

Health Regulation & Licensing Administration

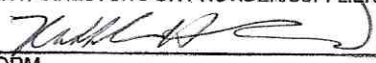
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0013	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/27/2013
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NAME OF PROVIDER OR SUPPLIER AMERICARE-IN-HOME NURSING CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 4000 ALBEMARLE STREET, NW, 2ND FLOOR WASHINGTON, DC 20016
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H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted at your agency from December 26, 2013, through January 2, 2014, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to seventy-five (75) patients and employs twenty-two (22) staff to include registered nurses, licensed practical nurses, home health aides, physical therapists, occupational therapists, and other administrative staff. The findings of the survey were based observations, interviews and record reviews.</p> <p>Please Note: Listed below are abbreviations used in this report.</p> <p>Americare In Home Nursing (AIHN) Skilled Nurse (SN) Plan Of Care (POC) Nursing Visit Notes (NVNs) Care Giver (CG) Director of Operations (DOO) Performance Improvement Director (PID) Supplemental Order (SO) Left Below Knee Amputation (LBKA) Home Care Agency (HCA)</p>	H 000	<p>What corrective action (s) will be Accomplished to address the identified deficient practice;</p> <p>Americare's PI Director will re-inservice RN's responsible for writing P.O.C.'s on completeness of orders. This will include SOC/ROC/Recert OASIS. This inservice will emphasize current, accurate wound care orders.</p> <p>What measures will be put into place or what systemic changes will you make to ensure that the deficient practice does not recur;</p>	1/30/14
H 352	<p>3914.3(a) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(a) Physician orders for skilled services;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to ensure the POC included physician orders for wound care management for one (1) of three (3) patients in the sample receiving wound</p>	H 352	<p>PI Director will inservice all those that write POC to double check the POC after being written to make sure that if patient has wound care that it is documented on the POC and that it is correct wound care being done before sending POC to physician for signature.</p>	1/30/14

Received 1/27/14
Department of Health
Health Regulation & Licensing Administration
Intermediate Care Facilities Division
899 North Capitol St., N.E.
Washington, D.C. 20002

Health Regulation & Licensing Administration
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE

Executive Director

(X6) DATE

1/13/14

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H 352	Continued From page 1 care. (Patient #3) The finding includes: Review of Patient #3's POC with a certification period of December 14, 2013, to February 11, 2014, on December 26, 2013 at approximately 11:45 a.m., revealed the patient had diagnoses that included a LBKA and a pressure ulcer on the right heel. However, there was no documented evidence of a physician's order's for the SN to perform wound care to Patient #3's left below knee amputation wound and right heel decubitus on the POC.	H 352	How the corrective action (s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be implemented. Americare's PI Director or designee will perform audits on POC's written, to evaluate if corrective actions have been implemented prior to sending to the physician. Orders will be checked and compared to OASIS Recert, ROC and/or SOC	1/30/14
H 450	3917.1 SKILLED NURSING SERVICES Skilled nursing services shall be provided by a registered nurse, or by a licensed practical nurse under the supervision of a registered nurse, and in accordance 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 ensure the SN provided wound care services and wound care measurements in accordance with the patient's POC for two (2) of three (3) patients in the sample receiving wound care. (Patient # 2 and #3) The findings include: 1. The agency's SN failed to provide evidence that Patient #2 received wound care management and wound measurements as ordered on the POC.	H 450	What corrective action (s) will be accomplished to address the identified deficient practice; The PI Director or designee will re-inservice the clinical staff on the importance and need to follow MD orders for all wound care, along with appropriate ordered SN frequency. Instruction will be given about wound measurements on a required weekly basis and the requirement of documentation of the wound measurements. Also if a wound is healed, this does require documentation and documentation of the physician being informed. SN's will also be re-inserviced on need to make sure they are checking on patient's pain status and documenting this on all notes and also documenting neurologic assessments on notes as ordered on patients POC	1/30/14

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H 450	<p>Continued From page 2</p> <p>Review of Patient #2's POC with a certification period of November 9, 2013 to January 7, 2014, on December 26, 2013, at approximately 11:00 a.m., revealed the patient had a principal diagnosis of "pressure ulcer, lower back". Further review revealed a physician order dated November 13, 2013, which stated "clean sacral wound with soap and water, dry apply zinc oxide and cover with dry dressing or hydrocolloidal dressing 2-3 times weekly, SN, C/G." Additionally, the SN was to "measure wounds for depth, width, length weekly, instruct patient/family in wound care".</p> <p>Review of Patient #2's NVNs dated and November 26, 2013, on December 26, 2013, between 11:10 a.m. and 11:30 a.m., revealed no documented evidence that the SN provided wound care services 2 to 3 times weekly as ordered by the POC. Additionally, there was no documented evidence that the SN measured Patient #2's wounds weekly according to the POC.</p> <p>2. The agency's SN failed to provide evidence that Patient #3 received wound care management, wound measurements and pain/neurological assessments as ordered on the POC.</p> <p>a. Review of Patient #3's POC with a certification period of October 15, 2013, to December 13, 2013, on December 26, 2013 at approximately 11:45 a.m., revealed the patient had diagnoses that included a LBKA wound and a pressure ulcer on the right heel. Review of a SO dated November 26, 2013, on December 26, 2013 at approximately 11:56 a.m., revealed an order for wound care to the right heel decubitus. Further</p>	H 450	<p>What measures will be put into place or what systemic changes will you make to ensure that the deficient practice does not recur;</p> <p>The PI Director will instruct all SN team members to review their SN notes to confirm that their documentation contains weekly wound measurement along with pain and neurologic assessments.</p>	1/30/14
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H 450	<p>Continued From page 3</p> <p>review revealed that the SN was to clean right heel with normal saline, dry, apply dry dressing 2 to 3 times weekly. However once Regranex gel arrives, clean wound with normal saline, apply Regranex gel and cover with dry dressing 2 to 3 times weekly.</p> <p>Review of the NVNs dated November 30, 2013, through December 13, 2013, on December 26, 2013, between 12:15 p.m. to 12:25 p.m., revealed no documented evidence that the patient's right heel decubitus was treated with Regranex gel as ordered.</p> <p>b. Additional review of the POC revealed that the SN was to measure Patient #3's LBKA wound and right heel decubitus for depth, width and length weekly.</p> <p>Review of the AIHN wound care form dated October 15, 2013, on December 26, 2013, at approximately 1:10 p.m., revealed that Patient #3's LBKA wound and pressure ulcer on the right heel were measured by the SN. Review of the NVN dated December 14, 2013, on December 26, 2013, at approximately 1:05 p.m., revealed Patient #3's wounds were not measured. There was no documented evidence that the patient's wounds were measured as prescribed on November 26, 2013.</p> <p>c. Additionally, the SN was to conduct pain and neurological assessments during every home visit. Review of the NVN dated December 14, 2013, on December 26, 2013, at approximately 1:15 p.m., revealed the SN failed to conduct an assessment of the Patient #3's neurological and pain status according to the POC.</p> <p>During a face to face interview with the DOO and</p>	H 450	<p>How the corrective action (s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be implemented.</p> <p>The PI Director or designee will be responsible for random audits to ensure that the SN staff is documenting according to policy, targeting weekly measurements for pain and neurological assessments. This will be done on an ongoing basis. issues found will require additional individual inservices.</p>	1/30/14

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H 450	Continued From page 4 PID confirmed the findings of the surveyors. The DOO stated that an in-service would be held with the wound care nurse to reiterate the importance of completing and documenting the patient's wound care management, wound measurements and pain/neurological assessments according to the POC.	H 450		