Provider Sanctions List (ACTIVE)

6/21/2021

| | | | | Date Placed on | Request for | | |
|--------------|--|----------------|--------------|----------------|--------------------------|-------------------------|--|
| | | | Do Not Refer | Enhanced | Corrective Action | | |
| No. | Provider Name | QRU Supervisor | Entry Date | Monitoring | Plan Date | Termination Status | Comments |
| | | | | | | | |
| | | | | | | | Placed on DNR after receiving a rating |
| | | | | | | | of unsatisfactory on an annual PCR |
| | | _ | | | | | for In-Home Supports, Respite Hourly, |
| 1 | 1 Axium, LLC | Jackson | 5/25/2021 | | | | and Supported Living Periodic |
| | | | | | | | |
| | | | | | | | Provider is being placed on the |
| | | | | | | | Enhanced Monitoring and the Do Not |
| | | | | | | | Refer List ("DNR") for a minimum of |
| | | | | | | | 60 days for non-compliance with the |
| | | | | | | | Department on Disability Services |
| | | | | | | | (DDS), Provider Performance Review |
| | | | | | | | (PPR) Procedure, effective January 1, |
| | | | | | | | 2016 specific to the Continuous |
| | | | | | | | Improvement Plan (CIP) for the FY20, |
| | | | | | | | PPR dated September 30, 2020 for |
| 2 | DC Cares Center | Jackson | 3/25/2021 | 3/25/2021 | | | Quarter 1 and Quarter 2. |
| | | | | | | | Provider is being placed on sanctions |
| | | | | | | | requiring a Corrective Action Plan |
| | | | | | | | (CAP) as a result of its failure to |
| | | | | | | | timely address deficient practices that |
| | | | | | | | are identified as "issues" in DDS |
| 3 | DC Cares Center | Jackson | | | 3/25/2021 | | information system. |
| | | | | | | | Placed on Do Not Refer after |
| | | | | | | | receiving Needs Improvement in an |
| _ | | | | | | | annual PCR for Supported Living and |
| 4 | First Metropolitan Community Service | Klusmann | 6/17/2021 | | | | Companion Services. |
| | | | | | | | Placed on Do Not Refer(DNR) |
| | | | | | | | requiring a Correcive Action Plan |
| | | | | | | | (CAP) for failure to demonstrate |
| | | | | | | | competency in sybmitting reports and |
| | Navarania Bada Chan Bananai | | | | | | entering incidents in MCIS per |
| l _ | Newman's Body Shop Personal | VI | 2/10/2021 | 2/10/2021 | | | instructions from DOH and DDS Covid- |
| 5 | Training | Klusmann | 2/19/2021 | 2/19/2021 | | | 19 Guidelines and Orders. Pkaced on Do Not Refer (DNR) |
| | | | | | | | |
| | | | | | | | requirining a Corrective Action Plan (CAP) for non-compliance with |
| | Total Care Services (2530 36th Place | | | | | | Mayor's Order 2020-63 (Covid-19 |
| 6 | SE (SL) and 2530 36th Street SE (SL)) | Klusmann | 2/19/2021 | 2/12/2021 | | | · · |
| - | JE (JE) and 2000 Soun Street SE (SL)) | Niusillalili | 2/ 13/ 2021 | 2/12/2021 | | | protocols). |
| | | | | | | | Placed on DNR after receiving a rating |
| | | | | | | | of unsatisfactory on an initial 6 month |
| | | | | | | | PCR for Supported Living, In-Home |
| 7 | Total Quality Residential Services, Inc. | Jackson | 08/20/18 | | | | Supports, Supported Living Periodic |
| - | The second secon | | ,, | | | UPDATED 09/04/2019: | The state of the s |
| | | | | | | DHCF informed DDS of | |
| | | | | | | its decision to proceed | |
| | | | | | | with DDS' | Additionally placed on DNR and |
| | | | | | | recommendation (sent | Enhanced Monitoring after failing to |
| | | | | | | on 01/15/19) for DHCF | meet requirements for certification |
| | | | | | | to terminate the HCA | on a follow-up annual PCR for |
| | | | | | | with TQRS acourding to | Supported Living, In-Home Supports, |
| 8 | Total Quality Residential Services, Inc. | Jackson | 01/02/19 | 01/02/19 | | procedure. | and Supported Living Periodic. |
| <u> </u> | If you have questions please conta | | | | | ' | |

If you have questions, please contact Dianne Jackson at (202) 664-7471 or dianne.jackson3@dc.gov or Tasha Klusmann at (202) 258-9520 or tasha.klusmann@dc.gov.