

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0058	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/25/2015
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NAME OF PROVIDER OR SUPPLIER TLC HEALTH CARE SERVICES SOUTHEAST,L	STREET ADDRESS, CITY, STATE, ZIP CODE 1100 H STREET NW SUITE 940 WASHINGTON, DC 20005
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(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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H 000	<p>INITIAL COMMENTS</p> <p>An annual survey was conducted from March 24, 2015, through March 25, 2015, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services to one hundred-one (101) patients and employs twenty-one (21) employees to include professional and administrative staff. The findings of the survey were based on observations, record reviews and interviews with patient's families and staff.</p> <p>Please Note: Listed below are abbreviations used in this report.</p> <p>Director of Nursing - DON Plan of Care - POC Skilled Nurse - SN Skilled Visit Note - SVN</p>	H 000	<p><i>received on</i> <i>4/10/15</i></p>	
H 459	<p>3917.2(i) SKILLED NURSING SERVICES</p> <p>Duties of the nurse shall include, at a minimum, the following:</p> <p>(i) Patient instruction, and evalutaion of patient instruction; and</p> <p>This Statute is not met as evidenced by: Based on interview and record review, HCA's skilled nursing staff failed to provide documented evidence that the instructions given to patients were understood, for two (2) of the three (3) patients that received wound care management in the sample. (Patients #4 and #7).</p> <p>The findings include:</p>	H 459		<p>Response begins on page two</p>

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

[Signature]

TITLE
Director of Operations

(X6) DATE
4/8/2015

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H 459	<p>Continued From page 1</p> <p>1. On March 24, 2015 at approximately 12:40 p.m., Patient #4's POC for the certification period February 12, 2015, through April 12, 2015, revealed a physician order for skilled nurse visits twice (2) a week for one (1) week, two (2) times a week for eight (8) weeks for wound care management and three (3) times when ever necessary for wound care/complications. Additionally, the SN was to instruct the patient/caregiver in the management of the patient's disease management. Review of Patient #4's clinical record revealed a SVN dated February 16, 2015. The clinical note indicated that the SN provided education on wound care and the disposal of soiled dressing but failed to document the specific level of the patient's understanding of the wound care management instructions.</p> <p>2. On March 24, 2015, at approximately 1:00 p.m., review of Patient #4's clinical record revealed a SVN dated February 25, 2015. The clinical note indicated that the SN provided education on wound care and disposal of soiled dressing and education on performing wound care and dressing change but failed to document the specific level of the patient's understanding of the wound care management instructions.</p> <p>3. On March 24, 2015 at approximately 1:50 p.m., Patient #7's POC for the certification period February 12, 2015, through April 12, 2015, revealed a physician's order for SN visits once a week for one (1) week and two (2) times a week for eight (8) weeks for wound care management. Additionally, the SN was to instruct the patient on wound care to include signs and symptoms of infection. Review of Patient #7's clinical record revealed a SVN dated February 25, 2015. The</p>	H 459	<p>Director of Operations/Clinical Manager will in-service clinicians regarding policy TX-003, Patient/Caregiver Education no later than 04/14/2015.</p> <p>Director of Operations/Clinical Manager/Designee will audit five random charts per week beginning week of 04/06/2015 to ensure patient teaching and the response/understanding of teaching by the patient/caregiver is being documented at each patient visit until 100% compliance is met. The results of the audits will be shared with clinicians at the weekly Patient Care Conference meetings by the Director of Operations/Clinical Manager.</p> <p>Clinicians who continue to be non-compliant will be counseled and disciplinary action taken as appropriate.</p> <p>Monitoring will continue on an on-going basis with Performance Improvement Program quarterly audits by Director of Operations/Designee to ensure continued compliance with proper documentation of patient/caregiver response to education.</p>	04/30/2015

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H 459	<p>Continued From page 2</p> <p>clinical note indicated that the SN provided education on "wound care/disposal of soiled dressing and education on "performing wound care/ dressing change" but failed to document the specific level of the patient's understanding of the wound care management instructions.</p> <p>4. On March 24, 2015, at approximately 2:10 p.m., review of Patient #7's clinical record revealed SVNs dated March 2 and March 9, 2015. The clinical notes indicated that the SN provided education on "wound care/disposal of soiled dressing" but failed to document the specific level of the patient's understanding of the wound care management instructions.</p> <p>During a face to face interview with the DON on March 24, 2015, at approximately 3:45 p.m., it was acknowledged that the SN failed to evaluate the teaching provided to the aforementioned patients. Further interview revealed that the nursing staff would be re-trained on how to accurately document the evaluation of the training provided in the patient's medical records.</p>	H 459		
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