

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CPA-0094	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/30/2018
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NAME OF PROVIDER OR SUPPLIER
SERAAJ FAMILY HOMES, INC

STREET ADDRESS, CITY, STATE, ZIP CODE
**955 L'ENFANT PLAZA NORTH, SW
WASHINGTON, DC 20024**

(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
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S 000 Initial Comments

An annual licensure survey was conducted on 05/30/18. The survey findings were based on interview and the review of personnel records, which included one employee and five board members.

Listed below are abbreviations that appear throughout the body of this report:

CPA - Child Placing Agency
BOD - Board of Directors
FBI - Federal Bureau of Investigation
CPR - Child Protection Report

S 000

Plan of Correction

S 011

BOD #5 had a criminal background check (Addendum #1) and CPR clearance (Addendum #2) present in the file at the time of audit on 5/30/18. BOD #3 & #4 had clearances (Addendum #3) present in another file located outside of the office.

S 011 1602.5 BOARD OF DIRECTORS

Members of the Board shall be of good character as determined by letters of reference and criminal background investigations.

This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to show evidence that comprehensive criminal background checks and/or character reference checks had been obtained for each member of the BOD, for three of five current Board members (BOD members #3, #4, and #5).

Findings included:

Review of BOD #3, #4 and #5's personnel record on 05/30/18 at 11:00 AM revealed no evidence of a criminal background clearance from the FBI, CPR, or a local jurisdiction.

Further review of BOD #3 and #4's personnel records also failed to evidence letters of reference.

S 011

In accordance with 1602.5, the agency shall ensure that outstanding documentation is verified with the auditor and presented at the time of the audit. In addition, BOD information shall be stored electronically and be easily accessible at the time of the audit.

5/30/18

The agency shall ensure that references are obtained and verified for BOD #3 and #4 and prior to appointing any additional board members.

9/2/18

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

TITLE

(X6) DATE

STATE FORM

5899

343Y11

CEO

7-27-18

If continuation sheet 1 of 2

Health Regulation & Licensing Administration

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S 011	Continued From page 1 At the time of the survey, there was no evidence that the CPA was in compliance with this regulation.	S 011		
S 092	1611.1 Personnel Records Each child-placing agency shall have a personnel file on each employee, which shall include, but not be limited to, the following: This CONDITION is not met as evidenced by: Based on interview and record review, the CPA failed to ensure a personnel file was provided for review for one of five employees (Employee #1). Findings included: During the entrance conference on 05/30/18 at 10:32 AM, the personnel files for all employees working with the CPA were requested. Employee #1, who was assisting the surveyor, stated that her personnel file was not available due to it being stored at the main office location. At the time of the survey, the CPA failed to provide a complete personnel file for Employee #1.	S 092	S 092 In accordance with 1611.1, the agency shall ensure that applicable employee files will be readily available and accessible at the time of audit.	5/31/18