

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CPA-0067	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/26/2011
NAME OF PROVIDER OR SUPPLIER MARTIN POLLACK PROJECT, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 4406 GEORGIA AVENUE NE WASHINGTON, DC 20011	
(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
S 000	Initial Comments An annual inspection was conducted from August 24, 2011, through August 26, 2011. The survey findings were based on record reviews and staff interviews. The sample sizes were seventeen (17) personnel records based on a census of seventeen (17), five (5) foster parent records based on a census of five (5) and four (4) foster child records based on a census of four (4).	S 000	<p style="text-align: center;"><i>Renew 10/3/11</i></p> <p style="text-align: center;">Department of Health Health Regulation & Licensing Administration Intermediate Care Facilities Division 890 North Capitol St., N.E. Washington, D.C. 20002</p>
S 094	1611.1(b) Personnel Records (b) Applicant's educational credentials; This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to ensure the personnel record for one (1) of seventeen (17) employees had a copy of their education credentials. (Employee #17) The finding includes: Review of personnel records on August 26, 2011, at approximately 2:00 p.m., revealed that Employee #17's record failed to have evidence of their education credentials. The Human Resources Director (HRD) on August 26, 2011, at approximately 2:40 p.m. acknowledged that he had failed to ensure that a copy of the employees education credentials was in the record.	S 094	<p>S 094 The Martin Pollak Project, Inc.. (MPP) will require all newly hired employees to produce documentation of educational credentials prior to beginning employment at MPP. Regular personnel audits will check to ensure that documentation is present in the file.</p> <p>Employee #17 has provided the missing documentation and is now in the personnel file.</p> <p style="text-align: right;">8/27/11 Completed and Ongoing</p>
S 096	1611.1(d) Personnel Records (d) Annual performance evaluations signed by both the employee and supervisor; This CONDITION is not met as evidenced by:	S 096	

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

STATE FORM

TITLE

HR Director

(X5) DATE

10/3/11

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If continuation sheet 1 of 4

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S 096	Continued From page 1 Based on record review and interview, the Child-Placing Agency (CPA) failed to ensure that employees had annual performance evaluations signed by both the employee and the supervisor, for six (6) of seventeen (17) employees hired by the agency. (Employees #3, #4, #5, #6, #12, and #14) The finding includes: Review of personnel records beginning on August 25, 2011, at approximately 9:30 a.m. revealed that Employees #3, #4, #5, #6, #12, and #14 had no evidence of an annual performance evaluation signed by both the employees and the supervisor for review. The Human Resources Director on August 26, 2011, at approximately 2:50 p.m. acknowledged that he had failed to ensure that evidence of an annual performance evaluation signed by both the employee's and the supervisor for review was in the record for Employees #3, #4, #5, #6, #12 and #14.	S 096	S 096 MPP will ensure that all employees receive timely, completed and signed annual evaluations. MPP HR will provide all supervisors with a list of evaluation due dates and will provide reminders to the supervisors prior to the due date. This will be completed by 10/28/11. Regular personnel audits will check to ensure that the evaluations are present in the files. The missing evaluations for Employees #3,4,5,6,12 and 14 will be completed by 10/28/11. 10/28/11
S 103	1611.1(k) Personnel Records (k) Physical examination reports required in section 1612.2; This CONDITION is not met as evidenced by: Based on record review and interview, the agency failed to ensure that four (4) of seventeen (17) employees had available for review, a current physical examination report as required in section 1612.2. (Employees #10, #14, #15 and #17) The finding includes:	S 103	S 103 MPP will ensure that all physical examinations are completed annually and are present in the employees medical files. Regular personnel audits will check to ensure that the TB and Physical examination results are present in the file. Employees will be provided with a list of upcoming expiration dates so that they have ample time to have an updated physical completed. 10/28/11 The missing physical reports for Employees #10,14,15 and 17 will be completed and turned in to HR by 10/28/11.

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S 103 Continued From page 2

S 103

Review of personnel records beginning on August 25, 2011, at approximately 9:30 a.m. revealed that Employees #10, #14, #15 and #17 did not have current physical examination report in their records.

The Human Resources Director on August 26, 2011, at approximately 3:00 p.m. acknowledged that he had failed to ensure that Employees #10, #14, #15 and #17 had available for review current physical examination reports.

S 182 1619.1 Case Plan

S 182

Each child-placing agency shall develop a written case plan on each child prior to placement. In cases of emergency placements, the assessment and case plan shall be initiated within one (1) week and completed within six (6) weeks of placement.

This CONDITION is not met as evidenced by: Based on record review and interview, the Child-Placing Agency (CPA) failed to evidence that a written case plan had been developed for each child prior to placement for 1 of 4 foster children in the sample. (Foster Child #1)

The finding includes:

Review of Foster Child #1's record beginning on August 24, 2011, at approximately 10:15 a.m. revealed no evidence that the Child Placing Agency (CPA), had develop a written case plan for Foster Child #1 prior to placement.

The records coordinator (RC) on August 24, 2011 at approximately 10:15 a.m. acknowledged that

S 182 1619.1 Case Plan. A case plan is to be completed within 30 days of a child entering into foster care and thereafter every 180 days. To ensure that this practice is achieved, the Program Director and supervisor will review the CFSA Management Report that covers a period of 60 days for case plans at the end of each month. The information regarding case plans due dates is 1) discussed in the daily FLASH meetings with the social workers; 2) documented in the FLASH book; 3) reiterated in supervision; and 4) an email is sent to the social worker from the supervisor on that day notified in FLASH.

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S 182	Continued From page 3 the social worker assigned to Foster Child #1's case had failed to ensure that a copy of the current case plan was in the child's records.	S 182	Verification of the case plan's completion is completed by the supervisor, stated and documented in FLASH, and upon acquisition of the case plan where all related parties' have signed, the supervisor will initial and report in FLASH that the entire process has been completed. Completion of this process is also documented in the FLASH book. The original will be filed in the chart by the Records Coordinator after she verifies its receipt in her Documents Received File. Copies of the case plans will be kept by the supervisor as another checks and balances measure. Random case file reviews will be completed every 60-90 days by the Program Director and/or her designee to ensure that completed case plans are filed in the appropriate client's chart and in the appropriate section of the chart. The case plan for Foster Child #1 has been placed in the child's record. 9/30/11 COMPLETED