PRINTED: 03/09/2010
FORM APPROVED

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0013	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 02/12/2010
NAME OF PROVIDER OR SUPPLIER: AMERICARE-IN-HOME NURSING CARE	STREET ADDRESS, CITY, STATE, ZIP CODE: 4000 ALBEMARLE STREET, NW, 2ND FLOOR WASHINGTON, DC 20016		

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H 000	INITIAL COMMENTS An annual survey was conducted at your agency on February 4, 2010, through February 12, 2010, to determine compliance with Title 22 DCMR, Chapter 39 (Home Care Agencies Regulations). The findings of the survey were based on a random sample of nine(9) clinical records based on a census of twenty-nine (29) patients, one (1)discharge clinical record, ten (10) personnel files based on a census of sixteen employees and two(2) home visits. The deficiencies cited during this survey were based on interviews conducted with agency staff and review administrative records.	H 000		
H 331	3913.2(a) COMPLAINT PROCESS A written summary of the complaint process shall be disseminated as follows: (a) Given to the patient or his or her representative upon acceptance or denial of services; and... This Statute is not met as evidenced by: Based on interview and record verification, the Home Care Agency's (HCA) policy failed to ensure a written summary of the complaint process was given to the patient or his or her representative. The finding includes: Review of the Compliant/Grievance Process Policy on February 4, 2010, at approximately 10:35 a.m., revealed the HCA did not ensure a written summary of the complaint process was	H 331	In a case where a patient is denied services- a copy of our complaint process policy & a completed HHABN #1, which is for denial of services, will be mailed to the patient/family. All staff will be in-serviced on this new policy.	

Health Regulation Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: DCS — (X6) DATE: 3/10/10

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H 331	Continued From page 1	H 331		
	given to the patient or his or her representative upon denial of services.			
	During a face to face interview with the clinical director on February 4, 2010, at 10:59 a.m., it was acknowledged that the policy did not include a written summary of the complaint process that was given to the patient or his or her representative upon denial of services.		Case managers from each Team will monitor this.	By 4/30/10
	There was no documented evidence the HCA ensured a written summary of the complaint process was given to the patient or his or her representative upon denial of services.			
H 333	3913.3 COMPLAINT PROCESS	H 333		
	The telephone number of the Home Health Hotline maintained *by the Department of Health* shall be posted in the home care agency's operating office in a place where it is visible to all staff and visitors.			
	This Statute is not met as evidenced by: Based on an observation and interview, it was determined that the home care agency failed to post the telephone number of the Home Health Hotline maintained by the Department of Health (DOH) in the agency's operating office in a place visible to staff and visitors.			
	The finding includes:			
	During observation at the home health agency on February 4, 2010, at approximately 10:00 a.m., it was observed that the telephone number of the Home Health Hotline maintained by the Department of Health (DOH) was not posted in the operating office in a place visible to staff and			

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H 333	Continued From page 2 visitors. During a face to face interview with the clinical director on February 4, 2010, at approximately 11:05 a.m., it was acknowledged that the telephone number of the Home Health Hotline maintained by the DOH was not posted in the agency's operating office in a place visible to staff and visitors. An observation on February 12, 2010 at approximately 9:00 a.m. revealed that the agency had posted the Home Health Hotline maintained by the Department of Health (DOH) in it's operating office visible to staff and visitors.	H 333	Dept. of Health Hotline phone number is now visible to all staff & visitors as they enter D.C. office. All staff will be in-serviced on where D.C. Dept. of Health Hotline number is in office. D.C. case manager will make sure Dept. of Health Hotline continues to be visible to all staff & visitors to the office.	By 4/30/10
H 334	3913.4 COMPLAINT PROCESS A complaint may be presented orally or in writing. This Statute is not met as evidenced by: Based on record review and interview, the Home Care Agency (HCA) failed to include that a complaint may be presented orally or in writing in it's Complaint Policy. The finding includes: Record review conducted on February 4, 2010, at approximately 10:35 a.m., of the agency's policy and procedures, revealed a policy entitled "Patients Complaint/Grievances" which failed to include that a compliant may be presented orally or in writing. Interview with the clinical director on February 4, 2010, at approximately 11:15 a.m., acknowledged the finding.	H 334	New Policy/Procedure was written for patient complaint/grievances. It states that a complaint or grievance can be done orally or in writing. (See attached new policy) All Staff will be in-serviced and given a copy of the new policy/procedure. Case managers will monitor their Teams for this; along with the P.I. Director.	By 4/30/10

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H 335	3913.5 COMPLAINT PROCESS The home care agency shall respond to the complaint within fourteen (14) calendar days of its receipt, and shall document the response. This Statute is not met as evidenced by: Based on interview and record verification, the Home Care Agency (HCA) failed to ensure the establishment of a written policy to respond to a complaint within fourteen (14) calendar days of its receipt, and document the response. The finding includes: Review of the agency's Patient Compliant/Grievance Policy on February 4, 2010, at approximately 10:35 a.m., revealed the HCA did not establish a written policy to respond to a complaint within fourteen (14) calendar days of its receipt, and to document the response. Further review of the policy indicated "staff will, within the limits of their role, make every effort to resolve complaints and will seek help from their supervisor for assistance in resolving the complaint as necessary. If the complaint is resolved at this level, the staff member or supervisor will document the complaint and resolution in the complaint log within 72 hours". During a face to face interview with the clinical director on February 4, 2010, at approximately 11:20 a.m., it was acknowledged the HCA did not establish a written policy to respond to a compliant within fourteen (14) calendar days of its receipt, and to document the response. There was no documented evidence the HCA established a written policy to respond to a	H 335	The policy/procedure for patient complaints has been changed from 30 calendar days to 14. The resolution will be written & mailed to patient family. All staff will be in-serviced on new policy & procedures. This will be monitored by case managers & P.I. Director. Note OK By 4/30/10	

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H 335	Continued From page 4 complaint within fourteen (14) calendar days of its receipt, and to document the response.	H 335		
H 411	3915.11(f) HOME HEALTH & PERSONAL CARE AIDE SERVICE Home health aide duties may include the following: (f) Observing, recording, and reporting the patient's physical condition, behavior, or appearance; This Statute is not met as evidenced by: Based on a record review and interview, it was determined that the agency failed to ensure home health aides recorded, and reported on the patient's physical condition, behavior or appearance for two (2) of two (2) patients in the sample. (Patients #3 and #5) The findings include: 1. Review of Patient #3's medical record on February 4, 2010, at approximately 12:55 p.m., revealed the home health aide had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. During a face to face interview with the clinical director on February 4, 2010, at approximately 1:30 p.m., it was acknowledged the home health aide had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. There was no documented evidence the home	H 411	Our Home Health Aides will be instructed to write a note on the bottom of their check-off list for each of their visits -- regarding patient's physical condition, behavior and/or appearance. Our Home Heath Aides will be in-serviced on need to write something on each of their check off visit notes- regarding patients physical condition, behavior and/or appearance. They will be instructed if they document anything besides a good outcome for patient they need to call case manger while at the home. date	

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H 411	Continued From page 5 health aide recorded and reported the patient's physical condition, behavior, or appearance to the agency 2. Review of Patient #5's medical record on February 4, 2010, at approximately 1:50 p.m., revealed the home health aide had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. During a face to face interview with the clinical director on February 4, 2010, at approximately 2:20 p.m., it was acknowledged the home health aide had not recorded and reported the patient's physical condition, behavior, or appearance to the agency. There was no documented evidence the home health aide recorded and reported the patient's physical condition, behavior, or appearance to the agency	H 411	The DC Auditor will check Home Health Aide notes every two weeks. PI Dir. will perform follow-up check of Home Health Aide notes every three months.	By 4/30/10