

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

November 21, 2013

Mr. Alan Blier, Administrator
Centers For Living And Rehab
160 Hospital Drive
Bennington, VT 05201

RE: Deficiencies Resulting in Substandard Quality of Care

Dear Mr. Blier:

Staff from this office completed a complaint investigation on **November 13, 2013** to determine if the facility was in compliance with state and federal requirements for nursing homes. The complaint investigation resulted in findings of substandard quality of care. In addition to the finding of substandard quality of care, your facility was found to have a number of other regulatory violations. The attached survey report identifies all other regulatory violations and also includes the substandard quality of care citations, F-0224 Prohibit Mistreatment/Neglect/Misappropriation; F-0250 Provision of Medically Related Social Service; F-0319 TX/SVC for Mental/Psychosocial Difficulties and F-323 Free of Accident Hazards/Supervision/Devices. The most serious of the additional deficiencies constituted actual harm that is not immediate jeopardy as evidenced by the attached CMS-2567 whereby corrections are required. An extended survey will be conducted within 2 weeks of the survey completion date. All references to regulatory requirements contained in this letter are found in Title 42, Code of Federal Regulations.

As a result of regulatory violations related to substandard quality of care, we have recommended to Centers for Medicare and Medicaid Services (CMS) the following enforcement actions:

Per Instance Civil Money Penalty of no less than \$3,000;
Denial of Payment for New Admissions effective 12/3/13;
Termination effective 3/13/14.

Plan of Correction (POC)

A written POC for all of the deficiencies, which is your allegation of compliance, must be received by **December 1, 2013**. Failure to submit an acceptable POC by **December 1, 2013** may result in imposition of additional remedies or termination of your provider certification. Your POC must contain the following:

- What corrective action will be accomplished for those residents found to have been affected by the deficient practice;
- How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and,
- How the corrective actions will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place.
- The dates corrective action will be completed.

Substandard Quality of Care

- Notification
When a determination is made that substandard quality of care of exists this Division must provide notice of substandard care to the state Board of Nursing Administrators and the attending physicians of residents. **Please submit to this office along with your POC a listing of all residents' attending physicians.**
- Nurse Aide Training (NATCEP) Prohibition
Because substandard quality of care was determined to exist, effective through **November 13, 2015**, the facility has lost its ability to conduct nurse aide training as specified in the Social Security Act at §1819(f)(2)(B) and §1919(f)(2)(B) or §1919(b)(4)(C)(ii) or has been assessed a total civil money penalty of not less than \$5,000.00; has been subjected to an extended or partial extended survey as a result of finding SQC; has been subject to a denial of payment, the appointment of a temporary manager or termination; or, in the case of an emergency, has been closed and/or had its residents transferred to other facilities.

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Additionally, the CMS Regional Office will impose the other remedies indicated above or revised remedies, if appropriate. You will receive formal notice of enforcement action from CMS in a separate letter.

Informal Dispute Resolution

In accordance with 42 CFR 488.331, you have one opportunity to question cited deficiencies through an informal dispute resolution process. To be given such an opportunity, you are required to submit your request, along with specific deficiencies cited to Frances Keeler, State Survey Agency Director. This request must be received prior to **December 1, 2013**. An incomplete informal dispute resolution process will not delay the effective date of any proposed enforcement action.

Sincerely,

A handwritten signature in black ink that reads "Pamela Cota RN". The signature is written in a cursive style with a large initial "P" and "C".

Pamela Cota, RN
Licensing Chief

Enclosure

cc: State Medicaid Agency