



AGENCY OF HUMAN SERVICES
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection
103 South Main Street, Ladd Hall
Waterbury, VT 05671-2306
<http://www.dail.vermont.gov>
Voice/TTY (802) 871-3317
To Report Adult Abuse: (800) 564-1612
Fax (802) 871-3318

January 3, 2013

Ms. Ursula Margazano, Administrator
Burlington Health & Rehab
300 Pearl Street
Burlington, VT 05401

Dear Ms. Margazano:

Enclosed is a copy of your acceptable plans of correction for the follow up to the recertification survey conducted on **December 12, 2012**. Please post this document in a prominent place in your facility.

We may follow up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in cursive script that reads "Pamela M. Cota RN".

Pamela M. Cota, RN
Licensing Chief

PC:ne

Enclosure



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

DEC 26 2012

PRINTED: 12/18/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 475014	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/12/2012
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NAME OF PROVIDER OR SUPPLIER BURLINGTON HEALTH & REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 300 PEARL STREET BURLINGTON, VT 05401
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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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{F 000}	INITIAL COMMENTS	{F 000}	The facility maintains that it stores, prepares, distributes and serves food under sanitary conditions	
{F 371} SS=F	483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY	{F 371}	<p>How the corrective action(s) will be accomplished for those residents found to be affected by the alleged deficient practice? :</p> <ol style="list-style-type: none"> Ceiling tiles in the dishwashing area were cleaned and dusted. 12-12-12 The 2 exhaust fans in the walk-in cooler taken apart, cleaned and dusted. 12-12-12 The two electrical outlets behind the line were not in use, therefore disconnected and removed. 12-12-12 The ceiling exhaust fan above the washing station for pots and pans was dusted. 12-12-12 <p>Dietary Director, Cook, Maint &/or designee</p> <p>How will the facility identify other residents having the potential to be affected by the same deficient practice? : All residents are potentially affected.</p>	On-going

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]* TITLE: **Administrator** (X6) DATE: **12/24/12**

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.

[Handwritten initials]

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{F 371}	Continued From page 1 3. The top surfaces of two electrical outlets behind the line were heavily soiled with grease and debris. 4. The ceiling exhaust fan above the washing station for the pots and pans had a thick line of dust on it. It was brought to the attention of the Food Service Director who looked at it with surveyor and stated she would "get it cleaned right away." The Food Service Director confirmed the above observations at the time of the observations.	{F 371}	What measures will be put into place or systematic changes made to ensure that the deficient practice will not recur? : Dietary will be re-educated re: sanitary / cleaning standards to include cleaning and dusting of all electrical outlets, ceiling tiles, cooling/exhaust fans. Director of Dietary Services, &/or designee How will the facility monitor its corrective actions to ensure that the deficient practice will not recur? : 5 random audits per week Xs 4 weeks will be performed on the cleaning/dusting of all kitchen electrical outlets, ceiling tiles and cooling/exhaust fans with results reported at morning meeting and QA Meetings with changes made as appropriate. Director of Dietary Services, &/or designee	 12-24-12 12-27-12 On-going