



GOVERNMENT OF
THE DISTRICT OF
COLUMBIA

CRFMR
Rev. 9/02

DEPARTMENT OF HEALTH
HEALTH REGULATION & LICENSING
ADMINISTRATION

Mailing Address
825 North Capitol St., NE
Washington DC 20002
2nd Floor (2224)
202-442-5888

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Name of Facility: Chevy Chase House		Street Address, City, State, ZIP Code: 5420 Conn., Ave NW Wash., DC		Survey Date: 02/26/10 Follow-up Dates(s):	
Regulation Citation	Statement of Deficiencies	Ref. No.	Plan of Correction	Completion Date	
Assisted Living Law "DC Code § 44-101.01"	An annual licensure survey was conducted on February 26, 2010, to determine compliance with Assisted Living Law "DC Code § 44-101.01. The following deficiencies were based on observation, record reviews, and interviews. The sample sizes were eight (8) resident records based on a census of one hundred-twenty-two (122) residents and seven (7) employee records based on a census of seventy-one (71) employees. The facility was found to be in substantial compliance at the time of this survey. § 44-105.09 <u>ABUSE, NEGLECT, AND EXPLOITATION</u>		3/09/10 GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH HEALTH REGULATION ADMINISTRATION 825 NORTH CAPITOL ST., N.E., 2ND FLOOR WASHINGTON, D.C. 20002		

Theresa Waters / Theodore Lomax
Theresa Waters / Theodore Lomax
Name of Inspector

3/12/10
Date Issued

Robin L. ... 3/22/2010
Facility Director/Designee Date



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§ 44-105.09(c) An Assistant Living Residence (ALR) shall post signs that set forth the reporting requirement of this section conspicuously in the employee and public areas of the ALR.

Based on an observation and interview, it was determined that the facility failed to post signs that set forth the reporting requirement of this section conspicuously in the public areas of the ALR.

The findings include:

An observation on February 26, 2010, at approximately 11:00 a.m., revealed that the facility failed to post signs that set forth the reporting requirement of this section, conspicuously in the public areas of the ALR.

Interview with the social worker on February 26, 2010 at approximately 11:00 a.m., acknowledged the finding.

44-105.09(c)
Signs will be framed, posted & mounted in all public areas such as chapel, activities area, lobby, elevator corridors and all employee offices & lounges.

All new residents will receive abuse reporting information with the Resident Handbook.

Physical plant manager will integrate signage placement into weekly site inspections.

4/5/10

§ 44-106.04

INDIVIDUALIZED SERVICE PLAN



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§ 44-106.04
(a) (3)

The Individualized Service Plan shall be written by a healthcare practitioner using information from the assessment.

Based on record reviews and interview, it was determined the facility failed to ensure that Individualized Service Plan's (ISP) were written by a healthcare practitioner for eight (8) of eight (8) records reviewed. (Resident #1 through #8)

The finding includes:

Record reviews conducted on February 26, 2010, from 12 noon until 3:00 p.m., revealed there was no documented evidence that a healthcare practitioner had written eight resident's (8) Individualized Service Plans, using information from the assessment.

Interview with Assistant Living Administrator on February 26, 2010, at approximately 3:15 p.m., acknowledged the findings.

§ 44-107.01
STAFFING STANDARDS

44-106.04(a)(3)
ISP's are being sent to all resident's healthcare practitioner for review and signature. All ISP's will be written using assessment from Schedule C Physicians Report & signed by healthcare practitioner. Social worker will monitor process. All new admissions will have ISP's completed using assessment from Schedule C Physicians Report. ISP format now reflects Schedule C Physicians Report assessment compliance

Ongoing to be complete by 5/01/10



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§ 44-107.01(d)

An Assistant Living Administrator Shall:

§ 44-107.01
(d) (8)

Assure that each employee has a background check pursuant to federal and District law executed at the time of initial employment.

Based on interview and record review, the facility failed to assure that each employee had a background check pursuant to federal and District law executed at the time of initial employment, for two (2) of four (4) employee records reviewed. (Employees #1 and #3)

The finding includes:

Record reviews conducted on February 26, 2010, at approximately 10:00 a.m., revealed employee #1 and #3 did not have a background check completed.

The Assistant Living Director on February 3, 2010, at approximately 2:50 p.m. acknowledged this finding.

§ 44-107.02
STAFF TRAINING

44-107.01(d)(8)

All prospective hires receive a background check. No employee file is activated without background check clearance. The filing of background checks is being improved systemically. All background check reports will now & in the future be maintained in personnel files on-site without exception.

4/01/10



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§ 44-107.02 (b)

Within 7 days of employment, an ALR shall train a new member of its staff as to the following:

§ 44-107.02 (b) (7)

Elementary body mechanics, including proper lifting and in place transfer

§ 44-107.02 (b) (9)

Infection Control

Based on record review and interview, it was determined that the facility failed to ensure that two (2) of two new staff members, were trained on elementary body mechanics, including proper lifting and in place transfer, and infection control, within seven days of employment. (Employee #3 and #4).

The finding includes:

Record reviews on February 26, 2010, of employee #3 and #4 personnel records at approximately 1:30 p.m. until 2:15 p.m., revealed that Employees #3 and #4 had no documented evidence of the aforementioned training in their records.

The Assistant Living Administrator acknowledged this finding on February 26, 2010, at approximately 3:00 pm.

44,107.02 (b) Facility has purchased (on order) Senior Living University Videos for all staff training on elementary body mechanics by (proper lifting) All new employees shall be trained in proper body mechanics within the first 7 days of hire. 5/22/10 ongoing training
44-107.02 (b)(7) 5/01/10
44-107.02 (b)(9) Staff Orientation Guide has been updated to include Infection Control Policy. A new orientation checklist now includes body mechanics & infection control with date & trainer signature. Format will be monitored by Business Office Manager to assure compliance within 7 days of hire.