

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/04/2015
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APR 27 2015
C. M. [Signature]

NAME OF PROVIDER OR SUPPLIER ALLIANCE HOME HEALTH CARE & EQUIPMEN	STREET ADDRESS, CITY, STATE, ZIP CODE 7826 EASTERN AVENUE NW, SUITE 406 WASHINGTON, DC 20012
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H 000 INITIAL COMMENTS

An annual survey was conducted from March 2, 2015, through March 4, 2015, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to two hundred and sixty-five (265) patients and employs four hundred and forty-seven (447) employees. The findings of the survey were based on observations, record reviews and interviews with patients and staff.

Please Note: Listed below are abbreviations used in this report.

- Director of Nursing - DON
- Home Care Agency - HCA
- Identification - ID
- Information Technology-IT
- Plan of Care - POC
- She/He - s/he
- Start of Care -SOC

H 149 3907.2(e) PERSONNEL

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

(e) Health certification as required by section 3907.6;

This Statute is not met as evidenced by:
Based on record review and interview, the HCA failed to ensure one (1) of fifteen (15) employees had a current health certification. (Employee #6)

The finding includes:

H 000

3907.2(e) PERSONNEL

Employees affected by deficient practice:

Employee # 6

Alliance Home Health Care acknowledges that the above employee was missing some documentation in her personnel charts. Alliance Home Health Care contacted this employee and was able to retrieve all the document. Employee was counseled going forward to bring documentation on time to the office so the charts will be updated.

04/04/15

Systemic Change:

This policy will be reviewed with all new hires and existing employees during annual in services to comply in order to maintain continued employment with the agency. The agency also will generate bi weekly a report to filter out employees whose paper is not current or missing and issue them notices of compliance to secure employment with the agency.

H 149

Health Regulation & Licensing Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Ephraim Molaison

ADMINISTRATOR

03/18/15

STATE FORM

8869

71B211

If continuation sheet 1 of 7

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H 149	Continued From page 1 A review of personnel files on March 2, 2015, beginning at 2:00 p.m., revealed no evidence of a current health certification for Employee #6. Interview with the administrator on March 4, 2015, at 3:20 p.m., revealed he was not able to find Employee #6's health certificate.	H 149	Quality Assurance Measure: In order to determine compliance, the agency generates a report on the required event to make sure which employee's record is complete. When employees bring required documents two employees review them to ensure the compliance is met. The first employee record the documents in the system while the second employee files them at the appropriate chart. 3907.2 (h) PERSONNEL Employees affected by deficient practice: Employee # 7 Alliance Home Health Care understood the need for annual evaluation to be done for each employee. Employee#7 was contacted and the yearly annual evaluation was completed accordingly. Systemic Change: The agency also will generate bi weekly a report to filter out employees whose evaluation will be due and will be contacted accordingly to perform their annual evaluation.	04/04/15
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 review of personnel records and interview, the HCA failed to ensure that each employee personnel records included completed annual evaluations, for one (1) of fifteen (15) employees in the sample. (Employee #7) The finding includes: On March 2, 2015, starting at 2:00 p.m., a review of Employee #7's personnel record failed to evidence an annual evaluation. Interview with the administrator on March 4, 2015, at 3:20 p.m., revealed he was not able to find Employee #7 annual evaluation.	H 152		
H 170	3907.11 PERSONNEL Each home care agency shall ensure that each employee or contract worker shall present a valid agency identification prior to entering the home of	H 170		

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H 170	<p>Continued From page 2 a patient.</p> <p>This Statute is not met as evidenced by: Based on an observation and interview, the HCA staff failed to present a valid agency ID card or badge prior to entering the home of each patient, for five (5) of five (5) employees. (Employees #1, #2, #3, #4 and #5)</p> <p>The findings include:</p> <p>The facility failed to ensure all employees possessed a valid agency ID card prior to entering the patients home, as evidenced below:</p> <p>On March 4, 2015, observations conducted during home visits from 10:20 a.m. to 3:00 p.m., revealed Employees #1, #2, #3, #4 and #5 failed to present their ID cards prior to entering the patients home.</p> <p>Interview with Employees #1, #2, #3 and #4 on the same day between 10:20 a.m. to 2:00 p.m. revealed the agency did not issue ID cards or badges prior working with the patients in their homes. Interview with all five (5) patients all confirmed the aforementioned employees interview. When asked, the aforementioned employees stated that they had been employed with the agency and working with their patients for approximately one (1) year or longer. At 2:33 p.m., interview with Employee #5 revealed that he/she had an agency ID, but left the ID at home.</p> <p>On March 4, 2015, at approximately 3:05 p.m., an interview was conducted with the agency's administrator, via telephone. The surveyors</p>	H 170	<p>Quality Assurance Measure: 04/04/15</p> <p>In order to ensure that employees comply with this policy, a second report will be run within fifteen (15) days to determine they have complied with the request. They will be notified the need for yearly evaluation to maintain continued employment with the agency.</p> <p>3907.11 PERSONNEL</p> <p>Employees affected by deficient practice:</p> <p>Employee #1, 2, 3, 4, 5</p> <p>Alliance is currently in the process of issuing agency ID for its employees. The agency acknowledges that this problem should be avoided so we can be able to print name badges from the office. The agency spent significant amount of money to buy the machine and due to some technical error was not able to print IDs.</p>	
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H 170 Continued From page 3

revealed to the administrator that Employees #1, #2, #3, #4 and #5 did not have ID cards and/or badges on them at the time of the home visits. The administrator immediately stated that the agency were having problems with their new ID machine and that the agency's IT would be out to fix it this weekend.

This is a repeat deficiency.

H 170

3912.2(d) PATIENTS RIGHTS & RESPONSIBILITIES

Patients affected by deficient practice:

04/04/15

Patient #7

Alliance Home Health Care acknowledges the deficient practice on patient #7. The reason for most of the dates and hours missed was not documented. Going forward, when employees call the office to report they leave early the agency will contact the patient and documents the reason for early departure. At the same time if there was no visit made for a specific date Alliance Home Health Care will document the reason to justify the absence for that day.

Systemic Change:

This policy will be reviewed with all new hires and they will be notified of the need to comply in order to maintain continued employment with the agency. Also, this issue will be addressed on the next inservice that will be conducted for our Home Health Aide.

Quality Assurance Measure:

As part of the quality assurance measure the Alliance Home Health Care will randomly review actual time sheets to check for missed hours or dates. Alliance then contacts the patient and the

H 300 3912.2(d) PATIENT RIGHTS & RESPONSIBILITIES

H 300

Each home care agency shall develop policies to ensure that each patient who receives home care services has the following rights:

(d) To receive treatment, care and services consistent with the agency/patient agreement and with the patient's plan of care;

This Statute is not met as evidenced by: Based on interview and record review, the HCA failed to implement their policy on patient rights and responsibilities to ensure that all patients receive HHA services in accordance with the POC, for one (1) of ten (10) patients who received HHA services. (Patient #7)

The finding includes:

On March 3, 2015, at approximately 11:00 a.m., review of Patient #7's POC with a certification date of September 20, 2014 through March 20, 2015, revealed that Patient #7 was to receive HHA services eight (8) hours a day, seven (7) days per week.

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H 300	Continued From page 4 Further review of the record revealed the following: - HHA weekly visit record dated November 3, 2014 to November 9, 2014 revealed six (6) hours of HHA service was provided on November 7, 2014. - HHA weekly visit record dated December 1, 2014 to December 7, 2014 revealed zero (0) hours of HHA service was provided on December 6, 2014 and December 7, 2014. - HHA weekly visit record dated December 15, 2014 to December 22, 2014 revealed six (6) hours of HHA service was provided on December 19, 2014. During a face to face interview on March 3, 2015, at 11:50 a.m., the administrator stated that the HHA will have to look for the visit records for the missing hours. There was no additional information provided to the survey at the conclusion on the survey on March 4, 2015.	H 300	employee to document the cause for those missed dates and hours. Employee who fails to inform the office for missed hours or dates will be counseled not to make a repeat offence to maintain continued employment. 3914.4 PATIENT PLAN OF CARE Patients affected by deficient practice: Patient #4 and 5 Alliance Home Health Care realizes the two referenced patients' plan of cares were not signed. Patient #5 plan of care was signed and returned the next day after the finding was made. The home care coordinator is working on the plan of care for patient #4 to be signed by the primary care physician who is out of town currently. Alliance Home Care has tried for the plan of care to be signed by the ordering physician from Brinton Woods Nursing home and the doctor refused to sign citing that he is not the primary care physician of patient#4. Our home care coordinator is still working with the social worker from Brinton Woods who stated that she would talk to this doctor to have the plan of care signed. During the survey, Alliance staff discussed some of the concern they have with doctors refusing to sign the plan of care even after they ordered home care services for	04/04/15
H 366	3914.4 PATIENT PLAN OF CARE 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.	H 366		

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H 366	Continued From page 5 This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to ensure that patients POC's were approved and signed by a physician within thirty (30) days of the SOC, for two (2) of ten (10) patients in the sample. (Patients #4 and #5) The finding includes: 1. On March 2, 2015, at approximately 3:05 p.m., review of Patient #4's record revealed a POC with a SOC date of January 28, 2015. The POC failed to evidence approval by and signature of a physician. 2. On March 2, 2015, at approximately 2:30 p.m., review of Patient #2's record revealed a POC with a SOC date of January 16, 2015. The POC failed to evidence approval by and signature of a physician. During an interview with the DON on March 4, 2014, at approximately 3:20 p.m., the DON indicated that the HCA will have the POC's signed by the patient's physicians as soon as possible.	H 366	their patients. We are still searching for CMS guidelines about the doctor's obligation to sign the plan of care at least for the initial order they requested rather than shifting it to the primary care physician. Systemic Change: Alliance Home Health Care agency going forward will not open new cases unless we receive a confirmation from the ordering physician or their staff to assure us that the plan of care will be signed in case the primary care physician is not available or cannot sign them. The home care coordinator will be in charge of this assignment and unless we receive confirmation, new cases will not be opened	04/04/15
H 457	3917.2(g) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (g) Recording progress notes at least once every thirty (30) calendar days and summary notes at least once every sixty-two (62) calendar days; This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to ensure that the skilled nurse	H 457	Quality Assurance Measure: The Director of Nursing (DON) will on a monthly basis review thirty percent (30%) of the clinical records to determine compliance with this policy. The DON will also review the report that was generated by the system to make sure that all plan of care are in good standing. 3917.2 (g) SKILLED NURSING SERVICES Patients affected by deficient practice: Patient #7 Alliance Home Health Care recognizes the need for sixty two (62) days	

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H 457	<p>Continued From page 6</p> <p>documented a progress note at least every thirty (30) days for one (1) of ten (10) patients in the sample. (Patient #7)</p> <p>The findings include:</p> <p>1. On March 3, 2015, at approximately 11:35 a.m., review of Patient #7 's record revealed a SOC date of March 20, 2014. Further review of the record failed to evidence skilled nursing progress notes.</p> <p>During an interview with the administrator on March 3, 2015, at approximately 11:50 a.m., the administrator indicated that the HHA would search for the missing nurse progress notes. There was no additional information provided to the survey at the conclusion on the survey on March 4, 2015.</p>	H 457	<p>progress notes to determine the patients' health status. The deficiency on patient #7 has been corrected immediately. The employee has been contacted and counseled on the findings so it will be corrected going forward.</p> <p>Alliance Home Health Care will conduct an inservice to all its nursing staff and the topics include the importance of progress notes and their responsibility to document them to maintain continued employment with the agency.</p> <p>Systemic Change:</p> <p>This policy will be reviewed with all new hires and they will be notified of the need to comply in order to maintain continued employment with this agency.</p> <p>The DON will conduct supervisory visits on the clinical staff to ensure compliance and educate the staff, as identified.</p> <p>Quality Assurance Measure:</p> <p>The DON will on monthly basis review fifty percent (50%) of the clinical records to make sure all the progress notes are documented in a timely fashion. Once clinical records that lack sixty two days progress report are identified, staff will be notified of the findings and will be required to correct the deficiency immediately.</p>	04/04/15
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