

Health Regulation & Licensure Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B WING - - - - - <i>Revised 3/3/18</i>	(X3) DATE SURVEY COMPLETED 02/05/2018
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NAME OF PROVIDER OR SUPPLIER ABA HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 821 KENNEDY STREET, NW WASHINGTON, DC 20011
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(X4) ID TAG PREFIX	SUMMARY STATEMENT OF DEFICIENCIES REGULATORY OR LSC IDENTIFYING INFORMATION (EACH DEFICIENCY MUST BE PRECEDED BY FULL ID PREFIX TAG)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE DEFICIENCY) CROSS-REFERENCED TO THE APPROPRIATE	(X5) DATE COMPLETE
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H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from 01/31/18 through 02/05/18, to determine compliance with the District of Columbia's Home Care Agency Regulations (Title 22 B DCMR Chapter 39). The home care agency provides home care services for two hundred forty-eight (248) patients and employs five hundred twenty-six (526) staff, including professional and administrative staff. The findings of the survey were based on a review of administrative records, complaint and incident reports, twelve (12) active patient records, three (3) discharged patient records, and twenty-seven (27) employee records. The findings were also based on five (5) home visits and (10) telephone interviews with patients/family and staff.</p> <p>The following are abbreviations that may appear throughout the body of this report.</p> <p>CPR - Cardiopulmonary Resuscitation HCA - Home Care Agency HHA- Home Health Aide HR - Human Resources LPN - Licensed Practical Nurse POC - Plan of Care PRN - As Needed SN - Skilled Nurse</p>	H 000	<p>ABA Home Health Care shall endeavor to correct the identified deficiencies as follows:</p> <p>3907.2(d) PERSONNEL</p> <p>The Human Resources (HR) Manager was given the opportunity to review the deficiency and HHA #17's personnel record. HHA # 17 was immediately contacted and he/she provided a current CPR card that has been verified by ABA Home Health Care. The CPR card was filed in HHA #17's Personnel file. (attachment #1)The HR Manager shall review all personnel records as required. The Quality Assurance (QA) personnel shall conduct quarterly audits of personnel records to ensure that CPR Cards and other employment documents are in the employee records, as required. The QA personnel shall forward the findings of the audit to the Clinical Director or Compliance Officer who will ensure that deficiencies are corrected. The Clinical Director/ Compliance Officer will be responsible for ensuring that the quarterly audits are completed. On a quarterly basis, He/she review audit findings and provide support and supervision to HR staff as needed.</p>	04/08/2018
H 148	<p>3907.2(d) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information :</p> <p>(d) Documentation of current CPR certification, if required;</p>	H 148		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Kunger M. Forstner* TITLE *Administrator* (X6) DATE *2/8/18*

STATE FORM 6699 L8GY11 If continuation sheet 1 of 7

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H 148 Continued From page 1

This Statute is not met as evidenced by:
Based on record review and interview, the HCA failed to maintain accurate personnel records, which included documentation of current CPR certification, for one (1) of twenty-seven (27) employees in the sample (Employee #17).

Findings included:

On 02/01/18 at 9:25 AM, review of HHA#17's personnel file failed to show a current CPR certification.

During an interview on 02/01/18 at 2:50 PM, the HR representative acknowledged that the CPR certification was not in Employee #17's personnel file. The HR representative indicated that contact would be made with Employee #17 to submit a current CPR certification card before returning to work. According to the HR representative, the HHA was recently married and not currently working with patients.

At the time of the survey, the HCA failed to ensure that Employee #17's personnel record included a current CPR certification.

H 148

3907.2(n) PERSONNEL

The Human Resources (HR) Manager was given the opportunity to review the personnel record of employees #2, 3 and 5. The employees have been given the opportunity to submitted the missing documents (see attachment #2) Employee #5 is on a three month vacation and will be given the opportunity to submit liability insurance prior to resumption of duty The Quality Assurance (QA) personnel shall conduct quarterly audits of personnel records to ensure that liability insurance and other employment documents are filed in the employee records, as required per ABA Home Health Care Policies. The QA personnel shall forward the findings of the audit to the Clinical Director/Compliance Officer who will ensure that deficiencies are corrected. The Clinical Director/Compliance Officer will be responsible for ensuring that the quarterly audits are completed. On a quarterly basis, he/she review audit findings and provide support and supervision to HR staff as needed.

04/08/2018

H 158 3907.2(n) PERSONNEL

Each home care agency shall maintain accurate personnel records, which shall include the following information:

(n) Documentation of liability insurance , if applicable.

This Statute is not met as evidenced by:
Based on record review and interview, the HCA

H 158

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H 158	<p>Continued From page 2</p> <p>personnel records failed to ensure documentation of liability insurance for three (3) of twenty-seven (27) employees included in the sample (Employees #2, 3, and 5).</p> <p>Findings included:</p> <p>On 02/01/18 at 10:30 AM, review of the personnel records failed to show documentation of liability insurance for the aforementioned contracted staff. At the same time, interview with the HR Director showed that Employees #2, 3 and 5 were independent contractors with the agency.</p> <p>During an interview with the HR Director on 02/01/18 at 12:35 PM, s/he indicated that the HCA's contractors carry their own liability insurance. Additionally, it was indicated that the employees' missing documentation would be forwarded to the Department by the close of business on 02/05/18.</p> <p>On 02/05/18 at the close of business, no information had been received by this office.</p>	H 158	<p>05/4/18</p> <p>3917 9(c) SKILLED NURSING</p> <p>Employee #3 has been re-trained on proper documentation.(See attachment #3&5) All nurses will be trained on comprehensive client assessments and documentation All ABA visiting nurses will treat wound(s) as ordered, measure wound(s) weekly, and show accurate documentation including spending enough time to properly assess and treat wounds. The completed documented evidence will be kept in the patient records in a timely matter. The quality assurance staff are reviewing all clients' clinical records to ensure that the nurses are conducting and documenting a comprehensive assessment of clients' medical needs during all nursing visits. ABA Home Health Compliance Director will conduct an educational class on wound care, documentation, and time management for all professional staff. ABA Home Health Compliance Director will implement wound care competencies to be completed annually and would be responsible in ensuring that the nurses are in compliant to ABA Policies.</p>
H 453	<p>391 7.2(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, the SN failed to ensure that the patient's wound care was performed in accordance with the POC for one (1) of twelve (12) active patients in the sample</p>	H 453	

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H 453	<p>Continued From page 3 (Patient #9).</p> <p>Findings included:</p> <p>On 02/01/18 at 9:50 AM, review of Patient #9's POC showed a certification period from 10/30/17 through 10/30/18. According to the POC, the SN was to provide wound care as follows:</p> <p>"4 visits weekly and PRN x 9. Cleanse left ankle venous ulcer wounds (both lateral wound #1 and medial left wound #2) with AllClenz wound cleanser pad dry with 4x4 dry gauze, apply the topical oxygen wound therapy for 60 - 90 mins, then pack both the lateral and medial left ankle wounds with Medihoney calcium alginate. Cover both wounds with 4x4 gauze, ABO pads, and secure with 2 layer Profore compression bandage. Measure wounds weekly, monitor wounds for infection, and teach infection control. Educate client on how to monitor and care for wounds as needed when nurse is not in duty."</p> <p>Review of the SN visit notes for Patient #9 showed the following:</p> <p>12/27/17 - Employee #3 (LPN) documented "time in" at 4:00 PM and "time out" at 4:52 PM (52 minutes); 12/29/17 - Employee #3 documented "time in" at 3:28 PM and "time out" at 4:19 PM (51 minutes); 01/03/18 - Employee #3 documented "time in" at 4:00 PM and "time out" at 4:51 PM (51 minutes); and 01/05/18 - Employee #3 documented "time in" at 3:35 PM and "time out" at 4:18 PM (43 minutes).</p> <p>For each of the SN visits, the LPN documented that oxygen therapy was applied "for about 60 - 90 minutes", and that each wound dressing was</p>	H 453		
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H 453	Continued From page 4 applied as per the physician order. During an interview on 02/01/18 at 1:17 PM, the Director of Clinical Services said that Patient #9 requested that the wound care dressing be applied in a different order than what the physician order. However, the Director of Clinical Services agreed that the visit time documented on the assessment form was not sufficient for providing the ordered wound care. At the time of survey, the SN failed to perform wound care as ordered.	H 453		
H 454	3917.2(d) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (d) Implementing preventive and rehabilitative nursing procedures; This Statute is not met as evidenced by: Based on interview and record review, the HCA's SN failed to provide evidence that preventive nursing procedures, including blood glucose assessment, were performed to patients related to their health conditions for two (2) of twelve (12) active patients (Patients #7 and #9). Findings included: I. On 02/1/18 at 11:19 AM, review of Patient #9's clinical record showed a POC with certification date from 10/30/17 through 10/30/18. The patient had a multiple diagnoses, which included diabetes with foot ulcers. The POC documented	H 454	3917 (d) SKILLED NURSING The Director of Nursing and the Clinical Staff will ensure that the submitted records reflect documented evidence of blood sugar monitoring on every visit for patient # 7 and #9. Additionally the team will ensure follow up calls to primary Care Physicians, as necessary, when blood sugar levels does not fall within reportable parameters. An in-service training on highlighted importance of meeting ABA Policy section C-150 requirement for Management of Hyper/hypoglycemia will be conducted with all nurses to ensure compliance. The Clinical Director, Director of Nursing and QA team will ensure that, going forward, all submitted RN or LPN notes for diabetic patient, must include documented evidence of blood sugar assessment during each nursing visit. <i>(See Attachment H+5)</i>	04/08/2018

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H 454	<p>Continued From page 5</p> <p>orders for the nurse to perform skilled visits four (4) times per week for assessment and wound care, and to contact the physician if the patient's blood glucose value was greater than 300 or less than 60. Review of the nurse assessment forms failed to provide documented evidence that the nurse assessed the patient's blood glucose levels on the following dates:</p> <p>11/21/17; 12/27/17; 12/29/17; 01/03/18; and 01/05/18.</p> <p>II. On 02/1/18 at 11:41 AM, review of Patient #7's clinical record showed a POC with certification date from 01/05/17 through 01/05/18. The patient had multiple diagnoses, which included diabetes. The POC documented orders for the nurse to perform skilled visits monthly for patient assessment, and to contact the physician if the patient's blood glucose value was greater than 300 or less than 60. Review of the nurse assessment forms failed to provide documented evidence that the nurse assessed the patient's blood glucose levels on the following dates:</p> <p>10/09/17; 11/06/17; 12/13/17; and 01/18/18.</p> <p>At 12:40 PM, the Director of Clinical Services stated that the nurses should document the patient's actual or reported blood glucose during the skilled nurse visit.</p> <p>At the time of this survey, there was no documented evidence that the SN assessed the</p>	H 454		
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H 454	Continued From page 6 blood glucose for Patients #7 and #9.	H454		
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