

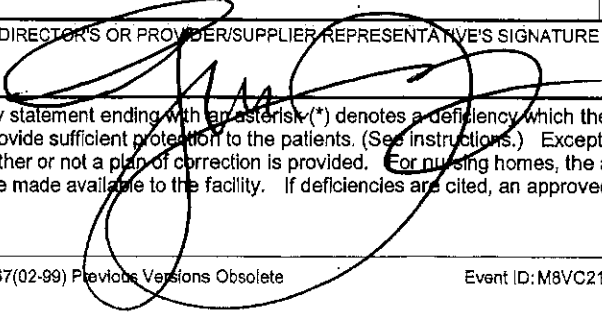
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/03/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 095021	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/28/2019
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NAME OF PROVIDER OR SUPPLIER HEALTH & REHABILITATION CENTER AT THOMAS CIRCLE	STREET ADDRESS, CITY, STATE, ZIP CODE 1330 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20005
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(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) COMPLETION DATE
K 000	INITIAL COMMENTS	K 000	The Residences at Thomas Circle files this Plan of Correction for the purpose of regulatory compliance. The facility submits this document to comply with applicable law and not as an admission or statement of agreement of deficient practices.	
K 353 SS=F	<p>Sprinkler System - Maintenance and Testing CFR(s): NFPA 101</p> <p>Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available.</p> <p>a) <u>Date sprinkler system last checked</u></p> <p>b) <u>Who provided system test</u></p> <p>c) <u>Water system supply source</u></p> <p>Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations and staff interview, fire sprinkler heads were not maintained to ensure proper operation in the event of an emergency and escutcheon plate fittings were rusted. This deficient practice could prevent the fire sprinkler from discharging in a fire emergency and corrosion in escutcheon plate fittings could affect sprinklers from operating as expected.</p>	K 353	<p>Sprinkler System - Maintenance and Testing CFR(s): NFPA 101</p> <p>Sprinkler heads</p> <p>1. No specific residents identified. 5/24/19</p> <p>2. Sprinkler heads and escutcheons noted marred with paint or rusty was corrected immediately. All other sprinkler heads and escutcheons were inspected the next day and cleaned as necessary. 5/25/19</p> <p>3. Inservice will be provided to the Maintenance Techs by 7/19 by the Director of Plant Operations on the proper upkeep of the escutcheons and sprinkler heads. Monthly sprinkler head and escutcheon inspection and cleaning has been added to a Life/Safety list done by each maintenance technician. 7/22/19</p> <p>4. This monthly inspection will be documented on the Monthly Task Sheet and inserted into the TELS system for monitoring by the Maintenance Supervisor. The Director of Plant Operations will present the results of this monitoring to the Quality Assurance and Performance Improvement Committee at least quarterly. 7/22/19</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Administrator	(X6) DATE 7/15/19
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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 353	Continued From page 1 Findings included ... During a Life Safety inspection on May 24, 2019, at approximately 11:30 AM: 1. One (1) of one (1) fire sprinkler located at the entrance of resident room #210 was marred with paint, one (1) of 17 resident's rooms. 2. Six (6) of six (6) fire sprinkler escutcheon plate fittings in the laundry area were rusted throughout. 3. Two (2) of two (2) fire sprinkler escutcheon plate fittings located above the dishwashing machine in the main kitchen were rusted throughout. Employee #6 acknowledged the findings during a face-to-face interview on May 24, 2019, at approximately 12:00 PM.	K 353		
K 908 SS=C	Gas and Vacuum Piped Systems - Inspection and CFR(s): NFPA 101 Gas and Vacuum Piped Systems - Inspection and Testing Operations The gas and vacuum systems are inspected and tested as part of a maintenance program and include the required elements. Records of the inspections and testing are maintained as required. 5.1.14.2.3, B.5.2, 5.2.13, 5.3.13, 5.3.13.4 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on a review of facility records and through interview, it was determined that the Emergency	K 908	Gas and Vacuum Piped Systems – Inspection and CFR(s): NFPA 101kn 1.No specific residents were identified. 2. The Director of Plant Operations made an immediate adjustment to the Generator Testing Log upon discovery to ensure that the Generator was run under full load for 30 minutes. 3. The Maintenance Technician who typically runs the generator and documents in the log was in-serviced by 5/29/19 by the Director of Plant Operations about regarding the adjustment in time. 4. The Maintenance Supervisor will monitor the Generator Testing Log and report his findings monthly to the Director of Plant Operations. The Director of Plant Operations will report these findings to the QAPI Committee with any action plans for improvement at least quarterly.	5/29/19 5/29/19 5/29/19 7/22/19

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K 908	<p>Continued From page 2</p> <p>Generator was not exercised under load for at least 30 minutes each month to ensure proper operation in the event of an emergency.</p> <p>Findings included ...</p> <p>A review of the Emergency Power Generators log on May 29, 2019, at approximately 9:30 AM, show that the emergency generator was tested under load monthly for exactly 20 minutes. "Start" and "End" testing times under load from January 2019 through May 2019 were as follows:</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Start time</th> <th>End</th> </tr> </thead> <tbody> <tr> <td>1-17-19</td> <td>10:00 AM</td> <td>10:20 AM</td> </tr> <tr> <td>2-21-19</td> <td>9:40 AM</td> <td>10:00 AM</td> </tr> <tr> <td>3-21-19</td> <td>10:50 AM</td> <td>11:20 AM</td> </tr> <tr> <td>4-19-19</td> <td>9:45 AM</td> <td>10:05 AM</td> </tr> <tr> <td>5-16-19</td> <td>11:45 AM</td> <td>12:05 PM</td> </tr> </tbody> </table> <p>Further records review show documented entries for "load Run Time" to be 20 minutes and "Cool Down time" to be 10 minutes</p>	Date	Start time	End	1-17-19	10:00 AM	10:20 AM	2-21-19	9:40 AM	10:00 AM	3-21-19	10:50 AM	11:20 AM	4-19-19	9:45 AM	10:05 AM	5-16-19	11:45 AM	12:05 PM	K 908		
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