

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  CPA-0073	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  R 09/17/2014
--	--	--	---

NAME OF PROVIDER OR SUPPLIER  HOLY CROSS CHILD PLACEMENT AGENCY INC	STREET ADDRESS, CITY, STATE, ZIP CODE 4900 CONNECTICUT AVENUE NW WASHINGTON, DC 20008
---	---

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>Initial Comments</p> <p>Due to this Child Placing Agency's history of overall compliance with applicable regulations (22 DCMR, Chapter 16), the Department of Health, Health Regulation and Licensing Administration conducted an abbreviated monitoring survey on September 17, 2014.</p> <p>The survey findings were based on staff interview and a review of records. The sample sizes were one (1) personnel employee record based on a census of one employee (1); and, four (4) home study files, based on a census of four (4) adoptive families.</p>	S 000	<p>Department of Health Health Regulation &amp; Licensing Administration Intermediate Care Facilities Division 800 North Capitol St., N.E. Washington, D.C. 20002 10/21/14</p>	
S 252	<p>1620.7 Adoptive Home Study Services</p> <p>If a placement has not been made and twelve (12) months have elapsed since the adoptive home study, a prospective adoptive home shall be re-evaluated.</p> <p>This CONDITION is not met as evidenced by: Based on interview and record review, the Child Placing Agency failed to conduct a timely re-evaluation of each prospective adoptive home, for one (1) of the four (4) families being served. (Family #1)</p> <p>The finding includes:</p> <p>On September 17, 2014, beginning at 9:35 a.m., interview with the agency's executive director (ED) revealed that there were four (4) families waiting to adopt children. She further stated that it was agency policy to obtain annual medical evaluations and criminal background checks from prospective adoptive parents.</p> <p>On September 17, 2014, beginning at</p>	S 252	<p>Due to circumstances outside of this agency's control the family delayed the adoption process. As of September 5, 2014, they have indicated obtaining a new adoption home study, and Holy Cross has</p>	

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

TITLE

(X6) DATE

STATE FORM

*Sally M. Minshew*  
2x2c Director

2x2c Director  
Sept 22, 2014

6899

LX1811

If continuation sheet 1 of 2

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>CPA-0073</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  R <b>09/17/2014</b>
--	---	---	--

NAME OF PROVIDER OR SUPPLIER  <b>HOLY CROSS CHILD PLACMENT AGENCY INC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4900 CONNECTICUT AVENUE NW WASHINGTON, DC 20008</b>
---	---

(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
--------------------	--	---------------	---	--------------------

S 252	<p>Continued From page 1</p> <p>approximately 10:40 a.m., review of Family #1's records revealed a home study had been completed on May 31, 2013. When queried about Family #1's status, the ED stated that an extended period of time passed with no communications after the home study was completed. The couple, however, had called the agency's office by telephone during the week prior to the survey. The couple reported having purchased a home in the District of Columbia (they had been renting an apartment previously). In addition, they had contacted an agency in Florida regarding children that were available for adoption. Upon receiving the telephone call, the ED sent them a packet of forms requesting updated physical examinations, criminal background checks and other information.</p> <p>At the time of the survey, the agency failed to show evidence that Family #1's home was re-evaluated after more than twelve (12) months passed since the initial home study was completed and there was no placement.</p>	S 252	<p><i>Sent a contract. In the future when home studies cannot be updated in 12 months' time from the original home study, we will note the reason for it in the family's file.</i></p> <p><i>Sally Minsbee</i></p>	
-------	--	-------	--	--