

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>CPA-003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>06/20/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>LUTHERAN SOCIAL SERVICES OF NCA, INC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4406 GEORGIA AVENUE NW WASHINGTON, DC 20011</b>
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*Received 11/16/18  
CMB*

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S 000	Initial Comments  An annual licensure survey was conducted on June 19, 2017 through June 20, 2017. The survey findings were based on interviews and review of administrative records, as well as the review of twenty eight (28) personnel records, nine (9) foster parent records and ten (10) foster children records.  Note: The below are abbreviations that may appear throughout the body of this report.  CPA - Child Placing Agency FC - Foster Children SW- Social Worker	S 000		
S 096	1611.1(d) Personnel Records  (d) Annual performance evaluations signed by both the employee and supervisor;  This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to ensure that each employee's record included a signed annual evaluation, for two (2) of the twenty-eight (28) employee files reviewed. (Employees #1 and #2)  The finding includes:  On June 19, 2017, beginning at 11:30 a.m., review of the personnel records revealed no evidence that Employee #1 and Employee #2 had an annual performance evaluation. Interview with the Quality Assurance Manager at approximately 1:30 p.m., confirmed that Employee #2 did not have an annual evaluation. The Quality Assurance Manager would check the status of Employee #1. On June 20, 2017, at 11:00 a.m., the Quality Assurance Manager	S 096	Signed Performance Evaluations that were completed, yet missing from the record will be filed in the respective employee's personnel records.  Supervisors responsible for any performance reviews that were not completed received feedback and reflected as an area for improvement.  LSS/NCA has implemented the use of an online payroll and HR software system that tracks and notifies supervisors electronically when performance evaluations of their direct reports are due. The system provides notifications that are visible each time the supervisor logs in for any reason, ie pay roll, time off request, approvals, etc. In addition, an email notification/reminder is automatically generated and sent to the supervisor. These reminders are sent until the evaluations are completed, reviewed and signed electronically by the supervisor and staff. The reviews are forwarded to management for final approval and to HR for print and filing in the respective employee's record.	11/30/17  Effective for 2017

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

TITLE

(X6) DATE

STATE FORM

*William J. Coleman, Executive Director, CS.*  
12/5/17

8899

8GLL11

If continuation sheet 1 of 6

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S 096	Continued From page 1 confirmed that Employee #1, did not have an annual performance evaluation.  At the time of the survey, the CPA failed to ensure that all staff employee files contained a completed and signed annual evaluation.	S 096	The HR Coordinator will conduct internal audits of the personnel records for compliance with performance evaluations monthly.  The HR Coordinator obtained updated copies of social worker licenses that were outstanding at the time of the audit and filed in the personnel record.	Effective 12/1/17	
S 098	1611.1(f) Personnel Records  (f) Documentation of any professional licensure;  This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to ensure that each professional licensed employee had documentation of a license, for one (1) of eight (8) SWs. (Employee #3)  The finding includes:  On June 19, 2017, beginning at 11:30 a.m., review of the personnel records revealed that Employee #3 was a licensed Social Worker. Further review of the record revealed no evidence that Employee #3 had documentation of a SW license. Interview with the Quality Assurance Manager at approximately 1:30 p.m., confirmed that Employee #3 did not have a current SW license on file.  At the time of the survey, the CPA failed to ensure that all licensed employee files contained a current professional license.	S098	All Social Workers have a valid professional license on file in their personnel record  The HR Coordinator will conduct internal audits of all social work personnel records monthly to ensure compliance with this standard to maintain valid licenses in the personnel record. When and if a valid license isn't on file, the coordinator will obtain a copy from the employee directly and/or search on line to verify the status and print for the record  The Program Supervisor will maintain a tracking sheet of all social work personnel with the expiration dates of employees under their supervision. This will inform supervisors when to remind staff of their obligation to renew their license, will aid supervisors in monitoring compliance with ethics and regulations for social work practice, as well as serve as a checks and balance for the HR system. The tracking system will be developed by the Clinical Director and implemented in the new year.	Effective 12/1/17	
S 103	1611.1(k) Personnel Records  (k) Physical examination reports required in section 1612.2;	S 103	Updated medical evaluations for employees #1, 4 and 6 have been filed in their personnel record.	11/30/17	

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S 103	<p>Continued From page 2</p> <p>This CONDITION is not met as evidenced by: Based on record review and interview, the CPA failed to ensure that each employee 's personnel record included a written report on his or her physical and mental status as required in section 1612.2 and every two (2) years thereafter, for three (4) of twenty-eight (28) employees. (Employees #1, #4 and #6)</p> <p>The findings include:</p> <p>During the entrance conference on June 19, 2017, at approximately 11:00 a.m., the Quality Assurance Manager stated that the CPA required each employee to obtain a complete physical examination at the time of hire and then every two years onward. Review of the personnel records, beginning at 11:30 a.m., revealed the following:</p> <p>The CPA failed to ensure that each applicant obtained a physical examination report, as follows:</p> <p>A. Review of the personnel files beginning on June 19, 2017, at 11:30 a.m., revealed Employee #1's file included a physical examination dated March 13, 2015. Further review of employee's personnel file revealed no evidence that a new physical examination report was available for review.</p> <p>B. Review of the personnel files beginning on June 19, 2017, at 11:30 a.m., revealed Employee #4's file included a physical examination dated February 13, 2015. Further review of employee's personnel file revealed no evidence that a new physical examination report was available for review.</p>	S 103	<p>The HR Coordinator will add medical evaluation to the clearance tracker for Children Services staff. The tracker is currently updated monthly based on findings from internal audit records, clearances received and changes in staffing. This color coded system will aid in reminding staff and their immediate supervisor when medicals are compliant, due to expire and/or are past due.</p>	12/31/17
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S 103	<p>Continued From page 3</p> <p>C. Review of the personnel files beginning on June 19, 2017, at 11:30 a.m., revealed Employee #6's file included a physical examination dated January 27, 2015. Further review of employee's personnel file revealed no evidence that a new physical examination report was available for review.</p> <p>On June 20, 2017, at approximately 1:30 p.m., the Quality Assurance Manager was queried to ascertain the status of the aforementioned employees. He examined their records and confirmed there were no health certificates on file.</p> <p>At the time of the survey, the CPA failed to ensure that each applicant obtained a physical examination report in his or her personnel record.</p>	S 103		
S 109	<p><b>1612.2 Staff Functions And Qualifications</b></p> <p>Each child-placing agency shall require a written report on the applicant's mental and physical conditions including addictions which could adversely affect the applicant's capacity to work with children.</p> <p>This CONDITION is not met as evidenced by: Based on record review and interview, the CPA failed to ensure that each applicant for employment obtained a written report on his or her physical and mental status, for three (3) of twenty-eight (28) employees. (Employees #1, #4 and #6)</p> <p>The finding includes: [Cross-refer to S103.] There was no evidence</p>	S 109	<p>The HR Director will verify that there is a statement of the employees #1, #4, and #6 mental and physical status is evident in their personnel record.</p> <p>The Clinical Director will direct responsible social worker and supervisor to obtain the missing medical and social security cards for the youth records cited. This will be verified via an internal audit conducted by the records coordinator.</p>	<p>12/31/17</p> <p>12/31/17</p>



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S 109	Continued From page 4  that the agency obtained written reports of Employees #1, #4 and #6 's mental and physical condition, annually.	S 109		
S 344	1628.14(b) Social Services Related To Child Placing  (b) The child's record which shall include the following: (1) Full name; (2) Address and telephone number of birth parents; (3) Race; (3) Sex; (4) Date and place of birth; (5) Nationality; (6) Health including medical history of past generations; (7) Physician's report, illnesses, immunization reports, and dental records; (8) Full names of children, siblings, grandparents and significant others of birth parents; (9) Social security number, if available; (10) Birth history; (11) Developmental history; (12) Birth certificate number; (13) Daily scheduled activities; (14) School records; (15) Dates of placement and address and names of adoptive foster parents; (16) Documents pertaining to the child's legal status; and (17) Summary of family history and an assessment of circumstances leading to the case plan for the child and maintain progress reports.  This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to ensure that each child's record included a physician's report, for one (1) of the ten (10) FC in the sample (FC #10), and social security number for two (2) of the ten (10) FC in the sample (FC #2 and #3).  The findings include:  During the entrance conference on June 19,	S 344	The Records Coordinator will update the youth records audit checklist to ensure it is consistent with DCMR. He will conduct monthly audits using the updated audit tool.  The records coordinator will analyze the trend data and revamp systems as needed to improve performance with compliance.	12/31/17  12/31/17 Ongoing

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FORM APPROVED

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S 344	<p>Continued From page 5</p> <p>2017, at 10:03 a.m., the Quality Assurance Manager indicated that a physical examination shall be obtained for each foster child, annually.</p> <p>1. On June 19, 2017 beginning at 3:41 p.m. review of FC #10's record revealed a physical examination dated June 6, 2016. Interview with the Quality Assurance Manager confirmed that there was not an update physical for FC #10 in the record.</p> <p>2. On June 19, 2017 beginning at 11:45 a.m. review of FC #2's record revealed no evidence of a social security card or that a request had been made by the Social Worker. Interview with the Quality Assurance Manager confirmed that there was no social security card in the record.</p> <p>3. On June 19, 2017 beginning at 12:05 p.m. review of FC #3's record revealed no evidence of a social security card or that a request had been made by the Social Worker. Interview with the Quality Assurance Manager confirmed that there was no social security card in the record.</p>	S 344		