

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0003	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/28/2011
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NAME OF PROVIDER OR SUPPLIER HSC HOME HEALTH CARE, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1731 BUNKER HILL ROAD, NE WASHINGTON, DC 20017
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H 000	INITIAL COMMENTS An annual licensure survey was conducted from April 26, 2011, through April 28, 2011, to determine compliance with Title 22 DCMR, Chapter 39. The findings of the survey were based on a review of administrative records, a random sample of five(5) active clinical records based on a census of 71 patients, two(2) discharge records, eight(8) personnel files based on a census of 80 , and two(2) home visits. Based on observation, record review and interview the following deficiencies were cited.	H 000	<p><i>Received 6/10/11</i></p> <p>Department of Health Health Regulation & Licensing Administration Intermediate Care Facilities Division 890 North Capitol St., N.E. Washington, D.C. 20002</p>					
H 157	3907.2(m) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (m) Documentation of acceptance or declination of the Hepatitis Vaccine; and... This Statute is not met as evidenced by: Based on record review and interview, it was determined the agency failed to ensure that one (1) of eight (8) employees had documentation of acceptance or declination of Hepatitis Vaccine. (Employee #8) The finding includes: On April 27, 2011, a record review of employee #8's record at approximately 12:30 p.m., revealed employee #8 was hired October 27, 2010. Further review of the record revealed there was no documented evidence of acceptance or declination of Hepatitis Vaccine.	H 157						
				<table border="1"> <tr> <td>H 157</td> <td>Complete Date</td> </tr> <tr> <td>Documentation of the declination of the Hepatitis Vaccine for the employee was requested from the Occupation Health Vendor and submitted to the surveyor's office on April 28, 2011 by HSC Home Care, LLC Senior Management staff.</td> <td>April 28, 2011</td> </tr> </table>	H 157	Complete Date	Documentation of the declination of the Hepatitis Vaccine for the employee was requested from the Occupation Health Vendor and submitted to the surveyor's office on April 28, 2011 by HSC Home Care, LLC Senior Management staff.	April 28, 2011
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Health Regulation Administration

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

STATE FORM

6899

J06111

TITLE

(X6) DATE

[Signature]
Director of Health Regulation
5/21

If continuation sheet 1 of 5

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Health Regulation Administration

TITLE

(X6) DATE

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

STATE FORM

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If continuation sheet 1 of 6

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H 157	Continued From page 1 During a face to face interview with the Human Resources Coordinator on April 27, 2011 at approximately 3:00 p.m., she indicated there was nothing in employee #8's file to indicate the acceptance or declination of Hepatitis Vaccine.	H 157		
H 265	3911.2(e) CLINICAL RECORDS Each clinical record shall include the following information related to the patient: (e) Physician's orders: This Statute is not met as evidenced by: Based on observation, interview and record review, it was determined that the agency failed to ensure the clinical record for one (1) of eight (8) patients in the sample, had a physician order for six (6) additional nursing service hours and trach suctioning. (Patient #8) The findings include: 1. On April 27, 2011, a record review of patient's #8 record at approximately 2:00 p.m. revealed a plan of care (POC) with certification period March 21, 2011 through May 19, 2011, which the physician ordered licensed practical nurse (LPN) services seven (7) days a week for nine (9) weeks for eighteen (18) hours daily. During a face to face interview on April 28, 2011 with patient #8's father at approximately 9:15 a.m., it was revealed that the patient received nursing services 24 hours a day. During a telephone interview with the Director of Nursing (DON) on April 28, 2011 at approximately 9:45 a.m., she confirmed that patient #8 received	H 265	H 265 1 H 265 2 The clinical Manager(DON) was instructed to include the private pay nursing hours on the plan of care .All clinical supervisors will be provided an in-service to ensure private hors are reflected on the Plan of Care(POCs) by June 1, 2011. All private pay patients will be reviewed every 60 days to ensure hours are reflected on the Plan of Care. A quarterly review will be conducted by the Quality Clinician or Clinical Manager who will submit a report to the Director of Operations. The report will be maintained in the Director of Operations office. H265 2 Suctioning Technique The nurse that was observed using improper technique during the survey was immediately removed from the home and replaced with a nurse who demonstrate proper technique and was familiar with the case. All RNs and LPNs will be provided in-service and testing on pediatric trach suctioning technique. A skills assessment will be performed at this time to reduce potential reoccurrence. Documentation will be entered into the personnel record. Although this is a part of the orientation, going forward, during new hire orientation this technique will highlighted. Field Nurse supervisors will monitor the technique during the bi-monthly supervisory visits of trach patients and enter documentation to support observation of the nurses's technique. The Quality Clinician/Clinical Manager will randomly select a trach patient quarterly and make a home visit to ensure the standard is met..	Complete Date June 1, 2011 April 28,2011 June 24,2011 June 30,2011

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H 265	Continued From page 2 24 hour nursing service from the agency. She indicate the additional six (6) hours of nursing services is under a private contract with the patient's father and the agency's Director of Operations. 2. On April 28, 2011, an observation at approximately 9:30 a.m. revealed the LPN providing trach suctioning to the patient. The LPN used inappropriate technique while suctioning the patient. She failed to lubricate the catheter before suctioning, she held her thumb over the suctioning vent continually during the procedure, and she cleared the secretions from the used catheter into an unopened container that was sitting in a chair in the living room. The LPN also did not don gloves while removing a contaminated towel from the patients chest. During a a telephone interview with the DON on April 28, 2011 at approximately 9:45 a.m. , she was informed of the findings. The DON indicated that she would have an register nurse (RN) visit the patient's home that day to assess the patient as well as the LPN's suctioning technique. The DON also indicated that she would would have the LPN come into the office for additional training in suctioning from a Respiratory Therapist.	H 265		
H 355	3914.3(d) PATIENT PLAN OF CARE The plan of care shall include the following: (d) A description of the services to be provided, including: the frequency, amount, and expected duration; dietary requirements; medication administration, including dosage; equipment; and supplies;	H 355	H 355 H355 Description of Duties A description of services will be provided on the patient's Plan of Care (POCs). The HSC Home Care Quality Clinician will audit 20% of all clinical records monthly for six months, if 100% compliance is met then the audits will be conducted quarterly for 12 months to ensure the strategies sustainable are implemented to consistently meet the standard. The Director of Operations will review the Quality reports and hold the Clinical Manager responsible for ensuring this standard is consistently met.	Complete Date May 31, 2011

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H 355	Continued From page 3 This Statute is not met as evidenced by: Based on a record review and interview, it was revealed that the agency failed to include a description of services to be provided for one (1) of seven (7) plan of care's. (POC's) (Patient #8) The finding includes: On April 27, 2011, a record review of the patients record at approximately 2:00 p.m. revealed a POC with certification period March 21, 2011 through May 19, 2011. Further review of the POC on April 29, 2011, at approximately 1:00 p.m. revealed there was no documented evidence of a description of services to be provided by the Licensed Practical Nurse or Physical Therapist. The POC indicated the physician ordered the following: "LPN services seven (7) times a week for nine (9) week eighteen (18) hours daily and Physical Therapy services one (1) time a week for nine (9) weeks."	H 355		
H 357	3914.3(f) PATIENT PLAN OF CARE The plan of care shall include the following: (f) Provisions relating to the reevaluation of services, discharge planning, referral of services and continuation or renewal of services; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure the Plan of Care(POC) for five (5) of seven (7) patients included provisions relating to the	H 357	H 357 H357 Patient Plan of Care All patient plan of care (POCs) will include documentation to support the patient will be discharged when the goals are met. The clinical manager will review all POCs. The Quality Clinician will perform 20% random client record audit quarterly for compliance. Results of the audit will be provided to the Director of Operations for review and will be presented to the Quality Council Quarterly for six months if the compliance level is 100% met.	Complete Date June 1, 2011

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H 357	Continued From page 4 re-evaluation of services, discharge planning, referral of services and continuation or renewal of services. (Patients #3, #4, #6, #7 and #8) The finding includes: On April 26, 2011 and April 27, 2011, a record review of Patients #3, #4, #6, #7 and #8 records from approximately 9:30 a.m. until 2:30 p.m., revealed POC's which had no documented evidence of provisions relating to the re-evaluation of services, discharge planning, referral of services and continuation or renewal of services. During a face to face interview with the director of nursing (DON) on April 27, 2011 at approximately 1:00 p.m., she indicated she was aware the the above listed requirement was not addressed on the POC's.	H 357		