

Health Regulation Administration

TITLE OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: <p style="text-align: center;">HCA-0004</p>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <p style="text-align: center;">11/22/2010</p>
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NAME OF PROVIDER OR SUPPLIER <p style="text-align: center;">T & N RELIABLE NURSING CARE</p>	STREET ADDRESS, CITY, STATE, ZIP CODE <p style="text-align: center;">3500 18TH STREET WASHINGTON, DC 20018</p>
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H 000	INITIAL COMMENTS An annual survey was conducted at your agency from November 18, 2010, through November 22, 2010, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a random sample of twenty-five (25) clinical records based on a census of five hundred- seventy-six (576) patients, twenty-five (25) personnel files based on a census of six hundred seventy-six (676) employees and three (3) home visits. The findings of the survey were based on observations in the home, interviews with agency staff and patient interviews as well as a review of patient and administrative records.	H 000	<p style="text-align: center;"><i>Received 12/8/10</i></p> <p style="text-align: center;">GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH HEALTH REGULATION ADMINISTRATION 825 NORTH CAPITOL ST., N.E., 2ND FLOOR WASHINGTON, D.C. 20002</p>	
H 053	3903.2(c)(1) GOVERNING BODY The governing body shall do the following: (c) Review and evaluate, on an annual basis, all policies governing the operation of the agency to determine the extent to which services promote patient care that is appropriate, adequate, effective and efficient. This review and evaluation must include the following: (1) The evaluation shall include feedback from a representative sample consisting of either ten percent (10%) of total District of Columbia patients or forty (40) District of Columbia patients, whichever is less, regarding services provided to those patients. This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to include feedback from a representative sample consisting of either ten percent (10%) of the District of	H 053	To correct the deficient, the patient satisfaction survey results will be recorded in the Agency's Annual report in details, that is, specifying the feedback of each patient. Clients will be numbered in the report as client 1 thru 40. The Director will check for effectiveness after the report is typed annually.	10/31/11

Health Regulation Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <p style="text-align: center;"><i>Aguen N. King, RN</i></p>	TITLE <p style="text-align: center;">RN</p>	(X6) DATE <p style="text-align: center;"><i>12/8/10</i></p>
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Regulation Administration

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H 053 Continued From page 1
Columbia patients or forty (40) District of Columbia patients, which ever is less, regarding services provided to those patients in its annual review and evaluation.

The findings include:

On November 19, 2010, a record review at approximately 12:00 p.m. of the agency annual review and evaluation which was dated November 10, 2010. The aforementioned annual review documented "A feed back from 40 clients regarding their services was reviewed. The Board of Directors was satisfied with the responses from the feedback survey conducted by the company..." However, there was no documented evidence of the feed back from the forty (40) patient's surveyed.

During a face to face interview with the Director and the Director of Nursing on November 19, 2010 at approximately 1:30 p.m. the finding was acknowledged.

H 053

H 054 3903.2(c)(2) GOVERNING BODY

The governing body shall do the following:

(c) Review and evaluate, on an annual basis, all policies governing the operation of the agency to determine the extent to which services promote patient care that is appropriate, adequate, effective and efficient. This review and evaluation must include the following:

(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.

H 054

To correct the deficiency, all complaints received from clients will be reviewed individually (on a case by case bases) and the agency's response to each will be documented in the Agency's annual report. The Director will check for effectiveness after the report is typed annually.

10/31/11

Health Regulation Administration

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H 054	Continued From page 2 This Statute is not met as evidenced by: Based on record review and interview, it was determined that the agency failed to include review of all complaints made or referred to agency, including the nature of each compliant and the agency response thereto. The findings include: On November 19, 2010, a record review at approximately 12:00 p.m. of the agency annual review and evaluation which was dated November 10, 2010. The aforementioned annual review documented "There were a few compliant's about aides arriving late at work..." However there was no documented evidence of review of all complaints made or referred to agency, including the nature of each compliant and the agency response thereto. During a face to face interview with the Director and the Director of Nursing on November 19, 2010 at approximately 1:30 p.m. the finding was acknowledged.	H 054		
H 152	3907.2(h) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (h) Copies of completed annual evaluations; This Statute is not met as evidenced by: Based on record review and interview, it was determined the agency failed to ensure that two (2) of twenty-five (25) employees had copies of	H 152		

Health Regulation Administration

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H 152	Continued From page 3 completed annual evaluations in their personnel record. (Employee #15 and #21) The findings include: 1. On November 19, 2010, a record review of employee #15 ' s personnel record at approximately 12:15 p.m. revealed employee #15 was hired on August 11, 2009. Further review of the record revealed there was no documented evidence of an annual evaluation for August 2010 in the record. During a face to face interview with the Director and the Director of Nursing on November 19, 2010 at approximately 1:30 p.m., the finding was acknowledged. 2. On November 19, 2010, a record review of employee #21 ' s personnel record at approximately 1:00 p.m. revealed employee #21 was hired on August 11, 2009. Further review of the record revealed there was no documented evidence of an annual evaluation for August 2010 in the record. During a face to face interview with the Director and the Director of Nursing on November 19, 2010 at approximately 1:30 p.m., the finding was acknowledged.	H 152	To correct the deficiency, employees #15 and #21 annual evaluations have been done. See attachment 1. To prevent this deficiency from re-occurring, the HR personnel have been in-serviced to do employees annual evaluations by their anniversaries. The office manager will check every quarter for effectiveness.	11/30/10
H 163	3907.7 PERSONNEL Each employee shall be screened for communicable disease annually, according to the guidelines issued by the federal Centers for Disease Control, and shall be certified free of	H 163		

Health Regulation Administration

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H 163	<p>Continued From page 4</p> <p>communicable disease.</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that agency failed to ensure that one (1) of twenty-five (25) employees were screened for communicable disease annually. (Employee#14)</p> <p>The findings include:</p> <p>A record review on November 19, 2010, at approximately 11:00 a.m. revealed there was no documented evidence the employee had annual screening for communicable disease.</p> <p>Further review of the record revealed a letter from Columbia Road Health Services dated March 12, 2010 which indicated the employee had a positive PPD test and needed a chest X-ray. There was no documented of the chest X-ray in the employees file at the time of this survey.</p> <p>During a face to face interview with the Director and Director of Nursing on November 19, 2010 at approximately 1:00 p.m., the finding was acknowledged.</p>	H 163	<p>To correct the deficiency, employee #14 chest X-rays results was requested and submitted to the office on 11/22/10. See attachment 2.</p> <p>To prevent the deficiency from re-occurring, HR personnel were in-serviced on differences between physicals and chest X-rays results. Also, they were instructed that some doctors include chest X-rays results dates in the physicals., but each employee needs a separate chest X-ray form. The office manager will check for effectiveness.</p>	11/30/10
H 265	<p>3911.2(e) CLINICAL RECORDS</p> <p>Each clinical record shall include the following information related to the patient:</p> <p>(e) Physician's orders;</p> <p>This Statute is not met as evidenced by:</p>	H 265		

Health Regulation Administration

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H 265	Continued From page 5 Based on a record review and interview, it was determined that the agency failed to ensure the clinical record for one (1) of twenty-five (25) patient ' s in the sample had a physician order. (Patient #15) The findings include: On November 14, 2010, a record review of patient #15 ' s record at approximately 9:30 a.m. revealed POC with certification period of June 30, 2010 through December 29, 2010 in which the physician ordered Skilled Nursing every month for assessment of all systems and supervision of Home Health Aide (HHA) ; HHA services eight (8) hours a day, seven (7) days a week to assist patient with Activities of Daily Living, medication reminder, meal preparation, laundry, light house keeping and medical appointments.... Further review of the record revealed HHA time sheets dated from August 10, 2010 through November 7, 2010, which documented HHA service were provided twelve (12) hours a day and not eight (8) hours a day as ordered by the physician. There was no documented evidence of a physician order for HHA services for twelve (12) hours a day in the patient ' s clinical record at the time of this survey. During a face to face interview with the Director and the Director of Nursing on November 14, 2010 at approximately 10:00 a.m., the finding was acknowledged.	H 265	A verbal order was done during the audit to correct to correct the deficiency and faxed to MD. See attachment 3. The office employees responsible for care planning and those receiving waiver approvals were in-serviced to do verbal orders to correct any changes in personal care aide services hours and faxed to MD for signature. The quality assurance personnel will check after these employees every quarter to ensure effectiveness.	11/30/10
H 399	3915.10(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE Personal care aide duties may include the following:	H 399		

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H 399	<p>Continued From page 6</p> <p>(f) Observing, recording, and reporting the patient's physical condition, behavior, or appearance;</p> <p>This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure Personal Care Aides (PCA's) recorded, and reported on the patient's physical condition, behavior or appearance for seven (7) of ten (10) patients who were receiving PCA services in the sample. (Patient #16, Patient #17, Patient #19, Patient #20, Patient #21, Patient #24 and Patient #25).</p> <p>The findings include:</p> <p>Review of Patient #16, Patient #17, Patient #19, Patient #20, Patient #21, Patient #24 and Patient #25's medical records on November 18, 2010, approximately between 9:15 a.m.- 12:25 p.m., revealed the PCA's (Personal Care Aides) had not specially recorded and reported the patient's physical condition, behavior, or appearance to the agency.</p> <p>During a face to face interview with the Director of Nursing (DON) on November 18, 2010, at approximately 12:30 p.m., the surveyor informed the provider of the above and it was acknowledged the PCA's had not specially recorded and reported on Patient #16, Patient #17, Patient #19, Patient #20, Patient #21, Patient #24 and Patient #25's physical condition, behavior, or appearance to the agency.</p> <p>There was no documented evidence the PCA's specially recorded and reported the patient's</p>	H 399	<p>To correct the deficiency, PCAs will be In-serviced during the December section of their regular in-service calendar to be more specific with the comments on the work sheets. They will be instructed not to write "stable" or "no change" but to say what happened to the client each day of service.</p> <p>The office employees responsible for collecting and filing of PCA work sheets will check for effectiveness.</p>	12/31/10

Health Regulation Administration

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H 399	Continued From page 7 physical condition, behavior, or appearance to the agency.	H 399		
H 453	<p>3917.2(c) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(c) Ensuring that patient needs are met in accordance with the plan of care;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, it was revealed that the agency failed to ensure the patient need were met in accordance with the plan of care for two (2) of twenty-five (25) patients in the sample. (Patient #14 and #4)</p> <p>The findings include:</p> <p>1. On November 18, 2010, a record review of patient #14 ' s record at approximately 12:15 p.m. revealed a POC with certification period of May 6, 2010 through November 5, 2010 in which the physician ordered Skilled Nursing visits every month for assessment of all systems and supervision of the Home Health Aide (HHA). HHA services eight (8) hour a day seven (7) days a week, to assist patient with Activities of Daily Living (ADL), medication reminders, meal preparation, laundry, light house keeping and medical appointments</p> <p>Further review of the record revealed there was no documented evidence of a skilled nursing assessment for June 2010, July 2010, September 2010 and October 2010.</p>	H 453	<p>The employees responsible for collecting nurses notes were in-serviced to inform the Director of Nurses of any clients who cannot be seen by the nurses for two consecutive months to be giving a letter of "intent to discharge" if the nurses do multiple visits and cannot find the client. The nurse visiting Spanish clients was also in-serviced to inform the DON if the translator will not be available for multiple visits for the same client within a month for possible replacement. Nurses will be giving a memo that one missed visit attempt per month is not enough to justify their absence, so multiple missed visit sheets are required. The quality control person will check for effectiveness</p>	11/30/10

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H 453	<p>Continued From page 8</p> <p>During a face to face interview with the Director and the Director of Nursing on November 18, 2010, at approximately 1:00 p.m., the finding was acknowledged.</p> <p>2. On November 19, 2010, a record review of patient #4 ' s record at approximately 10:30 a.m.. revealed a POC with certification period of December 2, 2009 through June 1, 2010 in which the physician ordered Skilled Nursing visits every month for assessment of all systems and supervision of the Home Health Aide (HHA). HHA services six (6) hours a day seven (7) days a week, to assist patient with Activities of Daily Living (ADL), medication reminders, meal preparation, laundry, light house keeping and medical appointments</p> <p>Further review of the record revealed the patient was admitted to the agency on December 2, 2009 and discharged from the agency March 2, 2010. However there was no documented evidence of nursing assessments for January 2010 and February 2010.</p> <p>During a face to face interview with the Director and the Director of Nursing on November 19, 2010, at approximately 10:30 a.m., the finding was acknowledged.</p>	H 453	<p>Employees responsible for doing discharges were in-serviced to staple all discharged papers into bundles to prevent any misplacements of worksheets or notes and to audit the discharge charts prior to sending to medical records to ensure that all worksheets and notes belonging to that chart are in.</p> <p>The employee labeling medical records was in-serviced to arrange medical records for each client together to facilitate pulling if requested.</p>	11/30/10