

Division of Licensing and Protection  
103 South Main Street  
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

July 7, 2015

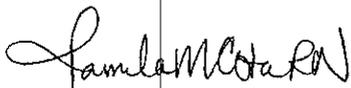
Mr. Daniel Daly, Manager  
The Residence At Shelburne Bay East  
185 Pine Haven Shores Road  
Shelburne, VT 05482-7805

Dear Mr. Daly:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **June 1, 2015**. 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,



Pamela M. Cota, RN  
Licensing Chief





Division of Licensing and Protection

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>1009 | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br>C<br>06/01/2015 |
|--|--|---|---|

|   |  |
|---|--|
| NAME OF PROVIDER OR SUPPLIER<br><br>THE RESIDENCE AT SHELburnE BAY EAST | STREET ADDRESS, CITY, STATE, ZIP CODE<br>185 PINE HAVEN SHORES ROAD<br>SHELburnE, VT 05482 |
|---|--|

| (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 |
|--------------------|---|---------------|---|--------------------|
| R266               | <p>Continued From page 1</p> <p>posing a safety risk. There was another door into the kitchen that also was left unlocked at the time.</p> <p>2. Per observations of the laundry room on the unit, the door into the room was unlocked and a lockable door to the laundry chute (going from 2nd floor to the basement) was left open. The hatch type door was large enough for a resident to fall into. In addition, there were cleaning chemicals stored in the unlocked room. Per observations on the other 2 floors of the home immediately after this tour, the 3rd floor door to the laundry was also unlocked; the laundry chute door was left open and unlocked and cleaning chemicals were also stored there. On the 4th floor, the laundry room door was unlocked and cleaning chemicals were seen in the room. The door to the laundry chute was locked in this room, however.</p> <p>The above safety risks were also observed by the Administrator, who accompanied the surveyor on the tour.</p> | R266          | <p>opened with keys from the care, maintenance, housekeeping and laundry staff.</p> <p>Staff on those units were counseled on the importance of the door remaining locked, and keys were distributed to the staff who are required to use the door to get to the laundry chutes.</p> <p>Weekly checks to be made by maintenance staff to ensure doors/locks are operating properly.</p> <p>The results of these checks will be brought before the Performance Improvement committee on a quarterly basis.</p> <p>Care and kitchen staff to be inserviced on the above corrective actions.</p> <p>Executive Director to ensure compliance.</p> |                    |