

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>CPA-0081</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/20/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE NATIONAL CENTER FOR CHILDREN AND</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1438 RHODE ISLAND AVENUE, NE WASHINGTON, DC 20018</b>
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S 000	<p><b>Initial Comments</b></p> <p>An annual licensure survey was conducted on December 19, 2016, through December 20, 2016. The survey findings were based on staff interviews and the review of twelve (17) personnel records, based on a census of fourteen (59) employees. The child placing agency provides services for a total of twenty-two (22) foster parent/families. Eleven (11) of the aforementioned foster/parent families reside in the District of Columbia and those eleven (11) records were reviewed. The child placing also provides serves for a total of five adoptions. Records for three of the aforementioned adoption were reviewed. Records for nineteen (20) board members were reviewed based on a census of nineteen (20) members.</p> <p>Note: The below are abbreviations that may appear throughout the body of this report.</p> <p>Board of Directors Child Placement Agency - CPA</p>	S 000	<p><b>S 011 1602.5</b></p> <p>1. The reference letters for the newest board members for 2016, Mr. [REDACTED] and [REDACTED], were emailed to the Department of Health surveyor, [REDACTED].</p> <p>2. The Assistant to the Executive Director will ensure all reference letters are received for any new Board of Directors members in accordance with the department of Health S011 (1602.5) regulations.</p> <p>3. 30 days prior to the board member's approval, the NCCF Quality Assurance Manager will review the board approval checklist and certify for compliance.</p>	<p>12/21/16</p> <p>Annually</p> <p>30 days prior to Executive approval</p>
S 011	<p><b>1602.5 BOARD OF DIRECTORS</b></p> <p>Members of the Board shall be of good character as determined by letters of reference and criminal background investigations.</p> <p>This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to show evidence that letters of reference had been obtained for each member of its Board of Directors, for twenty (20) of twenty (20) board members. (BODs #1, #2, #3, #4, #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #18, #19, and #20)</p> <p>The findings include:</p>	S 011		

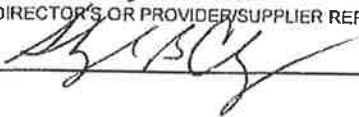
Health Regulation & Licensing Administration

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

TITLE

(X6) DATE

STATE FORM



*Executive Director*

1/30/17

8889

UGM011

If continuation sheet 1 of 3

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S 011	Continued From page 1  Interview with the executive director on December 19, 2016, at 12:55 p.m. was conducted to ascertain information regarding letters of reference for the CPA's BOD. The executive director informed the surveyor that the agency obtained criminal background checks for each of the aforementioned board members, however, the agency did not obtain letters of reference for them. Continued discussion with the executive director revealed that she was under the impression that the criminal background checks were sufficient. The surveyor informed the executive director that this regulation not only requires criminal background investigations but also requires letters of reference. The executive director said that she takes the responsibility for not having the references and would ensure that they are obtained in the future.  On December 20, 2016, beginning at 11:30 a.m., review of the twenty (20) board of directors' files verified that there was no documented evidence of letters of reference.	S 011		
S 465	1639.4(u) Foster Home Study  (u) A summary of reports from physical examination of each person in the household within six (6) months of the study which verifies that persons in the household do not have communicable diseases, any specific illness, or disabilities which would interfere with the family's ability to parent a child;  This CONDITION is not met as evidenced by: Based on record review and interview, the CPA failed to ensure that each home study report	S 465	<b>S 465 1639.4(u)</b> 1. The Document Specialist will send an email each month to the social worker and clinical supervisor regarding medical, immunizations, dental, and vision expiration dates set to expire within 60 days.  2. The Document Specialist will mail a health document letter to the foster parents regarding upcoming health documents that will expire within 60 days.	Monthly  60 days prior to the expiration date

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S 465	<p>Continued From page 2</p> <p>included a summary of physical examination reports verifying that within six (6) months of the study, each person in the household was clear of communicable disease, for one (1) of the six (6) foster parent files reviewed. (Foster Child #7)</p> <p>The findings include:</p> <p>On December 19, 2016, at 12:05 p.m., review of Foster Child #7's record revealed the child's current physical examination was dated March 20, 2015.</p> <p>Interview with the social worker assigned to the aforementioned foster child on December 20, 2016, at 10:09 p.m., revealed that the date of the foster child's physical examination was correct. Further interview with the social worker revealed that the foster child was scheduled for another appointment on November 17, 2016, but was a no show for the appointment. The social worker informed the surveyor that Foster Child #7 was to schedule another appointment, but she had no knowledge of that date. Continued discussion with the social worker revealed that she would provide that information to the surveyor before the exit conference.</p> <p>It should be noted that during the entrance conference on December 19, 2016, at 9:45 a.m., when the division manager was asked what the frequency was for the foster children's health screenings, it was revealed that the foster children are required to get a physical examination annually.</p> <p>At the time of the survey, the CPA failed to ensure that Foster Child #7 had been provided a current health screening.</p>	S 465	<p>3. To ensure continuous monitoring, the Document Specialist will review the medical tracking form weekly to see what documents will expire within 60 days .</p> <p>4. The QA team will verify current documents are in the file through monthly audits.</p>	<p>Weekly</p> <p>Monthly</p>