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October 16, 2017

Veronica Longtreth, RN, MSN
Program Manager
District of Columbia Department of Health
Health Care Regulation and Licensing Administration
899 North Capitol Street, NE, 2nd Floor
Washington, DC 20002

Dear Ms. Longtreth:

Enclosed is our Plan of Correction for the September 29, 2017 Life Safety Code Survey conducted at Stoddard Baptist Global Care.

If any additional information is needed please feel free to contact me at (202) 541-6058.

Sincerely,

A handwritten signature in cursive script that reads 'Denise Chadwick Wright'.

Denise Chadwick Wright
Nursing Home Administrator

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

PRINTED: 10/06/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 095014	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/29/2017
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NAME OF PROVIDER OR SUPPLIER WASHINGTON CTR FOR AGING SVCS	STREET ADDRESS, CITY, STATE, ZIP CODE 2601 18TH STREET NE WASHINGTON, DC 20018
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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
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K 000	INITIAL COMMENTS The following findings were observed during the Life Safety Code Inspection on September 29, 2017.	K 000	Stoddard Baptist Global Care at Washington Center for Aging Services (SBGC), is filling this Plan of Correction in accordance with the Compliance requirements for the Federal and State regulations.	
K 353 SS=E	<p>NFPA 101 Sprinkler System - Maintenance and Testing</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) Date sprinkler system last checked _____</p> <p>b) Who provided system test _____</p> <p>c) Water system supply source _____</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 STANDARD is not met as evidenced by:</p> <p>Based on observations during the Life Safety Code Inspection, the sprinklers were not maintained to ensure proper operation in the event of an emergency; as evidenced by paint and dust on sprinkler heads, rust and paint escutcheon rings and shaft surfaces; which may affect the operation of sprinklers in the event of an emergency in 10 of 32 observations. The observations were made in the present of the Maintenance Director.</p>	K 353	<p>This Plan of Correction constitutes the facility's written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction does not constitute admission of facts or conclusions cited.</p> <p>K353 NFPA 101 Sprinkler System – Maintenance and Testing</p> <p>1.</p> <p>A. The paint observed on the escutcheon rings and sprinkler shaft surfaces on Unit 1 Green; Rooms 193H Telephone Closet and 183 in two of nine observations; 2 Green Rooms 283 and 353 in two of eight observations have been cleaned to ensure proper operation in the event of an emergency .</p> <p>B. Sprinkler head and shaft surfaces soiled with dust on Unit 2 Blue in Rooms 202, 207, and 215 have been cleaned to ensure proper operation in the event of an emergency.</p> <p>C. Rust observed on the circumference of escutcheon rings and sprinkler shaft surfaces in the Blue Activity Room in three of three observations. Two of the three observations was soiled with brown material and one of three observations requires replacement due to rust, which is scheduled for completion on 10/26/17 to ensure proper operation in the event of an emergency.</p>	<p>10/3/17</p> <p>10/3/17</p> <p>10/3/17</p>

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Renee Chadwick Wright TITLE
Nursing Home Administrator (X6) DATE
10/16/17

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 The findings include: During a tour of the facility; the following sprinkler heads, shaft surfaces, and escutcheon rings soiled with dust and rust on the head and shaft surfaces, and paint on the surfaces of escutcheon rings in the following areas: A. Paint observed on escutcheon rings and sprinkler shaft surfaces on Unit 1 Green; Rooms 193H Telephone Closet and 183 in two (2) of nine (9) observations; 2 Green Rooms 283 and 353 in two (2) of eight (8) observations between 9:10 AM and 10:45 AM September 29, 2017. B. Sprinkler head and shaft surfaces soiled with dust on Unit 2 Blue in Rooms 202, 207, and 215 in three (3) of 12 observation between 10:55 AM and 11:30 AM on September 29, 2017. C. Rust observed on the circumference of escutcheon rings and sprinkler shaft surfaces in the Blue Activity Room, in three (3) of three (3) observations on September 29, 2017, between 11:00 AM and 11:30 AM on September 29, 2017.	K 353	Continued From page 1 2. On July 18, 2017 ARK Systems conducted a sprinkler inspection in accordance with the applicable NFPA 25 Standards, there were no sprinkler findings identified during this time. The facility's engineering team conducted a facility wide inspection of all sprinkler heads to ensure proper operation in the event of an emergency. The vendor, ARK is scheduled to be onsite at the facility on 10/26/17 to replace the one (1) out of three (3) identified rusty sprinkler heads. The other two (2) sprinkler heads were soiled, which was removable via cleaning conducted by the engineering team. 3. ARK Systems conducts quarterly preventative maintenance checks of the facility's sprinkler in an effort to ensure compliance with NFPA 25, which is scheduled to be completed by 10/31/17. In addition to the above the facility's engineering team has initiated a preventative maintenance program to monitor paint, dust and rust that may accumulate on the sprinkler heads in an effort to ensure that they are operational in the event of an emergency. 4. The findings of this preventive maintenance program will be reported by the Director of Engineering/Designee to the QAPI committee at the next scheduled meeting which will be held on October 20, 2017. Then on a quarterly basis and if applicable no less than on an annual basis. If the QAPI committee has recommendations the Director of Engineering/ Designee will be responsible for following up and reporting on the outcomes.	10/3/17 10/3/17 10/3/17 10/16/17	