

Received
 11/25/11

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HCA-0031	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/02/2011
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NAME OF PROVIDER OR SUPPLIER LINAC SERVICES, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6856 EASTERN AVENUE, NE, SUITE 320A WASHINGTON, DC 20012
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H 000	INITIAL COMMENTS An annual licensure survey was conducted from October 31, 2011, through November 2, 2011, to determine compliance with Title 22 DCMR, Chapter 39. The findings of the survey were based on a random sample of ten (10) clinical records based on a census of seventeen (17) patients, nine (9) personnel files based on a census of twenty-five (25) employees and one(1) home visit. The findings of the survey were based on staff interviews, review of clinical and administrative records.	H 000	Corrective Action Documentation will be in all employees file to prove their previous employment verification. Measures To Put in Place LINAC personnel department will ensure that all employees previous employer are called to verify their employment and their work history by way of reference check and documentation placed in the employees' file.	12/25/11 12/25/11
H 150	3907.2(f) PERSONNEL Each home care agency shall maintain accurate personnel records, which shall include the following information: (f) Verification of previous employment: This Statute is not met as evidenced by: Based on record review and interview, it was determined the Home Care Agency failed to maintain accurate personnel records, which included documentation of verification of previous employment for seven (7) of nine (9) employees in the sample. (Employee #2- HHA, Employee #3 -HHA, Employee #4 -HHA, Employees#5- LPN, Employee #6- RN, and Employee #7- LPN) The findings include: A record review on November 1, 2011, starting at approximately 11:30 a.m. revealed that there was no documented evidence of verification of previous employment for the aforementioned employees.	H 150	Employee #2, #3, #4, #5, #6 and #7 previous job verification will on the file for review Monitoring plan LINAC's Quality Assurance committee will perform employee file audit periodically Director of Personnel will ensure that this Requirement is met before hiring..	12/25/11

Health Regulation & Licensing Administration

M. Melville

TITLE *Director*

(X6) DATE *11/24/11*

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

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R 125	<p>4701.5 BACKGROUND CHECK REQUIREMENT</p> <p>The criminal background check shall disclose the criminal history of the prospective employee or contract worker for the previous seven (7) years, in all jurisdictions within which the prospective employee or contract worker has worked or resided within the seven (7) years prior to the check.</p> <p>This Statute is not met as evidenced by: Based on the interview and record review, the Home Care Agency failed to ensure criminal background checks for the previous seven (7) years, in all jurisdictions where staff had worked or resided within the seven (7) years prior to the check, for one (1) of nine (9) staff employed. (Employee #6- HHA)</p> <p>The finding includes:</p> <p>On November 1, 2011, a review of employee #6's record at approximately 2:00 p.m. revealed an application dated November 23, 2010 in which the employee indicated she worked in Capitol Heights, Maryland in 2008. Further review of the record revealed a document entitled "Criminal History Request" dated December 28, 2009.</p> <p>Additionally, there was no documented evidence a criminal background check was conducted for the state of Maryland.</p> <p>During a face to face interview with the director of nursing (DON) on November 1, 2011 at approximately 3:00 p.m., the finding was acknowledged.</p>	R 125	<p>Corrective Action</p> <p>LINAC will document and check criminal background disclosure for the previous seven years for which the prospect employee have lived or worked.</p> <p>Measures To Put in Place</p> <p>Director of personnel will ensure That this requirement is met before hiring.</p> <p>Monitoring</p> <p>DON will ensure that this requirement is made before assignment is given. The chart audit will be done by the quality assurance team twice a year</p>

Health Regulation & Licensing Administration

monelle

TITLE *Director*

(X6) DATE *11/24/11*

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

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H 262 Continued From page 2

Each clinical record shall include the following information related to the patient:

(b) Source of referral, including date of discharge if from a hospital or extended care facility;

This Statute is not met as evidenced by: Based on record review and interview, the Home Care Agency (HCA) clinical records failed to include the source of referral for three (3) of ten (10) patients. (Patients #1, #2 and #3)

The findings includes:

1. On October 31, 2011, a review of patient #1's record at approximately 10:10 a.m. revealed a document entitled "Demographic Information" dated September 23, 2011 in which the referral source area was blank.

During a face to face interview with the director of nursing (DON) on October 31, 2011, at approximately 10:45 a.m., it was acknowledged Patient #1's source of referral was not in the medical record at the time of this survey.

2. On October 31, 2011, a review of patient #2's record at approximately 10:50 a.m. revealed a document entitled "Demographic Information" dated May 25, 2011 in which the referral source area was blank.

During a face to face interview with the DON on October 31, 2011, at approximately 11:40 a.m., it was acknowledged Patient #2's source of referral was not in the medical record at the time of this survey.

H 262

Corrective actions

LINAC will make sure that a record of demographic information is kept on file on all the patients stating referral source.

Measures To Put in Place

LINAC's clinical personnel department will ensure that all patients referral source are documented .completeness of

Patient's #1 and #2,#3 referral sources are updated and documented.

Monitoring plan

LINAC's Clinical Director and the Registered Nurses in charge of the each patient shall ensure that all patients referral source is documented. Quality Assurance chart review done every Three months.

12/25/11

12/25/11

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H 262	Continued From page 3 3. On October 31, 2011, a review of patient #3's record at approximately 12:45 p.m. revealed a document entitled "Demographic Information" dated May 2, 2011 in which the referral source area was blank. During a face to face interview with the DON on October 31, 2011, at approximately 1:30 p.m., it was acknowledged Patient #3's source of referral was not in the medical record at the time of this survey.	H 262	Corrective actions LINAC will make sure that a record of demographic information is kept on file on all the patients stating referral source. 12/25/11
H 354	3914.3(c) PATIENT PLAN OF CARE The plan of care shall include the following: (c) The goals of the services to be provided, including the expected outcome, based upon the immediate and long-term needs of the patient; This Statute is not met as evidenced by: Based on record review and interview the Home Care Agency (HCA) failed to ensure the plan of care (POC) included the goals of the services to be provided, including the expected outcome, based upon the immediate and long-term needs of the patient for one(1) of ten (10) patients in the sample. (Patient #1) The finding include: On October 31, 2011, a record review of Patient #1's record at approximately 10:10 a.m. revealed a Plan of Care (POC)with certification period September 23, 2011 until March 22, 2012. There was no documented evidence of goals of the services to be provided, including the expected outcome, based upon the immediate and long-term needs.	H 354	Measures To Put in Place LINAC's clinical personnel department will ensure that all patients referral source are documented .completeness of 12/25/11 Patient's #1 and #2,#3 referral sources are updated and documented. Monitoring plan LINAC's Clinical Director and the Registered Nurses in charge of the each patient shall ensure that all patients referral source is documented. Quality Assurance chart review done every Three months. 12/25/11

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H 354	Continued From page 4 During a face to face interview with the director of nursing (DON) on October 31, 2011, at approximately 10:45 a.m., she indicated the aforementioned POC did not include goals of the services to be provided, including the expected outcome, based upon the immediate and long-term needs.	H 354	Corrective Action LINAC's plan of care will include expected long and short term outcome based on the immediate and long term needs of the patient. 3/25/12
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 record review and interview, the Home Care Agency (HCA) failed to ensure the plan of care (POC) included provisions relating to the re-evaluation of services, discharge planning, referral of services and continuation or renewal of services for one (1) of ten (10) patients in the sample. (Patient #1) The findings include: On October 31, 2011, a review of patient #1's record at approximately 10:10 a.m. revealed a plan of care (POC) with certification period from September 23, 2011 until March 22, 2012. There was no documented evidence that the aforementioned POC included evidence of provisions relating to the re-evaluation of services, discharge planning, referral of services and continuation or renewal of services.	H 357	Measures To Put in Place The Clinical director will re-orient Registered nurses on the inclusion of the long-term and immediate goals on assessment. 3/25/12 Monitoring plan The Clinical director will ensure that the plan of care addresses long-term and immediate goals. Review of plan of care for completeness must be done as soon as generated and periodically. Quality assurance chart review every Three months. 3/25/12

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H 357	Continued From page 5 During a face to face interview with the director of nursing (DON) on October 31, 2011 at approximately 10:45 a.m., she indicated the aforementioned POC did not include provisions relating to the re-evaluation of services, discharge planning, referral of services and continuation or renewal of services.	H 357	Corrective Action LINAC's plan of care will include Plans relating to reevaluation, discharge, referral, continuation and renewal of services. 12/25/11
H 359	3914.3(h) PATIENT PLAN OF CARE The plan of care shall include the following: (h) Prognosis, including rehabilitation potential; This Statute is not met as evidenced by: Based on record review and interview, the home care agency (HCA) failed to ensure the plan of care (POC) included prognosis, including rehabilitation potential for one(1) of ten(10) patients in the sample. (Patient #1) The finding includes: On October 31, 2011, a record review of Patient #1's record at approximately 10:10 a.m. revealed a plan of care (POC) with certification period of September 23, 2011 until March 22, 2012. There was no documented evidence that the aforementioned POC included prognosis, including rehabilitation potential. During a face to face interview with the director of nursing (DON) on October 31, 2011 at approximately 10:45 a.m., she indicated the aforementioned POC did not include prognosis, including rehabilitation potential.	H 359	Measures To Put in Place The Clinical director will hold clinical Meeting with Registered nurses on the re-evaluations of services, rehabilitation, discharge planning, referral services, the continuation of services and renewal of services as the integral part of the plan of care Monitoring plan The Clinical Director will ensure that the plan of care addresses the provision of reevaluations of services policies, discharge planning, referral services, the continuation of services and renewal of services. Review of patients progress and further need determined by joint review of clients case done by the DON and registered nurse on at sixty-two Days progress review. 12/25/11 12/25/11

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H 361	Continued From page 6	H 361	
H 361	<p>3914.3(j) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(j) Psychosocial needs of the patient;</p> <p>This Statute is not met as evidenced by: Based on record review and interview the Home Care Agency (HCA) failed to ensure the plan of care (POC) included the psychosocial needs of the patient for one (1) of ten(10) patients in the sample. (Patient #1)</p> <p>The finding includes:</p> <p>On October 31, 2011, a review of Patient #1's record at approximately 10:10 a.m. revealed a POC with certification period September 23, 2011 until March 22, 2012. There was no documented the aforementioned POC included psychosocial needs of the patient.</p> <p>During a face to face interview with the director of nursing (DON) on October 31, 2011 at approximately 10:45 a.m., she indicated the aforementioned POC did not include psychosocial needs of the patient.</p>	H 361	<p>Corrective Action</p> <p>LINAC's plan of care will include psychosocial needs of all patients. 3/15/12</p> <p>Measures To Put in Place</p> <p>The Clinical director will hold clinical meeting with Registered nurses on the inclusion of the psychosocial needs of all patients in the plan of care 3/15/12</p>
H 363	<p>3914.3(i) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(i) Identification of employees in charge of managing emergency situations;</p> <p>This Statute is not met as evidenced by:</p>	H 363	<p>Monitoring plan</p> <p>The Clinical director will ensure that the plan of care addresses the psychosocial needs of all patients in the plan of care 3/15/12</p>

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H 363	<p>Continued From page 7</p> <p>Based on record review and interview the home care agency (HCA) failed to ensure the plan of care (POC) included identification of employees in charge of managing emergency situations for one (1) of ten(10) patients in the sample. (Patient #1)</p> <p>The finding includes:</p> <p>On October 31, 2011, a review of patient #1's record at approximately 10:10 a.m. revealed a POC with certification period September 23, 2011 until March 22, 2012. There was no documented evidence that the aforementioned POC included the identification of employees in charge of managing emergency situations.</p> <p>During a face to face interview with the DON on October 31, 2011 at approximately 10:45 a.m., she indicated the aforementioned POC did not include identification of employees in charge of managing emergency situations.</p>	H 363	<p>Corrective Action</p> <p>LINAC's plan of care will include Employee's role in managing Emergency situation.</p> <p>Measures To Put in Place</p> <p>The Clinical Director will hold clinical meeting with Registered nurses on the inclusion of the employees in charge of emergencies for all patients in their plan of care</p>	12/25/11 12/25/11
H 364	<p>3914.3(m) PATIENT PLAN OF CARE</p> <p>The plan of care shall include the following:</p> <p>(m) Emergency protocols; and...</p> <p>This Statute is not met as evidenced by: Based on record review and interview the home care agency (HCA) failed to ensure the plan of care (POC) included emergency protocols for one (1) of ten (10) patient's in the sample. (Patient #1)</p> <p>The finding include:</p>	H 364	<p>Monitoring plan</p> <p>The Clinical Director reviews the POC as soon as generated, ensuring completeness.</p>	12/25/11

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H 430	<p>Continued From page 9</p> <p>month for four (4) months to assess general health status, monitor pain management, safety/fall precautions.</p> <p>Further review of the record revealed there was no documented evidence the skilled services provided had been evaluated by the agency. Additionally, there was no evidence the summary had been sent to the patient's physician.</p> <p>During a face to face interview with the director of nursing on October 31, 2011 at approximately 11:40 a.m., she indicated the evaluation of the skilled services had not been conducted by the agency.</p>	H 430	<p>Corrective Action</p> <p>LINAC will review and evaluate skilled services provided within sixty-two calendar days. 12/25/11</p> <p>Measures To Put in Place</p> <p>Linac will put in place care coordination structure which will track visits, reviews and evaluate services rendered and have a documentation to show sixty-two calendar days evaluation standard is met. Progress report sent to the physician every sixty-two days. The LPN and RN will give weekly updates to the clinical Director. The clinical Care coordination training is given to clinical staff every three months. 12/25/11</p> <p>Monitoring</p> <p>The clinical record will be reviewed by the clinical Director every two-weeks to ensure that visits agrees with the plan of care. 12/25/11</p>