

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 03/04/2016
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	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) (X5) COMPLETE DATE
H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from March 3, 2016 through March 4, 2016, 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 thirty (230) patients and employs four hundred fifty (450) staff to include professional and administrative staff. The findings of the survey were based on a review of administrative records, twelve (12) active patient records, three (3) discharged patient records, fifteen (15) employee records, (25) complaints, five (5) home visits, ten (10) patient telephone interviews and interviews with patients/family and staff.</p> <p>The following are abbreviations used within the body of this report:</p> <p>DON - Director of Nursing HCA - Home Care Agency HHA - Home Health Aide OT - Occupational Therapist POC - Plan of Care SN - Skilled Nurse</p>	H 000	<p>3907.2 (e) PERSONNEL</p> <p>Employees affected by the deficient practice:</p> <p>HHA #5 and Skilled Nurse #1</p> <p>Alliance Home Health Care acknowledges the deficient practice in that the health certificate for HHA #1 and Skilled Nurse #1 is missing. The agency contacted the referenced employees and retrieved the health certificate that was missing from their charts.</p> <p>The employees were also counseled that continued employment can only be secured if they are complying with the rules set forth by the agency which includes timely submission of the required documents.</p> <p>Systemic Change:</p> <p>The agency will generate a report with employees whose documents are about to expire and provide them a notice of compliance within two weeks from the date they receive the notice. The office then follows up to determine if required documents are returned as instructed. Those without compliance will be suspended until such time they</p>
H 149	<p>3907.2(e) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(e) Health certification as required by section 3907.6;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA</p>	H 149	<p>04/05/16</p>

Health Regulation & Licensing Administration

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

TITLE

(X6) DATE

Sherron Madalige

ADMINISTRATOR

03/24/16

STATE FORM

0099

KCBW11

If continuation sheet 1 of 9

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H 149	<p>Continued From page 1</p> <p>failed to ensure two (2) of fifteen (15) employees had a current health certification. (HHA #5 and Skilled Nurse #1)</p> <p>The finding includes:</p> <p>A review of personnel files on March 3, 2016, beginning at 11:20 a.m., revealed no evidence of a current health certification for Skilled Nurse #1 and HHA #5.</p> <p>Interview with the administrator on March 3, 2015, at 4:00 p.m. revealed he/she was not able to find Skilled Nurse #1 and HHA #5's health certificates</p>	H 149	<p>comply with the request. Employees who commit repeated offence will be terminated.</p> <p>This policy will be reviewed with all new hires and existing employees during in service and orientation in order to obtain continued employment with the agency.</p> <p>Quality Assurance Measure:</p>	04/05/16
H 150	<p>3907.2(f) PERSONNEL</p> <p>Each home care agency shall maintain accurate personnel records, which shall include the following information:</p> <p>(f) Verification of previous employment;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to ensure that all personnel records of HHAs included documentation showing verification of previous employment, for three (3) of eight (8) HHAs in the sample. (HHA #1, #4 and #8)</p> <p>The findings include:</p> <p>1. The HCA's personnel records were reviewed on March 3, 2016, between 11:40 a.m. and 12:40 a.m.. The review revealed the following that HHA #1 was employed on October 6, 2015. There was</p>	H 150	<p>assistant goes through the physical chart of the employees to verify there is no discrepancy between the report generated and the required documents in the personnel charts. Once the verification is complete and if the paper work is missing from the chart, the employee will be contacted to produce them within the specified time frame which is two weeks.</p> <p>3907.2 (f) PERSONNEL</p> <p>Employees affected by the deficient practice:</p> <p>HHA#1, #4 and #8</p> <p>Alliance Home Health Care acknowledges the deficient practice in that it failed to obtain verification of</p>	

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H 150 Continued From page 2

no documented evidence that the HCA received verification of previous employment for HHA #1.

2. Review of HHA #4's application revealed that he/she was employed on November 6, 2015. There was no documented evidence that the HCA received verification of previous employment for HHA #4.

3. Review of HHA #8's application revealed that he/she was employed February 2, 2015. There was no documented evidence that the HCA received verification of previous employment for HHA #8.

During a face to face interview with the administrator on March 3, 2016, at approximately 4:15 p.m., the administrator indicated that he/she was aware that the agency should have checked previous employment references.

At the time of the survey, the HCA failed to ensure that all staff personnel records met the requirements outlined in this section for HHA #1, HHA #4 and HHA #8.

H 151 3907.2(g) PERSONNEL

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

(g) Documentation of reference checks;

This Statute is not met as evidenced by: Based on record review and interview, it was determined that the HCA failed to maintain accurate personnel records, which included

H 150

previous employment. Going forward, all new applicants previous employment will be verified before being hired.

Systemic Change:

Going forward, the agency will designate an office employee solely responsible to fax and make a call to verify previous employment of new applicant with our agency. Applicants also will be reminded to provide valid information with current phone number and person to contact at the place where they have worked in the past. Applicants' case will be on hold until the agency receives a valid verification of previous employment.

Quality Assurance Measure:

The administrative assistant will review the new applicants charts to make sure all the requirement are completed including previous employment verification before they are hired.

The administrator then will have a final review of the employee charts to ensure all the requirements are met. The new charts will then be handed to the staffing coordinator who will be assigning the case to the new employees.

04/05/16

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H 151	Continued From page 3 documentation of reference checks for three (3) of eight (8) HHA's personnel records reviewed in the sample (HHA #1, HHA#4 and HHA #8). The finding includes : On March 3, 2016, records beginning at 11:20 a.m., review of the agency's personnel records revealed no evidence of reference checks for HHA #1, HHA #4 and HHA #8'. During a face to face interview on March 3, 2016, with the administrator and the DON beginning at 4:05 p.m., it was verified that HHA #1, HHA #4 and HHA #8 did not have reference checks. At the time of the survey, there was no documented evidence of reference checks conducted for HHA #1, HHA #4 and HHA #8.	H 151	3907.2 (g) PERSONNEL Employees affected by the deficient practice: HHA#1, #4 and #8 Alliance Home Health Care acknowledges the deficient practice in that it failed to obtain reference check for the new applicants before being employed. Going forward, all new applicants reference checks will be verified by a designated employee. 04/05/16	
H 459	3917.2(i) SKILLED NURSING SERVICES Duties of the nurse shall include, at a minimum, the following: (i) Patient instruction, and evalutaion of patient instruction; and This Statute is not met as evidenced by: Based on interview and record review, the SN's failed to document the specific level of the patient's understanding of the instructions given for seven (7) of the fifteen (15) patients in the sample (Patient #9, #10, #11, #12, #13 #14 and #15). The findings include:	H 459	Systemic Change: Going forward, the agency will designate an office employee solely responsible to check references that new hires indicated in their application. Applicants will also be reminded to provide valid information with current phone number and person to contact. Applicants will not be offered a job for any information that the agency cannot have access to inquire about them.	

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H 459	<p>Continued From page 4</p> <p>A. On March 3, 2016, at 11:25 a.m., review of Patient #9's POC dated October 23, 2015, through October 23, 2016, indicated that SN #1 was to instruct Patient #9 on the following:</p> <p>Disease process and management; Diet; Hydration and Safety precautions.</p> <p>On March 3, 2016, at 11:35 a.m., review of Patient #9's Nursing Clinical Note dated December 18, 2015, indicated that SN #1 provided health teaching instructions on safety precautions related to the patient standing up from a sitting position. However, SN #1 failed to document Patient #9's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>B. On March 3, 2016, at 11:45 a.m., review of Patient #10's POC dated July 31, 2015, through July 31, 2016, indicated that SN #2 was to instruct Patient #10 on the following:</p> <p>Medication management; Diet; Nutrition; Disease management and Safety precautions at home.</p> <p>On March 3, 2016, at 11:55 a.m., review of Patient #10's Nursing Clinical Notes dated December 16, November 25 and October 8, 2015, indicated that SN #2 provided health teaching instructions on medication compliance and safety precautions. However, SN #2 failed to document Patient #10's/caregiver's level of understanding with the aforementioned health</p>	H 459	<p>Quality Assurance Measure:</p> <p>The administrative assistant will review the new applicants charts to make sure all the requirement are completed including the references they provided before they are hired.</p> <p>The administrator then will have a final review of the employee charts to ensure all the requirements are met. The new charts will then be handed to the staffing coordinator who will be assigning the case to the new employees.</p> <hr/> <p>3917.2 (i) SKILLED NURSING SERVICES.</p> <p>A. B. C. D. E. F. G.</p> <p>Patients affected by the deficient practice:</p> <p>Patient # 9, #10, #11, #12, #13, #14 and #15</p> <p>Alliance Home Health Care Agency conducted a one on one counseling on SN #1 and SN#2 in regards to the identified deficient practice which lacks documentation of specific level of patient's understanding on instruction provided to them.</p>	04/05/16
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H 459	<p>Continued From page 5</p> <p>teaching instructions.</p> <p>C. On March 3, 2016, at 12:15 p.m., review of Patient #11's POC dated October 6, 2015, through October 6, 2016, indicated that SN #2 was to instruct Patient #10 on the following:</p> <p>Medication management; Disease process and management; Diet; Management; Hydration and Safety precautions at home.</p> <p>On March 3, 2016, at 12:25 p.m., review of Patient #11's Nursing Clinical Notes dated January 21, 2016, December 16, 2015, and November 25, 2015, indicated that SN #2 provided health teaching instructions on safety precautions, hydration and HHA responsibilities. However, SN #2 failed to document Patient #11's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>D. On March 3, 2016, at 1:10 p.m., review of Patient #12's POC dated November 21, 2015, through November 21, 2016, indicated that SN #1 was to instruct Patient #12 on the following:</p> <p>Disease process management; Diet; Safety; Hydration and Medication management.</p> <p>On March 3, 2016, at 1:25 p.m., review of Patient #12's Nursing Clinical Notes dated January 19, 2016, November 13, 2015, and December 21, 2015, indicated that SN #1 provided health teaching instructions on diet management,</p>	H 459	<p>A one to one counseling was conducted to SN#1 and SN#2 who were involved in providing care and the findings were discussed. The nurses acknowledge the deficient practice and the importance of proper documentation to determine the level of understanding of their patients.</p> <p>In the future SN# 1 and SN#2 will incorporate documentation of specific level of patients' understanding when assessing their patients.</p> <p>Alliance Home Health Care Agency acknowledges the importance of proper nursing documentation which plays and going forward will enforce this policy across the board for all clinical staffs.</p> <p>Systemic Change:</p> <p>Upon hire, the agency will review this policy with new hires to ensure they understand the importance proper documentation of nursing assessment.</p> <p>All employees will be notified of the need to comply in order to maintain continued employment with the agency.</p>	04/05/16
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H 459	<p>Continued From page 6</p> <p>hydration and home safety. However, SN #1 failed to document Patient #12's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>E. On March 3, 2016, at 1:40 p.m., review of Patient #13's POC dated October 7, 2015, through October 7, 2016, indicated that SN #1 was to instruct Patient #12 on the following:</p> <p>Medication management; Disease process and management; Diet; Home safety Elimination and Hydration.</p> <p>On March 3, 2016, at 1:56 p.m., review of Patient #13's Nursing Clinical Notes dated February 17, 2016, November 25 and October 28, 2015, indicated that SN #1 provided health teaching instructions on medication management, home safety and the importance of keeping his/her physician's appointments. However, SN #1 failed to document Patient #13's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>F. On March 3, 2016, at 2:40 p.m., review of Patient #14's POC dated October 17, 2015, through October 17, 2016, indicated that SN #1 was to instruct Patient #14 on the following:</p> <p>Disease process and management; Medication management; Diet; Hydration; Elimination; and Safety precautions.</p>	H 459	<p>By April 2016, the DON will provide an in-service to all nurses and address the importance of patient's response documentation.</p> <p>The goal of the agency is to establish compliance with the existing regulation and policy to avoid the recurrence of the deficient practice.</p> <p>Quality Assurance Measure:</p> <p>In an effort to mitigate the occurrence of this deficient practice, The DON will review 50% of patients' charts. While reviewing the charts, the DON mainly focuses on the nursing clinical notes with nursing teaching and documented patients' responses.</p> <p>If the DON observes lack of documentation of patients' response, the responsible employee will be contacted to ensure the clinical records reflect appropriate documentation moving forward.</p> <p>Employees with consistent failure of proper documentation will be suspended or terminated and will not be able to practice skilled nursing activity with Alliance Home Health Care Agency.</p>	04/05/16
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H 459	<p>Continued From page 7</p> <p>On March 3, 2016, at 2:55 p.m., review of Patient #14's Nursing Clinical Notes dated January 19, 2016, December 24, November 13, October 21, 2015, indicated that SN #1 provided health teaching instructions on medication management and home safety. However, SN #1 failed to document Patient #14's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>G. On March 3, 2016, at 3:15 p.m., review of Patient #15's POC dated July 23, 2015, through July 23, 2016, indicated that SN #1 was to instruct Patient #15 on the following:</p> <p>Disease process and management; Pain management; Medication management; Diet; Safety; Hydration and 911 protocols.</p> <p>On March 3, 2016, at 3:45 p.m., review of Patient #15's Nursing Clinical Notes dated January 19, 2016 and December 24, November 13, October 29, September 11, and August 12, 2015, indicated that SN #1 provided health teaching instructions on medication management and fall precautions. However, SN #1 failed to document Patient #15's/caregiver's level of understanding with the aforementioned health teaching instructions.</p> <p>During a face to face interview with the DON on March 3, 2016, at approximately 4:00 p.m., it was acknowledged that SN #1 and SN #2 failed to document Patient #9, #10, #11, #12, #13, #14 and #15's/caregiver's level of understanding with the aforementioned health teaching instructions.</p>	H 459	<p>The corrective action to this identified deficient practice will be monitored monthly by the Director of Nursing to improve the quality of services and to ensure that the deficient practice does not recur.</p>	04/05/16
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H 459	Continued From page 8 Further interview revealed that the nursing staff would be re-trained on how to accurately document the evaluation of the instructions provided in the patient's medical records. At the time of the survey, the HCA failed to provide documented evidence of the level of the patient's understanding of the instructions given in the medical record.	H 459		04/05/16
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