

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR-0018	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/20/2014
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NAME OF PROVIDER OR SUPPLIER THE RESIDENCES 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) COMPLETE DATE
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R 000

Initial Comments

An annual survey was conducted from November 12, 2014, through November 20, 2014, to determine compliance with the Assisted Living Law " DC Code § 44-101.01. "

The Assisted Living Residence (ALR) provides care for forty-three (43) residents and employs thirty-five (35) employees to include professional and administrative staff. The findings of the survey were based on observations, record reviews, and interviews.

Please Note. Listed below are abbreviations used in this report.

Assisted Living Administrator
Assisted Living Residence - ALR
She/He- s/he

R 961

Sec. 1002 1 Fire Safety.

(1) An ALR shall be in compliance with Chapter 22, New Residential Board and Care Occupancies, Life Safety Code of the National Fire Protection Association; and Based on observation and interview, it was revealed that the ALR failed to follow the Life Safety Code of the National Fire Protection Association [Section 18.7.8. Portable Space Heating Devices. Portable space-heating devices shall be prohibited in all healthcare occupancies].

The finding includes:

On November 12, 2014, at approximately 11:30

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This Plan of Correction is submitted without denying or acknowledging that the cited deficiencies exist. This plan of correction is a requirement of the Department of Health.

R 961

The Residences at Thomas Circle respectfully wishes to appeal this deficiency for reasons cited in their cover letter. Assisted Livings communities are not considered health care occupancies in the NFPA manual; this is a misinterpretation of the regulations.

What corrective action(s) will be accomplished to address the identified deficient practice;

The space heater was removed by the Administrator.

What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and

Pending the findings of the appeal, all nursing and housekeeping staff will be in-serviced on the correct regulation regarding space heaters in Assisted

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

TITLE

(X6) DATE

STATE FORM

6899

P61711

If continuation sheet 1 of 4

12/27/14

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a.m., observation of Resident #6's bedroom revealed a portable operating space heater near the bed.

During an interview with Resident #6 on November 12, 2014, at approximately 10:45 a.m. s/he stated, "My room does not get warm enough so they gave me this."

During an interview with the ALA on November 12, 2014, at approximately 2:00 p.m., the ALA was informed that Resident #6's bedroom contained a portable space heating device. The ALA stated, "I will remove it".

On November 13, 2014, at approximately 9:50 a.m. a second observation of Resident #6's bedroom revealed that the operating space heater remained in the resident's room.

During an interview with the ALA on November 13, 2014, at approximately 10:15 a.m., the ALA stated, "The resident did not want us to remove it."

R 961

Living communities. Then, once a month for three months, the administrator or his delegate will conduct rounds to make sure there are no Space Heaters on Assisted Living Neighborhoods.

How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be implemented.

Pending the findings of the appeal, all staff will be in-serviced on the correct regulation regarding space heaters in Assisted Living communities. Pending the findings of the appeal, if necessary, once a month for three months, the administrator or his delegate will conduct rounds to make sure there are

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 interview, the ALR failed to ensure that the interior was not in good repair.

The finding includes:

During an environmental inspection on November 12, 2014, at approximately 11:45 a.m.,

R 981

no Space Heaters on Assisted Living Neighborhoods.

R981

What corrective action(s) will be accomplished to address the identified deficient practice;

The sink is currently scheduled for January 10th, 2015.

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R 981	Continued From page 2 observation of the facility's kitchen revealed a broken drain under the sink near the dishwasher. During an interview with the ALA on November 12, 2014, at approximately 2:00 p.m., the ALA indicated that the sink was scheduled for repair.	R 981	What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and This deficient practice was identified prior to survey and a plan was in place to correct it; however, the repair is very labor intensive, which resulted in a delay in being able to schedule it.	
R1003	Sec. 1006c Bathrooms. (c) An ALR shall insure that the temperature of the hot water at all taps to which residents have access is controlled by the use of thermostatically controlled mixing valves or by other means, including control at the source, so that the water temperature does not exceed 110 degrees Fahrenheit. Based on observations and interviews, it was revealed that the ALR failed to ensure that water temperature used by residents did not exceed 110 degree Fahrenheit. The finding includes: On November 12, 2014, at approximately 12:30 p.m., observation of three rooms and the shower room on the second floor revealed that the water was hot to touch. Additionally, observation of room #310 on the third floor revealed that the wet bar sink water temperature was measured at 113 degrees Fahrenheit and the shower's water temperature was measured at 125 degrees Fahrenheit. During an interview with the ALR's engineer on November 12, 2014, at approximately 1:30 p.m., the engineer stated, "We have to put in mixing valves in all the rooms." During an interview with the ALA on November	R1003	How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be implemented. This is a capital repair, identified prior to survey and scheduled to be repaired. Once the repair work is complete, the deficient issue will be corrected. R1003 What corrective action(s) will be accomplished to address the identified deficient practice; A plumbing company was immediately hired to correct the sinks. What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and	

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R1003	<p>Continued From page 3</p> <p>12, 2014, at approximately 12:45 a.m., the ALA stated, " We will have the work completed in forty-eight (48) hours and we will notify all residents and family about the water temperatures."</p> <p>On November 20, 2014, at approximately 2:00 p.m., a second observation of the rooms on the second floor and shower room were no longer hot to touch, however, observation of room #306 and #310 revealed that the water temperatures were still very hot to touch.</p> <p>During an interview with the plumber on November 20, 2014, at approximately 2:10 p.m., the plumber stated, "The water is coming directly from the boiler and we have to install water valves and change out the faucets. We should be finished in two days."</p> <p>On November 24, 2014, at approximately 11:40 a.m., a follow-up observation revealed the following:</p> <ul style="list-style-type: none"> - Room #310-water temperature measured at 100 degree Fahrenheit - Room #303-water temperature measured at 100 degree Fahrenheit - Room #316-water temperature measured at 100 degree Fahrenheit - Room #320-water temperature measured at 98 degree Fahrenheit <p>During an interview with the ALA on November 24, 2014, at approximately 11:55 a.m., the ALA indicated all water temperature issues had been fixed and temperatures are within the required temperature.</p>	R1003	<p>A plumbing company was immediately contacted to correct the faucets so that the temperature does not exceed 110 degrees Fahrenheit. The maintenance staff is completing rounds on the neighborhood once a month for three months to make sure that all the mixing valves have properly been installed.</p> <p>How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be implemented.</p> <p>The maintenance staff is completing rounds on the neighborhood once a month for three months to make sure that all the mixing valves have properly been installed. Since they have been installed, this issue has been corrected.</p>	
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