

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 095034	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 - LOCATED AT PROVIDENCE HOSP 5 EAST B. WING _____	(X3) DATE SURVEY COMPLETED 05/17/2023
NAME OF PROVIDER OR SUPPLIER ASCENSION LIVING CARROLL MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 725 BUCHANAN ST., NE WASHINGTON, DC 20017	
(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	<p>Preparation and execution of this plan of correction does not constitute Carroll Manor's admission to or agreement with the facts alleged or conclusions set forth in the Statement of Deficiencies, and such liability is specifically denied. The plan of correction is prepared and executed pursuant to Carroll Manor's obligations under federal and state law.</p>	
K 324 SS=F	<p>A life safety code survey was conducted at your facility on May 16 and May 19, 2023. The following deficiencies are based on observation, interview, and record review.</p> <p>K 324 Cooking Facilities CFR(s): NFPA 101</p> <p>Cooking Facilities Cooking equipment is protected in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, unless:</p> <ul style="list-style-type: none"> * residential cooking equipment (i.e., small appliances such as microwaves, hot plates, toasters) are used for food warming or limited cooking in accordance with 18.3.2.5.2, 19.3.2.5.2 * cooking facilities open to the corridor in smoke compartments with 30 or fewer patients comply with the conditions under 18.3.2.5.3, 19.3.2.5.3, or * cooking facilities in smoke compartments with 30 or fewer patients comply with conditions under 18.3.2.5.4, 19.3.2.5.4. <p>Cooking facilities protected according to NFPA 96 per 9.2.3 are not required to be enclosed as hazardous areas, but shall not be open to the corridor.</p> <p>18.3.2.5.1 through 18.3.2.5.4, 19.3.2.5.1 through 19.3.2.5.5, 9.2.3, TIA 12-2</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and interview, facility staff failed to install and maintain cooking equipment</p>	K 324		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Executive Director

8-7-2023

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 324	Continued From page 1 shielded by the kitchen hood fire suppression system. This deficient practice affected all staff in dietary services. The findings include: During a tour of dietary services on May 16, 2023, at approximately 9:00 AM, one (1) of one (1) six burner, stove/oven units, one (1) of one (1) tilt skillet, and two (2) of two (2) deep fryers that were located on the cooking line in the kitchen, were not installed in a manner to ensure that the appliances are returned to their assigned location after they are displaced for maintenance and cleaning, as required by NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, sections 12.1.2.3 and 12.1.2.3.1 which state: NFPA 96 (2011) Standard for Ventilation Control and Fire Protections of Commercial Cooking Operations 12.1.2.3 The fire-extinguishing system shall not require reevaluation where the cooking appliances are moved for the purposes of maintenance and cleaning, provided the appliances are returned to approved design location prior to cooking operations, and any disconnected fire-extinguishing system nozzles attached to the appliances are reconnected in accordance with the manufacturer's listed design manual. 12.1.2.3.1 An Approved method shall be provided that will ensure that the appliance is returned to an approved design location.	K 324	K324 1. Corrective action for residents noted to have been affected by the deficient practice. The six-burner stove/oven; tilt skillet; and 2 deep fryers were installed in a manner to ensure that appliances are returned to their assigned location after they are displaced on May 17, 2023 by the Maintenance Director. 2. How will the facility identify other residents having the potential to be affected by the same deficient practice? The Facilities manager rounded in the kitchen on May 16, 2023. No other gas appliances were identified as not being installed in a manner to ensure that appliances are returned to their assigned location after they are displaced. 3. The measures the facility will take or systems the facility will alter to ensure that the problem will be corrected and will not recur. The Facilities Manager inserviced the maintenance staff on Food Gas Appliance Safety to include installing gas appliances in a manner to ensure that appliances are returned to their assigned location after they are displaced. K324 continued on next page	8/7/2023 8/7/2023 8/7/2023

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K 324	Continued From page 2 Interview with the Director of Facilities revealed the facility was aware of this requirement. Employee #10 acknowledged the findings during a face-to-face interview on March 19, 2023, at approximately 4:00 PM.	K 324	(K324 continued) The Facilities Manager or designee will make kitchen rounds on a monthly basis to verify that gas appliances are installed in a manner to ensure that appliances are returned to their assigned location after they are displaced.	
K 511 SS=F	Utilities - Gas and Electric CFR(s): NFPA 101 Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2	K 511	If there are any findings the Facilities manager or designee will be corrected immediately. IV. Quality Assurance Plans to monitor facility compliance to make sure that corrections are achieved and permanent. Monthly review of completed rounds results and trends will be completed by the Facilities Manager or designee and reported to the facility's QAPI Committee for the next 3 months and then re-evaluated to determine if further monitoring is indicated. V. Completion Date:8/7/2023	8/7/2023
	This REQUIREMENT is not met as evidenced by: Based on observation and interview, facility staff failed to properly install and maintain cooking equipment. This deficient practice affected all staff in dietary services. The findings include: During a tour of dietary services on May 16, 2023, at approximately 9:00 AM, one (1) of one (1) gas stove with six (6) burners, one (1) of one (1) tilt skillet, and two (2) of two (2) deep fryers with swivels that were located on the cooking line in the kitchen, were not installed with a restraint, to limit movement of the appliances, and avoid strain on the connections, as required by NFPA		K511 I. Corrective action for residents noted to have been affected by the deficient practice. The six burner stove/oven; tilt skillet; and 2 deep fryers were installed in a manner to limit movement of appliances on May 17, 2023 by the Maintenance Director. II. How will the facility identify other residents having the potential to be affected by the same deficient practice? The Facilities manager rounded in the kitchen on May 16, 2023. No other gas appliances were identified as being in need of a restraint to limit movement. K511 Continued on next page	8/7/2023 8/7/2023

