

Health Regulation & Licensing Administration

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                       |   | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>ALR-0031</b>                    | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____  | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>03/28/2017</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>THE MARIGOLD AT 11TH STREET</b> |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2905 11TH STREET NW<br/>WASHINGTON, DC 20001</b> |  |   |
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| R 000  | <p><b>Initial Comments</b></p> <p>On February 20, 2017, at 2:56 p.m., the D.C. Long Term Care Ombudsman office on behalf of Resident #1, filed a complaint with the Department of Health/Health Regulation and Licensing Administration's Intermediate Care Facilities Division (DOH/ HRLA/ICFD) against "The Marigold at 11th Street." The complaint identified several allegations concerning the food services and residents' rights. The Marigold is an assisted living residence that currently serves 13 residents with various physical and cognitive disabilities. Based on the nature of the complaint, an onsite investigation commenced on March 1, 2017 and concluded on March 28, 2017. The following investigative findings were based on observation, interview and record review, and revealed the following:</p> <p><b>Allegation #1:</b> Residents are repeatedly served the same foods.</p> <p><b>Conclusion:</b> This allegation was substantiated and a deficient practice was cited in this report.</p> <p><b>Allegation #2:</b> Residents are served foods that are not appropriate for individuals with chronic health problems.</p> <p><b>Conclusion:</b> This allegation was substantiated and a deficient practice was cited in this report.</p> <p><b>Allegation #3:</b> Residents are not served enough fresh fruits and vegetables.</p> <p><b>Conclusion:</b> The allegation was substantiated and a deficient practice was cited in this report.</p> <p><b>Allegation #4:</b> Meats are frozen, and often not "tasty" when served.</p> | R 000  | <p><i>All residents had the potential to be affected by this deficiency</i></p> <p><i>ALA learned of complaint upon Surveyors arrival. ALA wasn't privy to all allegations at the time of survey.</i></p> <p><i>Mia Senior Living Solutions hired a RD/LD. The RD/LD has since created menus for safe cooks to follow. Fresh fruits are currently on menu meals are served in accordance with menu.</i></p> <p><i>Menus are monitored by RD/LD. ALA notifies RD/LD of changes in residents condition such as IL: Weight fluctuation etc.</i></p> | <i>4/1/17 ongoing</i>   |

Health Regulation & Licensing Administration  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Anna M. Linn ALA*

TITLE

(X6) DATE

*6/3/17*

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| R 000 | <p>Continued From page 1</p> <p>Conclusion: The allegation was unsubstantiated.</p> <p>Allegation #5: The agency failed to coordinate services to ensure that services were not interrupted.</p> <p>Conclusion: The allegation was unsubstantiated.</p> <p>Allegation #6: A resident and an aide were mistreated by staff.</p> <p>Conclusion: The allegation was unsubstantiated.</p> <p>Listed below are abbreviations used throughout the body of this report.</p> <p>ALA - Assisted Living Administrator<br/>ALR - Assisted Living Residence<br/>DOH - Department of Health<br/>ICFD - Intermediate Care Facilities Division</p> | R 000 |   |  |
| R 273 | <p>Sec. 503.2 Dignity.</p> <p>(2) Control time, space, and lifestyle;<br/>Based on observation and interview, the ALR failed to ensure residents' preferences were incorporated into their day to day schedule of activities for one of twelve residents in the facility. (Resident #1)</p> <p>The finding includes:</p> <p>1. ALR prohibited residents from eating their meals prior to the scheduled time as evidenced by the following:</p> <p>During an interview with the ALR cook on March 1, 2017, at 7:35 a.m., Resident #2 was observed</p>  | R 273 | <p><i>ALL residents had the potential to be affected by this deficiency</i></p> <p><i>ALA spoke with surveyor at length in regards</i></p> <p><i>continue</i></p> |  |

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| R 273  | Continued From page 2<br><br>seated at the dining room table eating breakfast. During this time, Resident #2 was the only resident eating. The ALR cook stated that Resident #2 eats early because the bus to transport him/her to the day program arrives prior to the 8:00 a.m. scheduled breakfast time. At 7:45 a.m., Resident #1 entered the dining room and sat down. The surveyor asked the resident "Are you ready for breakfast." The ALR cook overheard the question and quickly responded, "Residents eat at 8:00 a.m."<br><br>2. ALR restricted residents from using the dining room as evidenced by the following:<br><br>On March 1, 2017, at 7:55 a.m., interview with the ALR cook revealed residents were restricted access to the dining area before and after meals. The ALR cook stated that the dining area is cleaned after meal service; and therefore, residents were not allowed in the dining room during that time. The ALR cook explained that once the scheduled mealtime was finished, the dining area was closed until the next scheduled mealtime.<br><br>On March 1, 2017, at 10:40 a.m., the ALA hired on February 7, 2017 was interviewed to ascertain the use of the dining room. The ALA indicated that the dining room was designed to be used as a multi-purpose room and provided an area to watch TV, play games, and to read magazines. The ALA revealed that she was unaware of the time restriction for the use of the dining room. | R 273  | <i>Continue.</i><br><i>to residents being restricted from the dining area/multi-purpose room. This was a practice prior to ALA arrival. When it was brought to the ALA attention it was immediately changed.</i><br><br><i>As far as ALA is concerned this facility operates on 3 shifts plenty of downtime to mop the area. Again resident rights were discussed with cook &amp; documentation of behaviors are in file and ALA will continue to follow up in accordance to handbook.</i><br><br><i>ALA was hired on 2/23/17</i> | <i>3/2/17</i><br><i>&amp;</i><br><i>ONGOING</i>                 |
| R 524  | Sec. 607a3 Services To Be Provided<br><br>(3) A variety of fresh and seasonal foods, adapted to the food habits, preferences, and   | R 524  | <i>All residents had the potential to be affected by this deficiency</i>  |   |

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| R 524 | <p>Continued From page 3</p> <p>physical abilities of the residents;<br/>Based on observation and interview, the ALR failed to have a variety of fresh and seasonal food (fruits and vegetables) for (12) of twelve (12) residents in the facility. ( Resident #1, #2, #3, #4, #5, #6, #7, #8, #9, #10, #11, and #12)</p> <p>The finding includes:</p> <p>1. On March 1, 2017, at 8:00 a.m., the kitchen was inspected to determine the supply of fresh fruits and vegetables. The refrigerator was scantily supplied with three (3) apples, a head of lettuce, and two (2) green peppers. Interview with the ALR cook at 8:05 a.m. indicated that there were no other fresh fruits or vegetables because "the residents ate them all up." She went on to say that a purchase order for groceries had been placed and was expected to arrive later that day.</p> <p>On March 8, 2017, at 4:30 p.m., a review of the menus for February 2017 revealed they failed to include fresh fruits.</p> <p>On March 1, 2017, at 9:30 a.m., Resident #1 was interviewed to obtain information concerning his/her complaint about not having a variety of food options. The resident indicated that the food items were repeatedly served and residents were not provided with food substitutions.</p> <p>On March 6, 2017, 2:47 p.m., the February 2017 menus were reviewed and revealed food items that were frequently repeated, such as macaroni and cheese (served 6 times), mixed vegetables (served 10 times), and tuna and macaroni (served 6 times). The menus did not reflect any substitutions.</p> <p>Resident #1 also complained about his/her</p> | R 524 | <p><i>At the time of this particular inspection the food arrived for new menu to start while surveyor was within the building. What is noted is correct. What was used prior was a preprinted menu from US Foods. With Mia Senior living Solutions contracting a RD/LD this has been corrected. Menus arent only signed but RD/LD has meetings as needed with cooks. ALA contacts RD/LD with updates about residents as well as Delegating RN</i></p> | <p><i>4/1/17<br/>+ ongoing</i></p> |
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| R 524  | Continued From page 4<br><br>hypertension and being served ham for breakfast. On March 1, 2017, at 7:35 a.m., observation of the breakfast confirmed that ham was served for the meal. Interview with the ALR cook and review of the February and March 2017 menus revealed no substitutions were listed.  | R 524  | <i>ALR facility has substitutions currently if first choice isn't an option for residents.</i>  |   |
| R 712  | Sec. 802 6 Medical, Rehabilitation, Psychosocial Assess.<br><br>(6) Current dietary needs and restrictions; Based on observation, interview and record review, the ALR failed to ensure that residents' dietary needs and restrictions had been addressed for seven (7) of the twelve (12) residents in the facility. (Residents #1, #2, #3, #5, #6, #8, and #12)<br><br>The finding includes:<br><br>On March 1, 2017, at 7:35 a.m., the ALR cook was observed preparing breakfast for the residents. The breakfast consisted of ham, eggs, cheese on whole wheat toast, orange slices, cold cereal, milk and cranberry juice. When asked to review the menu for March 1, 2017, the ALR cook presented a menu that failed to coincide with the food being served. The menu reflected ½ cup of orange juice, 1 French toast with cinnamon sugar, margarine, ½ cup of hot/cold cereal, 1 cup of 2% milk, and coffee or tea.<br><br>On March 1, 2017, at 10:40 a.m., the ALA was interviewed to ascertain why the menu was not followed. The ALA confirmed that the menu items were different because the purchase order for the new menu items had not been delivered. She explained that a new system had been implemented that required the dietitian to design | R 712  | <i>All residents had the potential to be affected by this deficiency</i><br><br><i>The ALR can only follow physicians orders. ALA and ALR cook got the menu from the RD/LD and ordered food for that cycle unfortunately it was in the works during the inspection. ALR identified the issue and correction was in process at the time of inspection. If a physician prescribes a diet that is regular for a known diabetic ALR isn't in a position to challenge it but will document thoroughly.</i> | <i>4/1/17</i><br><i>ONgoing</i>                                 |

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| R 712  | <p>Continued From page 5</p> <p>menus that included the portions to be served. The ALA agreed that the new menus did not specify dietary modifications for therapeutic diets.</p> <p>On March 9, 2017, a review of resident records failed to include a physical assessment to determine residents' dietary needs. The records, however, included a document entitled "Face Sheet" that had demographic information (diagnoses and diet). Further review of the document revealed 7 of 12 residents were prescribed modified diets:</p> <p>Resident #1 was diagnosed with hypertension and was prescribed a low sodium, low cholesterol diet.</p> <p>Resident #2 was diagnosed with hypertension and obesity, and was prescribed a controlled carbohydrate diet.</p> <p>Resident #3 was prescribed a regular diet; however, the resident was diagnosed with type 2 diabetes and hypertension.</p> <p>Resident #5 was diagnosed with type 2 diabetes and hypertension, and was prescribed a low cholesterol, no concentrated sweets diet.</p> <p>Resident #6 was diagnosed with hypertension, coronary artery disease, hyperlipidemia, vitamin D deficiency, diabetes mellitus, congestive heart failure, renal insufficiency and peripheral vascular disease. The resident was prescribed a low sodium, low cholesterol, low fat diet.</p> <p>Resident #8 was diagnosed with type 2 diabetes, vitamin deficiency, and pericarditis. The resident was prescribed a no added salt, no concentrated sweets diet.</p> | R 712  | <p><i>ALA moving forward on new admission will have prescribed diets noted on physical assessment form. ALA started 2/23/17 and can't back date on files. ALR cook has knowledge of who is on modified diets it's posted in the kitchen. Although available salt isn't on tables and residents who require low sodium are encouraged not to use added salt as well as sweet + low is provided and or available for our diabetics. Diets are to be followed as per physician order; modified or changed per physician order. Menus will be reviewed and signed by RD/LD, RD/LD will be consulted as needed to ensure residents nutritional requirements are met</i></p> |

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| R 712 | Continued From page 6<br><br>Resident #12 was prescribed a regular diet; however, the records revealed that the resident was diagnosed with hypertension, diabetes mellitus and hyperlipidemia.<br><br>There was no evidence to show that the ALR were providing modified diets in accordance with residents' needs.  | R 712 |  |  |
| R 981 | Sec. 1004a General Building Interior<br><br>(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.<br><br>The findings include:<br><br>On March 20, 2017, at 1:00 p.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 and an ICFD surveyor. Employee #3 (ALR cook) accompanied the inspectors to observe the environment.<br><br>Observation of the kitchen revealed the following:<br><br>- Several cutting blocks and boards contained crevices.<br>- The inside bottom of the refrigerator had onion skins and food debris.<br>- There was no air gap space above the floor drain underneath the three compartment sink and the preparation sinks. | R 981 | <i>All residents had the potential to be affected by this deficiency</i><br><br><i>ALA purchased new cutting boards. ALR cooks have a cleaning schedule they sign off on that would cue them in on what needs to be looked at and addressed daily.</i><br><br><i>ALA contractor will address the pipes under sink in kitchen on or before 6/12/17.</i> | <i>4/15/17 ongoing</i><br><br><i>6/12/17</i> |

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| R 981 | <p>Continued From page 7</p> <p>On March 20, 2017, at 1:35 p.m., the ALR administrator and Employee #3 (cook) were informed by the Department of Health Food Safety and Hygiene Investigator that the facility had fourteen (14) days to correct the above deficiencies and to notify the ICFD inspector when the deficiencies were corrected.</p> <p>At the time of the survey, the facility failed to maintain sanitary conditions in the food service area.</p> | R 981 | <p><i>ALA addressed all items of concern for the department up to and including purchasing test strips from Ecotek to be able to test if chemicals used for sanitation are within MFD range.</i></p> <p><i>It is the responsibility of the ALR cook to keep the kitchen sanitary.</i></p> | <p><i>4/1/17</i></p> <p><i>ongoing</i></p> |
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