

Health Regulation & Licensing Administration

PRINTED: 01/05/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0074	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 12/23/2016
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

NURSING UNLIMITED SERVICES, INC**1818 NEW YORK AVENUE, NE
WASHINGTON, DC 20002**

(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
{H 000}	<p>INITIAL COMMENTS</p> <p>A follow-up survey was conducted on December 22, 2016 and December 23, 2016, to determine compliance with Title 22 B DCMR, Chapter 39 (Home Care Agencies Regulations). The Home Care Agency provides home care services for two (2) patients and employs six (6) staff. The findings of the survey were based on a review of administrative records, two (2) active patient records, five (5) discharged patient records, four (4) new employee records, no complaints, 2 home visits, 4 telephone interviews, and interviews with patients/family and staff.</p> <p>The following are abbreviations used within the body of this report:</p> <p>DON- Director of Nursing HCA -Home Care Agency PCP - Primary Care Physician POC - Plan of Care SN - Skilled Nurse SOC - Start of care</p>	{H 000}	<p>H 000</p> <p>The following are abbreviations used within the body of this report:</p> <p>NUS – Nursing Unlimited Services</p>	
{H 358}	<p>3914.3(g) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(g) Physical assessment, including all pertinent diagnoses;</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the HCA failed to ensure the POCs (1) included parameters for blood glucose levels and (2) included parameters for blood pressure monitoring as part of the physical assessment for two (2) of 2 patients in the sample. (Patients #4</p>	{H 358}	<p>Post survey, Nursing Unlimited Services (NUS) faxed a verbal order request to the Doctors of patient #4 and patient #6 to give us parameters of blood glucose and blood pressure monitoring. These requests were faxed immediately after an exit interview on 12/22/2016. NUS followed up with a phone call. With no reply, NUS refaxed the request as a reminder to both doctors. On the 01/05/2017 by 2pm another reminder with several calls were made. That same evening we received the State of Deficiency. An Emergency demand was put on the Doctors' offices and the same fax was resent the same day. Patient # 4's Doctor faxed the parameters to NUS on 01/06/2017 and</p>	01/06/17

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

TITLE

(X6) DATE

STATE FORM

6899

EIT912

If continuation sheet 1 of 4

If continuation sheet 2 of 4

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{H 358}	<p>Continued From page 2</p> <p>a week for 9 weeks. However, there was no documented evidence that the POC included parameters for blood glucose levels.</p> <p>On December 22, 2016, at 1:25 p.m., during an interview with the President/DON, it was indicated that she would request the PCP to order parameters for blood glucose levels on the POC as part of the physical assessment for Patient #6.</p> <p>At the time of the survey the HCA failed to include parameters for blood glucose levels on the POC.</p> <p>II. The HCA failed to ensure patients' POCs included parameters for blood pressure monitoring, as evidenced by the following:</p> <p>1. On December 22, 2016, starting at 12:45 p.m., review of Patient #4's POC revealed the patient had diagnoses that included essential primary hypertension. The attending physician's orders revealed that the SN was to visit once every 2 weeks for 9 weeks to monitor the patient's blood pressure. However, there was no documented evidence that the POC included parameters for blood pressure monitoring.</p> <p>On December 22, 2016, at 12:50 p.m., during an interview with the President/DON, it was indicated that she would request the PCP to order parameters for blood pressure monitoring on the POC as part of the physical assessment for Patient #4.</p> <p>At the time of the survey the HCA failed to include parameters blood pressure monitoring on the POC.</p> <p>2. On December 22, 2016, at 1:35 p.m., review of</p>	{H 358}	<p>Continued from page 2</p> <p>NUS will ensure that any new patient referral order or face to face includes parameters, if the patient is diabetic, before beginning services.</p> <p>The Director of Nursing will review each new patient admitting order to note if the patient is diabetic and in need of such parameters. Going forward all patients clinical records will be monitored for adherence to this.</p> <p>Director of Nursing will monitor 100% of clinical records for a goal of 100% compliance monthly.</p> <p>1. A verbal order request to the Doctor of patient #4 to give NUS parameters of blood pressure monitoring. Patient # 4's Doctor faxed the parameters to NUS on 01/06/2017.</p> <p>All professionals were made aware of the blood pressure parameters for patient #4 on 01/09/2017.</p> <p>NUS will ensure that any new patient referral order or face to face includes parameters, if the patient is hypertensive, before beginning services.</p> <p>The Director of Nursing will review each new patient admitting order to note if the patient is hypertensive and in need of such parameters. Going forward all patients clinical records will be monitored for adherence to this.</p> <p>Director of Nursing will monitor 100% of</p>	01/06/17

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{H 358}	<p>Continued From page 3</p> <p>Patient #6's POC indicated that Patient #6 had diagnoses that included hypertension. According to the POC, the SN was to monitor and record the patient's blood pressure reading every visit. However, there was no <u>documented evidence</u> that the POC included parameters for blood pressure monitoring.</p> <p>On December 22, 2016, at 1:55 p.m., during an interview with the President/DON, it was indicated that she would request the PCP to order parameters for blood pressure monitoring on the POC as part of the physical assessment for Patient #6.</p> <p>At the time of the survey the HCA failed to include parameters for blood pressure monitoring on the POC.</p>	{H 358}	<p>Continued from page 3</p> <p>clinical records for a goal of 100% compliance monthly.</p> <p>2. A verbal order request to the Doctor of patient #4 to give NUS parameters of blood pressure monitoring. Patient # 6's Doctor faxed the parameters to NUS on 01/09/17</p> <p>All professionals were made aware of the blood pressure parameters for patient #4 on 01/09/2017.</p> <p>NUS will ensure that any new patient referral order or face to face includes parameters, if the patient is hypertensive, before beginning services.</p> <p>The Director of Nursing will review each new patient admitting order to note if the patient is hypertensive and in need of such parameters. Going forward all patients clinical records will be monitored for adherence to this.</p> <p>Director of Nursing will monitor 100% of clinical records for a goal of 100% compliance monthly.</p>	01/09/17	