

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

PRINTED: 11/01/2018
FORM APPROVED
OMB NO. 0938-0391

| | | | | |
|--|---|---|--|---|
| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 095034 | (X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____ | (X3) DATE SURVEY COMPLETED 09/11/2018 |
| NAME OF PROVIDER OR SUPPLIER CARROLL MANOR NURSING & REHAB | | | 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 | Carroll Manor Nursing & Rehabilitation Center makes its best efforts to operate in substantial compliance with both Federal and State laws. Submission of this Plan of Correction (POC) does not constitute an admission or agreement by any party, it's officers, directors, employees or agents as the truth of the facts alleged or the validity of the conditions set forth on the statement of the deficiencies. This plan of correction (POC) is prepared and/ or executed because it is required by State and Federal laws. | 11/11/18 |
| K 345 SS=D | Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101 Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available. 9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 This REQUIREMENT is not met as evidenced by: Based on observations, record review and staff interview, the Backflow Preventer located at the inlet of the incoming city water was not tested annually as required to ensure proper operation in one (1) of one (1) observation. Findings included ... During a Life Safety inspection on September 5, 2018, at approximately 3:30 PM, the backflow preventer located at the inlet of the city water had not been tested since 2016, according to its inspection tag on one (1) of one (1) observations. During a face-to-face interview on September 5, 2018, at approximately 3:15 PM, Employee #5 confirmed the findings. | K 345 | K 345 1. The Backflow Preventer was tested. 2. The Backflow Preventer was tested. 3. The Maintenance Director was inserviced on ensuring that the Backflow Preventer is tested on a annual basis. 4. The maintenance Director will discuss the status of the annual Backflow test during the quarterly QA meeting times 3 meetings to ensure compliance. | 11/11/18 |
| K 353 SS=E | Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 | K 353 | | |

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

TITLE

Executive Director

(X6) DATE

11-11-2018

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 | <p>Continued From page 1</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 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 as evidenced by sprinklers with rust and dust on the shaft and/or head surfaces in 18 of 92 observations of resident's common areas.</p> <p>Findings included ...</p> <p>During a Life Safety Code inspection on September 5, 2018, between 1:15 PM and 3:30 PM, fire sprinklers were soiled with dust in the following common areas:</p> <ol style="list-style-type: none"> 1. The dining room on the fifth floor in six (6) of 16 observations 2. The kitchen on the fifth floor in two (2) of two | K 353 | | |

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| K 353 | <p>Continued From page 2</p> <p>(2) observations</p> <p>3. The kitchen on the fourth floor in two (2) of two (2) observations</p> <p>4. The dining room on the second floor in five (5) of 17 observations</p> <p>5. The dining room on the first floor in three (3) of 18 observations</p> <p>During a Life Safety Code inspection on September 5, 2018, between 1:15 PM and 3:30 PM, fire sprinklers were rusted and discolored in 12 of 92 observations in the following common areas:</p> <p>1. The dining room on the fifth floor in one (1) of 16 observations</p> <p>2. The dining room on the fourth floor in one (1) of 16 observations</p> <p>3. The dining room on the third floor in two (2) of 15 observations</p> <p>4. The dining room on the second floor in two (2) of 17 observations</p> <p>5. The dining room on the first floor in five (5) of 18 observations</p> <p>6. The kitchen on the first floor in one (1) of two (2) observations</p> <p>During a face-to-face interview on September 5, 2018, at approximately 3:15 PM, Employee #5 confirmed the findings.</p> | K 353 | <ol style="list-style-type: none"> The sprinkler heads that were identified during the survey as dusty or soiled were cleaned. The sprinkler heads that were identified as rusted, or discolored during the survey were replaced. Maintenance staff made rounds to determine if there were other dusty, soiled, rusted, or discolored sprinkler heads. The Maintenance staff were educated on ensuring that sprinkler heads are not soiled, dusty, rusted, or discolored. The Maintenance Manager or designee will make rounds on a monthly basis times 3 months to ensure that sprinkler heads are not dusty, soiled, rusted or discolored. The results of the rounds will be discussed during the monthly QAPI. | 11/11/18 |