

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR-0006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/15/2017
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NAME OF PROVIDER OR SUPPLIER GRAND OAKS ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 5901 MACARTHUR BLVD NW WASHINGTON, DC 20016
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*Received
3/12/17
Cm*

(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
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R 000 Initial Comments

On February 1, 2017, the Health Regulation and Licensing Administration's, Intermediate Care Facilities Division (ICFD) received a copy of a complaint forwarded to the assisted living residence's (ALR) executive director indicating the presence of vermin in the dining room area on January 31, 2017. The ALR's executive director responded to the complainant on February 1, 2017, and indicated that follow-up would occur with the exterminator. On February 6, 2017, the ALR's executive director was contacted by the ICFD, to ascertain information regarding the actions taken to resolve the expressed complaint of vermin. The ALR provided documentation that a pest control agency had visited the ALR on February 1, 2017.

On February 15, 2017, surveyors from the Health Regulation and Licensing Administration's, ICFD and Food Safety and Hygiene Investigation Services Division conducted an inspection at the assisted living residence to review a complaint regarding observed vermin in the dining room on January 31, 2017.

The results of the investigation revealed evidence of vermin in the food services area as indicated in the body of the deficiency report.

R 981 Sec. 1004a General Building Interior

(a) An ALR shall ensure that the interior of its facility including walls, ceilings, doors, windows, equipment, and fixtures are maintained structurally sound, sanitary, and in good repair. Based on observations and interviews, the ALR failed to maintain sanitary conditions in the food service area.


R 000

Grand Oaks is filing this response for the sole purpose of confirming compliance with requests of Department of Health in receipt of the survey report related to the survey conducted on February 15, 2017. This response is not an admission of liability or statement of agreement with respect to issues identified in discussions with the agency but is submitted to demonstrate regulatory compliance.

1004a General Building Interior
An ALR shall ensure that the interior of its facility including walls, ceilings, doors, windows, equipment, and fixtures are maintained structurally sound, sanitary, and in good repair. Based on observations and interviews, the ALR failed to maintain sanitary conditions in the food service area.

I. Corrective Action

In response to the cutting boards containing crevices, additional cutting boards were already on order by the

Health Regulation & Licensing Administration LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE EXECUTIVE DIRECTOR	(X6) DATE 03/10/17
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The finding includes:

- The facility failed to maintain the kitchen service area in a clean and sanitary manner free from roaches.

On February 15, 2017 at 11:12 a.m., an inspection of the facility's food service and dining areas was conducted by the Department of Health Food Safety and Hygiene Investigation Services Division. The ALR inspector accompanied the food service inspector to conduct the observations.

Review of the Food Establishment Inspection Report, dated February 15, 2017, revealed that several cutting boards contained crevices, wiping cloths were not stored in the sanitizer, and live roach and mice droppings were observed along the baseboard of the wall during the inspection. Additionally, non food contact surfaces and stainless steel storage areas were observed to contain food particles and debris.

On February 15, 2017, at 4:35 p.m., DOH informed the ALR to discontinue food preparation and service from the kitchen until the live vermin and roaches were eradicated, and until the food service area was thoroughly cleaned. After which, the kitchen would be reinserted by the DOH. On February 16, 2017, the ALR submitted a plan of correction to DOH to address the aforementioned identified deficient practices.

On February 16, 2017, all deficiencies cited in the Food Establishment Inspection Report, observed on February 15, 2017, were abated and the facility was cleared to resume regular operations.

Executive Chef as. Evidence of the order was provided to the inspector at the time of inspection. Cutting boards have now been replaced.

In response to the wiping cloths, they were immediately placed in sanitizer.

In response to the baseboard and storage areas, the kitchen was immediately swept and professionally cleaned that evening.

In response to the door stripping and ceiling pipe, the maintenance team immediately repaired the areas.

In response to the landscaping concern, pest control inspected the area and found no evidence. Our landscaping contractor will continue to monitor and trim shrubbery as appropriate.

In response to the grease and flooring, the area was

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R 981

At the time of the survey, the facility failed to maintain sanitary conditions in the food service area.

2. The facility failed to maintain the kitchen service area in a clean and sanitary manner free from rodents.

On February 16, 2017 at approximately 8:00 a.m., an inspector from HRLA's Rodent Control Division conducted an onsite inspection of the interior and exterior of the food service area. The inspection revealed the following concerns:

- The stripping on the delivery door was not adequately positioned to prevent the entrance of rodents (not flush to the ground).
- The north dining room entrance exterior had excessive ivy and shrubbery, which presented a potential staging area for rodents.
- There was a heavy accumulation of grease behind the stove, which presented a potential feeding area for rodents. It should be noted that mice droppings were observed in the area.
- There was a ceiling pipe in the mechanical room that had a hole around it where the coupling was missing which presented a potential entrance for rodents.

immediately professionally cleaned and new flooring has been installed.

II. How to Identify Other
Executive Chef walked the kitchen to ensure all evidence of activity was removed. Professional cleaning company was contacted to steam clean the kitchen. Director of Facilities walked the exterior of the community and made necessary door sweep repairs. New Pest Management company was contracted and began service on 03/01/2017.

III. Systemic Changes
Grand Oaks engaged in a contract with a new pest control provider effective 03/01/2017. The new pest provider also services Sibley Memorial Hospital.

Executive Chef, or designee, will conduct daily kitchen inspections. Director of Facilities, or designee, will conduct regular community environmental rounds.

- IV. Monitoring Process
Executive Director, or designee, will conduct random inspections of the kitchen for the next 3 months.
Senior Vice President, or designee, will conduct random inspections of the kitchen for the next 3 months.
Grand Oaks will partner with a 3rd party kitchen inspector to conduct routine inspections between licensure visits.

- V. Date of Completion 03/15/17
March 15, 2017 and and ongoing
ongoing