interview on 11/17/2023, the agency's Administrator acknowledged the findings.</p> <p>At the time of the survey, the agency failed to ensure that written contractual agreements included the method in which services rendered by the nurses would be controlled, coordinated and evaluated by the agency.</p>	H 122	<p>Continued from previous page.</p> <p>The agency shall henceforth ensure that all contractor agreements include the manner in which services will be controlled, coordinated and evaluated by the home care agency in compliance with current regulations. Each new hire shall be required to review and sign the updated contractor agreement prior to extending any job offer. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the contractor has reviewed and signed the updated agreement. After the employee has been hired, the Director of Nursing shall complete a second review ensuring that any new contractor has the updated agreement prior to authorizing any new assignment completing contractor orientation training.</p> <p>The Agency Quality Assurance Team that includes the HR Manager and the Director of Nursing shall review each contractor agreement prior to hiring or providing any assignment to ensure that the signed contractor agreement was the updated contractor agreement and was properly reviewed and signed by the contractor. On a quarterly basis, the QA team shall review the human resources files of 100% contractors hired within the previous 90 days to ensure that the signed agreement remains in compliance with the current regulations. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p>	02/15/2024
H 123	<p>3906.1(d) 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>	H 123	<p>H123: 3906.1(d) CONTRACTOR AGREEMENTS</p>	

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H 123	Continued From page 2  (d) The procedure for submitting clinical and progress notes, periodic patient evaluation, scheduling of visits, and other designated reports;  This Statute is not met as evidenced by: Based on record review and interview, the home care agency failed (HCA) to include in the contractual agreements, the procedure for submitting clinical and progress notes, periodic patient evaluations, and other designated reports for nursing services for six of six registered nurses (RNs #1, 2, 3, 4, 5, and 6) included in the sample.  Findings included:  Review of contractual agreements for registered nurses (RNs #1, 2, 3, 4, 5, and 6) on 11/09/2023 and 11/13/2023 at 1:28 PM and 10:28 AM, respectively showed no documented evidence that the agency included the procedure for submitting clinical and progress notes, periodic patient evaluation, and other designated reports.  During the exit interview on 11/17/2023, the Administrator acknowledged the findings.  At the time of the survey, the agency failed to ensure the written contractual agreements for RNs #1, 2, 3, 4, 5, and #6 included the procedure for submitting clinical and progress notes, periodic patient evaluation, and other designated reports.	H 123	Continue from previous page  The Agency acknowledges this deficiency and shall ensure that the agency contractor agreement is updated in compliance with the current regulations. Agency current contractor agreement shall be updated to include the procedure for submitting clinical and progress notes, specific patient evaluation, scheduling of visits and other designated reports. Each current contractor shall be required to review and sign the updated contract agreement.  The agency shall henceforth ensure that all contractor agreements include the procedure for submitting clinical and progress notes, specific patient evaluation, scheduling of visits and other designated reports. Every new hire shall be required to review and sign the updated contractor agreement prior to extending any job offer. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the contractor has reviewed and signed the updated agreement. After the employee has been hired, the Director of Nursing shall complete a second review ensuring that any new contractor has the updated agreement prior to authorizing any new assignment completing contractor orientation training.  The Agency Quality Assurance Team that includes the HR Manager and the Director of Nursing shall review each contractor agreement prior to hiring or providing any assignment to ensure that the signed contractor agreement was the updated contractor agreement and was properly reviewed and signed by the contractor. On a quarterly basis, the QA team shall review the human resources files of 100% contractors hired within the previous 90 days to ensure that the signed agreement remains in compliance with the current regulations. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent reoccurrence.	02/15/2024
H 126	3906.1(g) CONTRACTOR AGREEMENTS  If a home care agency offers a service that is provided by a third party or contractor,	H 126		

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H 126	<p>Continued From page 3</p> <p>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> <p>This Statute is not met as evidenced by:</p> <p>Based on record review and interview, the (HCA) home care agency failed to ensure that the duration of the agreement included provisions for renewal for personnel employed on a contractual basis for six of six registered nurses (RNs #1, 2, 3, 4, 5, and #6) included in the sample.</p> <p>Findings included:</p> <p>Review of the contractual agreements for RNs #1, 2, 3, 4, 5, and #6 on 11/09/2023 and 11/13/2023 at 1:28 PM and 10:28 AM, respectively, showed that the contractual agreement "may be terminated by either party at any time for any reason provided that written notice is given by the party terminating the agreement to the other party at least ten (10) business days before the effective date of the termination," however, there was no documented evidence of provisions for renewal of these agreements.</p> <p>During the exit interview on 11/17/2023, the agency's Administrator acknowledged the findings.</p> <p>At the time of the survey, the agency failed to ensure written contractual agreements included the procedure for the renewal of the contractual agreements for nursing services.</p>	H 126	<p>H126: 3906.1(g) CONTRACTOR AGREEMENTS: RN's #1,2,3,4,5 and #6.</p> <p>The Agency acknowledges this deficiency and shall ensure that the agency contractor agreement is updated in compliance with the current regulations to include the duration of the agreement, including provisions for renewal, if applicable. Each current contractor shall be required to review and sign the updated contract agreement.</p> <p>The Agency shall henceforth ensure that all contractor agreements include the procedure for submitting clinical and progress notes, specific patient evaluation, scheduling of visits and other designated reports. Every new hire shall be required to review and sign the updated contractor agreement prior to extending any job offer. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the contractor has reviewed and signed the updated agreement. After the employee has been hired, the Director of Nursing shall complete a second review ensuring that any new contractor has the updated agreement prior to authorizing any new assignment.</p> <p>The Agency Quality Assurance Team that includes the HR Manager and the Director of Nursing shall review each contractor agreement prior to hiring or providing any assignment to ensure that the signed contractor agreement was the updated contractor agreement and was properly reviewed and signed by the contractor. On a quarterly basis, the QA team shall review the human resources files of 100% of contractors hired within the previous 90 days to ensure that the signed agreement remains in compliance with the current regulations. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p>	02/15/2024

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H 147	<p><b>3907.2(c) PERSONNEL</b></p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(c) Resume of education, training certificates, skills checklist, and prior employment, and evidence of attendance at orientation and in-service training, workshops or seminars;</p> <p>This Statute is not met as evidenced by:</p> <p>Based on record review and interview, the home care agency (HCA) failed to maintain accurate personnel records to include evidence of attendance at orientation for four of ten home health aides included in the sample (HHAs #4, 6, 7 and #8).</p> <p>Findings included:</p> <p>A review of personnel records on 11/13/2023 at 2:30 PM and 11/14/2023 at 10:28 AM, revealed the following:</p> <p>1. Home health aide #4's (HHA #4) personnel file included date of hire of 05/23/ 2023. Further review of the personnel file showed an "HHA Orientation Checklist" signed and dated 05/23/2023. The agenda items related to participation in orientation included spaces to respond "yes, no, or not applicable (N/A)". The spaces remained blank.</p> <p>2. Home health aide #6's (HHA #6) personnel file included date of hire of 09/01/ 2023. Further review of the personnel file showed an "HHA Orientation Checklist" signed and dated 08/31/2023. The agenda items related to</p>	H 147	<p><b>H126: 3906.1 (g) CONTRACTOR AGREEMENTS</b></p> <p>The Agency acknowledges this deficiency and shall ensure that the agency contractor agreement is updated in compliance with the current regulations to include the duration of the agreement, including provisions for renewal, if applicable. Each current contractor shall be required to review and sign the updated contract agreement.</p> <p>The Agency shall henceforth ensure that all contractor agreements include the procedure for submitting clinical and progress notes, specific patient evaluation, scheduling of visits and other designated reports. Every new hire shall be required to review and sign the updated contractor agreement prior to extending any job offer. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the contractor has reviewed and signed the updated agreement. After the employee has been hired, the Director of Nursing shall complete a second review ensuring that any new contractor has the updated agreement prior to authorizing any new assignment.</p> <p>The Agency Quality Assurance Team that includes the HR Manager and the Director of Nursing shall review each contractor agreement prior to hiring or providing any assignment to ensure that the signed contractor agreement was the updated contractor agreement and was properly reviewed and signed by the contractor. On a quarterly basis, the QA team shall review the human resources files of 100% of contractors hired within the previous 90 days to ensure that the signed agreement remains in compliance with the current regulations. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p>	02/15/2024

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H 147	<p>Continued From page 5</p> <p>participation in orientation included spaces to respond "yes, no, or not applicable (N/A)". The spaces remained blank.</p> <p>3. Home health aide (HHA #7 ' s) personnel file included date of hire of 10/17/ 2023. Further review of the personnel file showed an "HHA Orientation Checklist" signed and dated 10/17/2023. The agenda items related to participation in orientation included spaces to respond "yes, no, or not applicable (N/A)". The spaces remained blank.</p> <p>4. Home health aide (HHA #8 ' s) personnel file included date of hire of 11/01/ 2023. Further review of the personnel file showed an "HHA Orientation Checklist" signed and dated 10/31/2023. The agenda items related to participation in orientation included spaces to respond "yes, no, or not applicable (N/A)". The spaces remained blank.</p> <p>During an interview on11/16/2023 at 1:34 PM, the Assistant Director of Nursing (ADON) verified that the agenda items documented on the "HHA Orientation Checklist" should have been checked off indicating that the employee participated and completed orientation.</p>	H 147	<p><b>H147: 3907.2 (c) PERSONNELL HHA # 4, 6, 7 and #8.</b></p> <p>The Agency acknowledges this deficiency and shall review the orientation package of employees # 4, 6, 7 and 8 and ensure that the orientation package is updated to include appropriate attendance information to include all areas that needed to be completed by each employee. The updated information shall be placed on the employee file. The RN employee responsible for the orientation of new employees has been retrained to ensure that each orientation package contains complete and accurate information as required.</p> <p>The agency shall henceforth ensure that the home health agency orientation checklist is reviewed by each applicant and the form shall include all required information as completed by the applicant. Director of Nursing shall review the orientation checklist after the new hire orientation has been completed by a designated registered nurse. The Human Resource Manager has been tasked to ensure that prior to extending any offer, the orientation checklist was completed in full. The Director of Nursing shall then conduct a second review that ensures that each orientation package has been fully reviewed and signed by the applicant including the registered nurse that conducted the orientation. This process will ensure that 100% of all applicants successfully completed the required agency orientation and the information provided on the HHA orientation form is accurate and complete prior to a final job offer. The Agency</p> <p>Quality Assurance Team that includes the HR Manager and the Director of Nursing shall review each review each orientation package to ensure that each HHA orientation package is reviewed signed and is accurate and complete. On a quarterly basis, the QA team shall randomly review the human resources files of 20% of all employees hired within the previous 90 days to ensure that the HHA checklist of the selected employees is accurate and complete as required. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p>	02/15/2024
H 162	<p><b>3907.6 PERSONNEL</b></p> <p>At the time of initial employment of each employee, the home care agency shall verify that the employee, within the six months immediately preceding the date of hire, has been screened for and is free of communicable disease.</p>	H 162		

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H 162	Continued From page 6  This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to verify that each employee was free of communicable disease within the six months immediately preceding the employee's date of hire for 2 of 10 sampled home health aides (HHAs #5 and #8).  Findings included:  A review of personnel records on 11/14/2023 at 10:28 AM, revealed the following:  1. The personnel file for home health aide (HHA #5) included a hire date of 06/13/2023. Further review of her personnel file showed a purified protein derivative (PPD) that was performed on 10/05/2022, eight months prior to her date of hire. The record lacked documented evidence that HHA #5 was screened and verified free of communicable disease within six months of hire.  2. The personnel file for the home health aide (HHA #8) included a hire date of 11/01/2023. Further review of her personnel file showed purified protein derivative (PPD) that was performed on 12/04/2022, 12 months prior to her date of hire. The record lacked documented evidence that HHA#8 was screened and verified free of communicable disease within six months of hire.  During the Exit Interview on 11/17/2023, the administrative staff acknowledged the findings.	H 162	H162: 3907.6 PERSONNEL  HHAs #4 and #8  The Agency shall ensure that the said employees have an accurate and updated PPD and shall be placed on the employee personnel record. In addition, the agency shall ensure that both employees continue to remain in compliance with the annual PPD. The agency policy has been updated to include review of communicable disease within six months prior to the date of hire.  To prevent recurrence, the agency shall implement a fix to include an updated agency policy that states "all employees to be certified free from communicable disease within six months before hire date. After the HR Manager reviews the employee file ensuring that the incoming applicant has been screened within the past six months, the information shall be provided to the Director of Nursing or a designated Clinical Staff for a second review to be certain that the incoming employee has valid screening prior to a final job offer.  The Agency Quality Assurance Team that includes the HR Manager and the Director of Nursing or designate registered nurse shall review the employee file to ensure that the incoming employee has the valid communicable disease clearance. On a quarterly basis, the QA team shall randomly review the human resources files of 1000% of employees hired within the previous 90 days to ensure that each employee had a valid clearance within six months of hire. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.	02/15/2024
H 355	3914.3(d) PATIENT PLAN OF CARE  The plan of care shall include the following:	H 355		

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H 355	<p>Continued From page 7</p> <p>(d) A description of the services to be provided, including: the frequency, amount, and expected duration; dietary requirements; medication administration, including dosage; equipment; and supplies;</p> <p>This Statute is not met as evidenced by: Based on clinical record review and staff interview, the Skilled Nurse failed to update the Plan of Care for the use of parenteral medication to include frequency and dosage, (insulin), for one of 25 clinical records reviewed, for one of 25 clinical records reviewed, (Patient #10).</p> <p>Findings included:</p> <p>A review of the Agency Policy titled, "Medication Review Policy", dated 04/30/2020, on 11/09/2023 at 2:00 PM, shows, "For Home Health Aide patients, the Registered Nurse (SN) will review and reconcile the medications at least every 30 days [and] document the outcome of the reconciliation on the skilled nursing note".</p> <p>A review of the clinical record for Patient #10 showed the Start of Care (SOC) for was dated 05/17/2017, with a duration of 02/01/2023 through 01/31/2024; medical diagnoses included Diabetes Mellitus type 2, and hypertension. Patient #10 was receiving Skilled Nursing (SN) visits every month for patient monitoring of care and treatment, and Home Health Aide (HHA) supervision. HHA duties included activities of daily living (ADL) and instrumental activities of daily living (IADL) to include medication reminders.</p> <p>An onsite home visit was conducted 11-09-2023</p>	H 355	<p>H355: 3914.3 (d) PATIENT PLAN OF CARE. PATIENT # 10</p> <p>The plan of care has been updated to include review of each medication that includes the frequency and dosage of all medications including insulin (See ITEM # 2024). The skilled nurse has been retrained to ensure that the client's current medication is reviewed on each home visit to include frequency and dosage by requesting from the client and any other resources that includes information from the primary care provider as well as other resources such as discharge summary etc...</p> <p>Moving forward, the agency shall provide ongoing training to all skilled nurses at least once a year and one on one training as needed to ensure that each skilled nurse reviewed and reconciled the client medication on each home visit. After each visit, the skilled nurse shall review and sign off on the client medication as an attestation that each client medication was reviewed. The information shall be part of the client's clinical record. To prevent recurrence, a designated QA registered nurse shall review each nursing notes as they are submitted, and this review shall include evidence of the skilled nurse reviewed the medication list and attested that the list as well as appropriate education to the client and or caregiver to ensure safety. was reviewed prior to reimbursing the skilled nurse. This process will be effective to ensure that all home visits include attestation that the skilled nurse reviewed and reconciled the medication. As part of ensuring consistency, personnel action shall be taken for any skilled nurse who persistently violates this process.</p> <p>The quality assurance team that includes a designated QA RN, and the Director of Nursing or designate shall randomly select 20% of current census on quarterly basis, review the medication profiles of the selected clients to ensure that each of the selected clients has updated medication list as attested by the skilled nurse and appropriate teaching was provided to each client on the selected list to ensure appropriate education has been provided to the client and or caregiver to ensure the client has been taking the appropriate medication. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p>	02/15/2024



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H 355	<p>Continued From page 8</p> <p>at 9:15 AM, Patient #10 was observed resting in bed. A plastic box with multiple medications was observed proximal to the patient and contained an insulin multidose administration pen. The surveyor asked Patient #10 how long she had been taking daily insulin, and Employee #9 (home health aide #9) replied "Over a year now".</p> <p>The clinical record lacked evidence that the patient's medication regimen included insulin injections. However, a review of pharmacy records showed insulin was initially dispensed for Patient #10 on 08/01/2022. There was no evidence the skilled nurse offered education to the patient on the use of injectables, precautions related to their usage and/or proper disposal practices.</p> <p>A telephone interview was conducted with skilled nurse (Employee #8), in the presence of the agency Administrator, on 11/09/2023 at 2:15 PM. Employee #8 was asked if she was aware that Patient #10 was administered daily insulin and she stated that she was not aware that the patient was receiving daily insulin. When asked about the monthly documentation of medication reconciliation documented in the monthly visit notes, Employee #8 stated she did not find insulin in the patient's medication bin at the home. When asked about the patient's ability to check glucose levels three times a day, no answer was given.</p> <p>The skilled nurse failed to ensure accuracy in the plan of care as related to medications, equipment and supplies.</p>	H 355	<p>3914.4 PATIENT PLAN OF CARE (POC)</p> <p>Patient #1, #2, #3, #4, #6, and #8</p> <p>Agency acknowledged that the plan of care was not reviewed and signed by the physician within 30 days as required. Agency strives to ensure that this deficiency does not recur. Each of the plans of care has been signed by the primary care physician.</p> <p>The Agency shall henceforth ensure that each plan of care is signed within 30 days from the start of services or within 30 days from the end of recertification period. The following process shall be in place. A Nursing Administrative Assistant has been tasked to specifically ensure that each plan of care is signed within the first 21 days from start of service. The designated staff will provide a weekly update to the Director of Nursing if the POC has not yet been signed. The DON will conduct a thorough review with an action plan aimed at making sure that each plan of care is signed within the required 30 days. A "Plan of Care Tracking Sheet" is designated for each patient and a daily follow up to the primary care physician is conducted by the designated administrative staff. This process has the greatest potential to be successful to ensure that plans of care are signed within the required 30 days. The Assistant Director of Nursing with the assistance of a designated clinical staff is designated to supervise this process and will escalate any issues that may arise that prevents the POC to be signed within the required date to the Director of Nursing who will ensure that the patient being served has the required signed plan of care on the patient's record.</p>	02/15/2024
H 366	<p>3914.4 PATIENT PLAN OF CARE</p> <p>Each plan of care shall be approved and signed</p>	H 366		

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HCA-0090</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>11/17/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MBI HOME HEALTH SERVICES, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1221 TAYLOR STREET NW WASHINGTON, DC 20011</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
H 366	<p>Continued From page 9</p> <p>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:</p> <p>Based on record review and interview, the home care agency (HCA) failed to ensure that each patient's plan of care (POC) was approved and signed by a physician and/or designee within 30 days of the start of care (SOC) for five of 25 clinical records reviewed, (Patients #1, 2, 3, 6, and #8).</p> <p>Findings included:</p> <p>A review of the home care agency's clinical records beginning 10/30/2023 through 11/06/2023 showed that the agency failed to ensure that the Plans of Care (POCs) for Patients #1, 2, 3, 6, and #8 were reviewed and signed by a physician as of the date of this survey, greater than 30 days of the start of cares (SOCs).</p> <p>On 11/17/2023 at 1:05 pm, the administrator and his team were informed of the finding that the home care agency failed to ensure that the POCs for Patients #1, 2, 3, 6, and #8 were signed by the physician and/or designee within 30 days of the start of care (SOC).</p>	H 366	<p>Continue from the previous page</p> <p>3914.4 PATIENT PLAN OF CARE (POC) Patient #1, #2, #3, #4, #6, and #8</p> <p>The Agency Quality Assurance (QA) Team that include the Director of Nursing (DON) and a designated QA RN will work as a team to monitor on weekly basis each plan of care that is not signed within 30 days and ensure that it is signed within the required period. In addition, the QA team shall randomly select and review a sample size of 20% of the Agency's total census on a quarterly basis to ensure that each POC within the sample selected was signed within a 30-day time frame. Any deficiency found shall be corrected immediately and the information shall be used as a guide for future operations to prevent re-occurrence.</p> <p>H 457: 3917.2 (g): SKILLED NURSING SERVICES PATIENT # 12</p> <p>Agency acknowledges that the 602-day summary was not completed and sent to the PCP for review. The skilled nurse that was required to complete the 62-day summary is no longer with the agency. A new skilled nurse assigned to the patient shall complete the 62-day summary and send it to the primary care physician for review. The information shall be part of the clinical record.</p>	02/15/2024
H 457	3917.2(g) SKILLED NURSING SERVICES	H 457		

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HCA-0090</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>11/17/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>MBI HOME HEALTH SERVICES, LLC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1221 TAYLOR STREET NW WASHINGTON, DC 20011</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 457	<p>Continued From page 10</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(g) Recording progress notes at least once every thirty (30) calendar days and summary notes at least once every sixty-two (62) calendar days;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to provide evidence that the registered nurses (RNs) provided summary notes every 62 days for one of 25 clinical records reviewed, (Patient #12).</p> <p>Findings included.</p> <p>On 11/09/2023 at 10:43 am, a review of Patient #12's clinical record showed a plan of care (POC) with a duration period of 11/01/2-022 through 10/31/2023. The POC included orders for home health aide services 16 hours per day five days per week for activities of daily living (ADLs).</p> <p>Further review of the clinical record failed to show evidence that the registered nurse (RN) provided summary notes every 62-days.</p> <p>On 11/13/2023 at 11:00 am, the surveyor conducted a face-to-face interview with the Clinical Administrator, who acknowledged and confirmed the finding.</p>	H 457	<p>Continue from previous page</p> <p>H 457: 3917.2 (g): SKILLED NURSING SERVICES</p> <p>PATIENT # 12</p> <p>The Agency shall henceforth conduct reinforcement training for the skilled nurses regularly and one-on-one training as needed but at least once yearly to reinforce the importance of evaluating skilled nursing services provided to each patient and to ensuring that the summary of the evaluation is sent to the primary care PCP every 62 days for review. In addition, the agency instituted a financial incentive (not billed to Medicaid) to the agency skilled nurses to increase the chance of full compliance. A designated office RN shall be responsible to follow up to each skilled nurse as the 62-day summary is coming due for each patient and to ensure that each 62-day summary is completed timely, and the information sent to the PCP for review. A monthly report pulled electronically by a designated office RN shall be reviewed by the Director of Nursing or a designated RN to ensure compliance. Personnel action shall be instituted for any skilled nurse who is found to be consistently violating the policy.</p> <p>The Quality Assurance (QA) clinical team which include the Director of Nursing, Assistant Director of Nursing and a designated RN shall ensure that during a 60-day review of the plan of care, each clinical chart contains a completed a completed 62-day summary that is completed and reviewed by the PCP. The QA team monitor and review a sample size of 20% of the Agency's total census on quarterly basis, to ensure that the clinical chart of the selected patients contained completed 62-day summary that has been reviewed by the PCP. Any deficiency found on the selected records shall be corrected immediately and the information to be used as a guide to the agency future operations with the specific goal to preventing re-occurrence.</p>	02/15/2024