

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 03/04/2022
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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	<p>INITIAL COMMENTS</p> <p>An annual licensure survey in conjunction with a complaint investigation was conducted on 02/28/2022 through 03/04/2022 to determine compliance with the District of Columbia Home Care Agency Regulations (Title 22 B DCMR Chapter 39). The Home Care Agency employed 300 staff and provided services to 120 patients. The findings of the survey and complaint investigation were based on a review of administrative records, 12 active patient records, three discharged patient records, 16 employee records, nine telephone patient interviews, and a review of the agency's response to complaints and incidents received.</p> <p>The findings of the survey and complaint investigation are detailed throughout the body of this report.</p> <p>Complaint allegation #1: 1. The home care agency failed to provide RN services to prepare a care plan for the home health aides to follow while giving care to Patient #6.</p> <p>Conclusion: Based on record review and interview with the Administrator and DON on 2/28/2022 at 10:00 AM, The agency conducted a Resumption of Care and a Recertification for home health care on 12/02/2021. A care plan was developed for the home health aide services, which was accessible by the home health aides during care.</p> <p>2. Complaint allegation #2: Patient #6 was to receive therapy services following discharge home from the Nursing</p>	H 000	Please begin typing responses here:	
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Ijeoma Aringwa *Q. U. [Signature]* *Administrator* TITLE

STATE FORM 1TPX11 0899 3/30/2022 (X6) DATE

If continuation sheet 1 of 6

Plan of Correction Amended 4/25/2022.
Q. U. [Signature]

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H 000	<p>Continued From page 1</p> <p>Home/Rehabilitation facility and no therapy services were provided.</p> <p>Conclusion:</p> <p>Based on interview with the physician's office on 03/08/2022 at 11:10 AM, the physician did not order therapy services for the patient post discharge from the Nursing Home/Rehabilitation facility.</p> <p>The allegations were unsubstantiated.</p>	H 000		
H 366	<p>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:</p> <p>Based on record review and interview, it was determined that the home care agency (HCA) failed to ensure that physician orders, revising the Plan of Care were signed within 30 days from the date ordered for one of 12 patients in the sample (Patient #6).</p> <p>Findings included:</p> <p>A review of Patient #6's record on 03/04/2022 at 10:10 AM showed a Plan of Care (POC) that was</p>	H 366	<p>Premier Health Services acknowledges this Citation. The verbal order in question Was not available and was not part of the record at the time the record was reviewed. the verbal order was faxed to Premier by the ordering physician on Monday March 7, 2022.</p>	

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H 366	<p>Continued From page 2</p> <p>completed by the registered nurse on 12/02/2021. The POC contained orders for Home Health Aide (HHA) services 12 hours a day, seven days a week to include assistance with bathing, dressing, toileting, grooming, oral care, light housekeeping, and laundry. The POC also contained orders for Registered Nursing (RN) visits every 30 to 62 days for supervision of the Home Health Aide, conduct skilled assessments, and inform the physician of any change in the patient's condition. Continued review of the clinical record showed a verbal order dated 12/03/2021, modifying the POC, for home health aide services to 16 hours a day, five days a week. The order was not signed by the physician at the time of the record review.</p> <p>The agency failed to have the physician's verbal order signed within 30 days.</p> <p>During the exit interview on 03/04/2022 at 3:00 PM, the administrator and Director of Nursing (DON) acknowledged the findings.</p>	H 366	<p>The order was signed on 3/4/22 by The ordering physician (see attachment 1) The administrator reviewed the established Process of tracking and managing orders With the Medical Record Coordinator on 3/7/2022 to include</p> <ol style="list-style-type: none"> weekly tracking and follow up with the ordering provider's office to retrieve the signed orders. Informing the clinical manager by day 15 of any orders not signed and received From the ordering provider If not received by day 20, the clinical manager will contact the ordering provider to determine the status of the unsigned order <p>Effective 4/1/2022 and monthly ongoing the medical records Coordinator will provide the Administrator the with a tracking of orders from the previous month. Effective 4/15/2022, the patient care Coordinator will randomly review 25% of the orders on the tracking document on a monthly basis to monitor compliance with signing of the Orders within 30 days</p>	<p>3/7/22</p> <p>4/1/22</p> <p>4/15/22</p>
H 391	<p>3915.7 HOME HEALTH & PERSONAL CARE AIDE SERVICE</p> <p>Each home health or personal care aide shall be supervised by a registered nurse or other health professional for performing tasks specific to that profession. On-site supervision of skilled services shall take place at least once every two (2) weeks. On-site supervision of all other services shall take place 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, it was</p>	H 391		

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H 391 : Continued From page 3	<p>determined the home care agency failed to conduct on-site supervision of the home health aides (HHA) performance of tasks, at least once every sixty-two calendar days for three of 12 patients in the sample (Patients #3, #5 and #6).</p> <p>Findings included:</p> <p>1. A review of Patient #3's clinical record on 03/02/2022 at 2:20 PM, showed a Plan of Care with a service period of 08/01/2021 through 07/31/2022. Further review of the Plan of Care showed the patient had diagnoses to include Heart Failure, Hypertension, and Cerebral Infarction. The Plan of Care included physician orders for skilled nursing services every 30 to 62 days to conduct a skilled observation of all systems and notify MD of any changes. Review and update medications and monitor for side effects. Supervise the Home Health Aide and update the care plan as necessary. Additionally, the Plan of Care also included orders for Home Health Aide (HHA) services eight hours a day, five days a week to include assistance with bathing, dressing, toileting, grooming, oral care, light housekeeping, and laundry. A review of the home health aide (HHA) timesheets showed that the HHAs' conducted visits eight hours a day, five days a week from 12/01/2021 through 02/04/2022. Further review of the clinical record lacked evidence that the registered nurse conducted onsite supervision of services provided by the home health aide. The record revealed the Registered Nurse conducted telephone supervisory visits on 01/10/2022 and 02/10/2022.</p> <p>The RN failed to perform on-site supervision of the home health aides (HHA) performance of tasks, at least once every sixty-two calendar days.</p>	H 391	<p>1. As a result of the worsening COVID 19 trends nationally and in DC. per the December 2021 DC Coronavirus Covid 19 Key Metric Summary table and the increase Of Reports of Positive COVID 19 from patients and staff and in an effort to protect patients and staff, PHS implemented telehealth Visits for the months of Jan and Feb 2022. The telehealth RN visits occurred During the time the PCA was scheduled.</p> <p>RN completed the In-person patient visit And PCA supervisory visit on 3/14/2022 for Patient #3. (Attachment 2). Effective 3/1/2022, in-person patient Visits and in-person supervisory visits of the PCA resumed</p>	3/14/22
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H 391	<p>Continued From page 4</p> <p>2. A review of Patient #5's clinical record on 03/03/2022 at 10:25 AM, showed a Plan of Care with a service period of 11/01/2021 through 10/31/2022. Further review of the Plan of Care showed the patient had diagnoses to include Heart Failure, Diabetes Mellitus, and Hypertension. The Plan of Care included physician orders for skilled nursing services every 30 to 62 days to conduct a skilled observation of all systems and notify MD of any changes. Review and update medications and monitor for side effects. Supervise the Home Health Aide and update the care plan as necessary. Additionally, the Plan of Care also included orders for Home Health Aide (HHA) services eight hours a day, seven days a week to include assistance with bathing, dressing, toileting, grooming, oral care, light housekeeping, and laundry. A review of the home health aide (HHA) timesheets showed that the HHAs' conducted visits eight hours a day, seven days a week from 01/01/2022 through 02/27/2022. Further review of the clinical record lacked evidence that the registered nurse conducted onsite supervision of services provided by the home health aide. The record revealed the Registered Nurse conducted telephone supervisory visits 01/19/2022 and 02/16/2022.</p> <p>The RN failed to perform on-site supervision of the home health aides (HHA) performance of tasks, at least once every sixty-two calendar days.</p> <p>3. A review of Patient #6's clinical record on 03/04/2022 at 10:10 AM, showed a Plan of Care that was completed 12/02/2021 for the service period of 02/01/2022 through 01/31/2023. Further review of the Plan of Care showed the patient had diagnoses to include Heart Failure, Hemiplegia,</p>	H 391	<p>Effective 4/1/2022, on a monthly basis, the QI nurse will complete a random audit of 25% of electronic health records of patients receiving PCA services to measure compliance with every 62-day PCA supervisory visits</p> <p>Effective 5/1/2022, the compliance data will 5/1 be reported to the Administrator and Clinical Manager. Counseling, coaching and re-orientation of DC 3915.7 will occur when RN noncompliance is noted</p> <p>2. As a result of the worsening COVID 19 trends nationally and in DC. per the December 2021 DC Coronavirus Covid 19 Key Metric Summary table and the increase Of Reports of Positive COVID 19 from patients and staff and in an effort to protect patients and staff, PHS implemented telehealth Visits for the months of Jan and Feb 2022. The telehealth RN visits occurred During the time the PCA was scheduled.</p> <p>RN completed the in-person patient visit and PCA supervisory visit on 3/16/2022 for Patient #3. (Attachment 3). Effective 3/1/2022, in-person patient visits and in-person supervisory visits of the PCA resumed</p> <p>Effective 4/1/2022, on a monthly basis, the QI nurse will complete a random audit of 25% of electronic health records of patients receiving PCA services to measure compliance with every 62-day PCA supervisory visits</p>	<p>4/1/22</p> <p>5/1/22</p> <p>3/16/22</p> <p>4/1/22</p>
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H 391	<p>Continued From page 5</p> <p>and Chronic Kidney Disease (CKD). The Plan of Care included physician orders for skilled nursing services every 30 to 62 days to conduct a skilled observation of all systems and notify MD of any changes, review and update medications and monitor for side effects, supervise the Home Health Aide and update the care plan as necessary. Additionally, the clinical record contained a physician's order for Home Health Aide (HHA) services 16 hours a day, five days a week, to include assistance with bathing, dressing, toileting, grooming, oral care, light housekeeping, and laundry. A review of the home health aide (HHA) timesheets showed that the HHAs' conducted visits sixteen hours a day, five days a week from 12/04/2021 through 02/25/2022. Further review of the clinical record lacked evidence that the registered nurse conducted onsite supervision of services provided by the home health aide. The record revealed the Registered Nurse conducted telephone supervisory visits 01/21/2022 and 02/28/2022.</p> <p>The RN failed to perform on-site supervision of the home health aides (HHA) performance of tasks, at least once every sixty-two calendar days.</p> <p>On 03/04/2022 at 3:00 PM, the Administrator and DON acknowledged the findings.</p>	H 391	<p>Effective 5/1/2022, the compliance data will 5/1 be reported to the Administrator and Clinical Manager. Counseling, coaching and re-orientation of DC 3915.7 will occur when RN noncompliance is noted</p> <p>5/1/22</p> <p>3. As a result of the worsening COVID 19 trends nationally and in DC. per the December 2021 DC Coronavirus Covid 19 Key Metric Summary table and the increase Of Reports of Positive COVID 19 from patients and staff and in an effort to protect patients and staff, PHS implemented telehealth Visits for the months of Jan and Feb 2022. The telehealth RN visits occurred During the time the PCA was scheduled. RN completed the in-person patient visit with beneficiary on 3/4/22. However Patient #3's son Dennis cancelled PCA services for Patient #3 on that day. As a result no on-site supervisory visit occurred. Supervisory visit will occur on the next RN visit in April 2022. (Attachment 4). Effective 3/1/2022, in-person patient Visits and in-person supervisory visits of the PCA resumed</p> <p>3/4/22</p> <p>4/15/22</p> <p>Effective 4/1/2022, on a monthly basis, the QI nurse will complete a random audit of 25% of electronic health records of patients receiving PCA services to measure compliance with every 62-day PCA supervisory visits</p> <p>4/1/22</p> <p>Effective 5/1/2022, the compliance data will 5/1 be reported to the Administrator and Clinical Manager. Counseling, coaching and re-orientation of DC 3915.7 will occur when RN noncompliance noted.</p> <p>5/1/22</p>