

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HFD-12-0087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/26/2013
NAME OF PROVIDER OR SUPPLIER MARJUL HOMES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 2411 FIRST STREET, NW WASHINGTON, DC 20001		
(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
I 000	<p>INITIAL COMMENTS</p> <p>A licensure survey was conducted on June 26, 2013. A sample of two residents was selected from a resident population of four men with varying degrees of intellectual disabilities.</p> <p>The findings of the survey were based on observations in the home, and interviews with direct support staff, as well as a review of resident and administrative records, including incident reports.</p> <p>[Qualified mental retardation professional (QMRP) will be referred to as qualified intellectual disabilities professional (QIDP) within this report.]</p>	I 000	<p><i>Received 7/18/13</i> Department of Health Health Regulation & Licensing Administration Intermediate Care Facilities Division 899 North Capitol St., N.E. Washington, D.C. 20002</p>	
I 043	<p>3502.2(c) MEAL SERVICE / DINING AREAS</p> <p>Modified diets shall be as follows:</p> <p>(c) Reviewed at least quarterly by a dietitian.</p> <p>This Statute is not met as evidenced by: Based on observation, interview and record review, the group home for individuals with intellectual disabilities (GHIID) failed to ensure that at least on a quarterly basis a dietitian reviewed the modified diets for two (2) of 2 residents in the sample. (Resident #1 and Resident #2)</p> <p>The findings include:</p> <p>1. Observation of Resident #1's breakfast meal on June 26, 2013, at approximately 7:35 a.m., revealed the resident was served a fifteen hundred (1500) calorie meal consisting of one (1) scrambled egg, two (2) slices of whole wheat toast, 2 teaspoons of margarine-like spread, one</p>	I 043	<p>What corrective actions will be accomplished for those residents found to have been affected by the deficient practice; as a corrective action MarJul Homes has scheduled a review of documents by the dietitian for the residents affected by this issue. As a result, the Nutritionist came out to review documents on 7/16/13. In addition, the Nutritionist has also scheduled training for each new Nutrition plan on 8/1/13. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken MarJul homes will identify other residents who could potentially be affected by the same deficient practice by reviewing all health and maintenance documents including Nutritional Plans and Diets on a monthly basis. This will help to ensure that all our</p>	

Health Regulation & Licensing Administration

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

STATE FORM

6899

77Z811

TITLE

(X6) DATE

If continuation sheet 1 of 4

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HFD-12-0087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 06/26/2013
NAME OF PROVIDER OR SUPPLIER MARJUL HOMES, INC			STREET ADDRESS, CITY, STATE, ZIP CODE 2411 FIRST STREET, NW WASHINGTON, DC 20001		
(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	
I 043	<p>Continued From page 1</p> <p>half (1/2) cup of orange juice and a cup of reduced fat, 2 percent milk.</p> <p>During a face to face interview with Resident #1 on June 26, 2013, at approximately 4:05 p.m., it was revealed "the lady told me, you know the diet lady said, I'm on a special diet, low fat. I want water, jello and an orange for my snack".</p> <p>Review of Resident #1's nutritional assessment dated November 18, 2012, on June 26, 2013, at approximately 4:10 p.m., revealed the resident was prescribed a 1500 calorie, low fat, low cholesterol, no added salt, bite size diet. Further review revealed a recommendation indicating the "dietitian to follow quarterly". There was no evidence that a nutritionist/dietitian had reviewed Resident #1's diet at least quarterly.</p> <p>During a face to face interview with the intellectual disabilities professional (QIDP) on June 26, 2013, at approximately 4:20 p.m., it was stated Resident #1's quarterly dietary assessment would be requested from the dietitian and placed in the resident's medical record.</p> <p>2. Observation of Resident #2's breakfast meal on June 26, 2013, at approximately 7:30 a.m., revealed the resident was served a 1500 calorie meal consisting of 1 scrambled egg, 2 slices of whole wheat toast, 2 teaspoons of margarine-like spread, 1/2 cup of orange juice and a cup of reduced fat, 2 percent milk.</p> <p>Review of Resident #2's nutritional assessment dated November 28, 2012, on June 26, 2013, at approximately 4:14 p.m., revealed the resident was prescribed a 1500 calorie, low fat, low</p>	I 043	<p>Individuals' medical documents are up to date and current with their ISP's. This process was put into place as of 7/15/13. What measure will be put into place or what systemic change you will make to ensure that the deficient practice does not recur and how the corrective action will be monitored to ensure the deficient practice will not recur; what quality assurance program will be implemented. MarJul Homes will ensure all medical maintenance documents including Nutritional assessments and modified diets are reviewed by a dietitian at least quarterly. The QIDP and or House Manager will review the Nutritional assessments at least monthly through their mandated monthly reports, this creates an identification system which should alert management if any documents are outdated or up for review. As of 7/1/13 this Quality Assurance Review process has been revised to include two to three people completing the inspection, this new entity has been adopted to ensure the quality of our individuals medical and nutritional needs are met.</p>		

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HFD-12-0087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/26/2013
NAME OF PROVIDER OR SUPPLIER MARJUL HOMES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 2411 FIRST STREET, NW WASHINGTON, DC 20001		
(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
I 043	Continued From page 2 cholesterol diet. Further review revealed a recommendation indicating the "dietitian to follow quarterly". There was no evidence that a nutritionist/dietitian had reviewed Resident #2's diet at least quarterly. During a face to face interview with the QIDP on June 26, 2013, at approximately 4:30 p.m., it was stated Resident #2's quarterly dietary assessment would be requested from the dietitian and placed in the resident's medical record.	I 043		
I 090	3504.1 HOUSEKEEPING The interior and exterior of each GHMRP shall be maintained in a safe, clean, orderly, attractive, and sanitary manner and be free of accumulations of dirt, rubbish, and objectionable odors. This Statute is not met as evidenced by: Based on observation and interview, the group home for individuals with intellectual disabilities (GHIID) failed to maintain the environment in accordance with the needs of four of the four residents in the facility. (Residents #1, #2, #3 and #4) The finding includes: Observations during the inspection of the environment on June 26, 2013, beginning at 5:29 p.m., revealed that the carpeting in Resident #1, #2, #3 and #4's bedrooms was heavily stained and soiled.	I 090	What corrective actions will be accomplished for those residents found to have been affected by the deficient practice; as a corrective action MarJul Homes will have the carpet deep steam cleaned no later than 8/5/13. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken MarJul homes will identify other residents who could potentially be affected by the same deficient practice by completing a monthly inspection of the home to ensure that it is maintained in a safe, clean, orderly attractive and sanitary manner as well as free of accumulation of dirt, rubbish, and objectionable odors. This monthly inspection will start as of 7/15/13 What measure will be put into place or what systemic change you will make to ensure that the deficient practice does not recur	

Health Regulation & Licensing Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HFD-12-0087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 06/26/2013
NAME OF PROVIDER OR SUPPLIER MARJUL HOMES, INC			STREET ADDRESS, CITY, STATE, ZIP CODE 2411 FIRST STREET, NW WASHINGTON, DC 20001		
(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	
I 090	Continued From page 3 Interview with the house manager/licensed practical nurse (LPN) on June 26, 2013, at approximately 6:26 p.m., indicated that the agency was aware that the carpeting was stained in the aforementioned resident's bedrooms. Further interview revealed that the agency may consider replacing the carpeting.	I 090	and how the corrective action will be monitored to ensure the deficient practice will not recur; what quality assurance program will be implemented. MarJul Homes will ensure all individuals are in a safe and clean environment through follow up and recommendations from our monthly inspections. This will give MarJul homes a tracking system to identify maintenance and or any issues that cause the home to be unattractive, unsafe or unclear. This process will start as of 7/15/13		