



GOVERNMENT OF  
THE DISTRICT OF  
COLUMBIA

DEPARTMENT OF HEALTH  
HEALTH REGULATION & LICENSING  
ADMINISTRATION

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Name of Facility:</b>	<b>Street Address, City, State, ZIP Code:</b>	<b>Survey Date:</b>
Premium Select Home Care Inc.,	5513 Illinois Ave., NE	11/12&13/08
	Wash., DC	<b>Follow-up Dates(s):</b>

Citation from the DCMR	Statement of Deficiencies	Ref. No.	Plan of Correction	Completion Date
<b>Title 22 Chapter 39</b>	A 90 Day renewal licensure survey and verification of initial plan of corrections was conducted in your facility on November 13&14, 2008. The following deficiencies were based on record reviews and staff interviews. The sample size was six (6) based on a census of 67.		The emergency protocol is reviewed with the client/caregivers during the admission process by the admitting R.N. or P.T. The emergency protocol form is included in the admission book (see attachment appendix A).. The protocol is reviewed with the the HHA/PCA and they are instructed to notify the Director of Nursing or Designee if the patient experiences any of the problems listed or any significant problems. In addition, staff members are instructed to implement CPR when necessary and instructed to call 911 if a patient experience any of the following: A fall with a broken bone or bleeding; Chest pain that medicine doesn't help; Difficulty in Breathing; In-ability to wake the patient; Severe or prolonged bleeding; and Severe or prolonged pain. All staff members are responsible for implementing the emergency plan if they are in the patient's home when the problems occurs. The Physician Plan of Care (485) will include orders for the admitting staff to In-service the patient/caregivers on the emergency protocol. The POC will also include an order for all staff members to implement the emergency protocol. The emergency protocol procedures are part of the initial staff orientation.	11/17/08 ongoing
<b>3914.3</b>	<b>3914 Patient Plan of Care</b>  The plan of care shall include the following:  (I) Identification of employees in charge of managing emergency situations...			
<b>3914.4</b>	Based on record reviews, it was determined that the agency failed to provide documentation of employees in charge of managing emergencies of all six (6) care plan reviewed.  Each plan of care shall be approved and signed by a physician within thirty (30) days of the start of care; provide, however, that a plan of care for personal care aide services only may be approved and signed by an			

Shirley Watson      11/25/08  
Name of Inspector      Date Issued

Linda Hart Davis, Adm      1/2/09  
Facility Director/Designee      Date



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INTERMEDIATE CARE FACILITIES DIVISION

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	<p>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 a physician within thirty (30) days.</p> <p>Based on record reviews, it was determined that agency failed to provide signature from physician within thirty (30) days for three (3) care plans reviewed.</p> <p>Findings as follows:</p> <p>Client #2 – start of care dated 10/09/08 no signature noted.</p> <p>Client #3- start of care dated 09/17/08 signed 10/29/08.</p> <p>Client #4- start of care dated 09/25/08 no signature noted.</p> <p>The above deficiencies were acknowledged by the Director of Nursing.</p> <p>Please be advised that the above deficiencies were also cited on the original Statement of Deficiencies dated 07/14/08.</p>	<p>The Plan of Care is initially mailed to the client's Physician. If not returned by 3 weeks it is faxed or Hand delivered to the physician's office for signature with the attached letter (see attachment appendix B). The list of orders that needs to be signed and the action taken to obtain the orders will be reviewed with the Administrator weekly. The medical record staff person will track the orders using an excel spread sheet. If the orders are not received in 30 days, the orders will given to the Medical Director for signature until we can get the client's physician to sign the orders. The Medical records personnel will meet weekly with the Administrator to review all outstanding orders and implement strategies to obtain all orders timely.</p>	<p>12/9/08 ongoing</p>
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