

Division of Licensing and Protection
103 South Main Street, Ladd Hall
Waterbury VT 05671-2306
<http://www.dail.vermont.gov>
Voice/TTY (802) 241-2345
To Report Adult Abuse: (800) 564-1612
Fax (802) 241-2358

March 10, 2011

Marie Fortier, Administrator
Fortier's Community Care Home
127 Bailey Street
Barre, VT 05641

Provider ID #:

Dear Ms. Fortier:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **February 1, 2011**.

Follow-up may occur to verify that substantial compliance has been achieved and maintained.

Sincerely,



Pamela M. Cota, RN
Licensing Chief

PC:jl

Enclosure



Division of Licensing and Protection

RECEIVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0381	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	Division of FEB 11 Licensing and Protection	(X3) DATE SURVEY COMPLETED 02/01/2011
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NAME OF PROVIDER OR SUPPLIER FORTIER'S COMMUNITY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 127 BAILEY STREET BARRE, VT 05641
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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) COMPLETE DATE
R100	Initial Comments: An unannounced onsite licensing survey was conducted by the Division of Licensing and Protection on 2/1/2011.	R100	<p>The submission of this POC does not imply agreement with the existence of a deficiency.</p> <p><u>R179 Contracted</u> nursing has provided the facility with more than 12 hours of annual training records. These records are part of her permanent contract.</p> <p>- Systemic changes: facility has implemented documentation to be completed by all contracted services and will be filed.</p> <p>3-10-2011 R179 POC accepted - C. Hursey, RN</p>	
R179 SS=D	<p>V. RESIDENT CARE AND HOME SERVICES</p> <p>5.11 Staff Services</p> <p>5.11.b The home must ensure that staff demonstrate competency in the skills and techniques they are expected to perform before providing any direct care to residents. There shall be at least twelve (12) hours of training each year for each staff person providing direct care to residents. The training must include, but is not limited to, the following:</p> <ol style="list-style-type: none"> (1) Resident rights; (2) Fire safety and emergency evacuation; (3) Resident emergency response procedures, such as the Heimlich maneuver, accidents, police or ambulance contact and first aid; (4) Policies and procedures regarding mandatory reports of abuse, neglect and exploitation; (5) Respectful and effective interaction with residents; (6) Infection control measures, including but not limited to, handwashing, handling of linens, maintaining clean environments, blood borne pathogens and universal precautions; and (7) General supervision and care of residents. <p>This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the home had no documentation that 1 of 3 employees had completed the required annual training with a total of 12 hours of annual</p>	R179		

Division of Licensing and Protection

Marie Fortier

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

TITLE
Owner

(X6) DATE

2-16-11

Division of Licensing and Protection

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R179	Continued From page 1 education during the prior year. Findings include: Per record review on 2/1/2011, 1 of 3 staff members had no ongoing educational documentation. During interview at 10:20 AM, the Manager confirmed that there was no educational documentation available for this staff member.	R179		
R181 SS=E	V. RESIDENT CARE AND HOME SERVICES 5.11 Staff Services 5.11.d The licensee shall not have on staff a person who has had a charge of abuse, neglect or exploitation substantiated against him or her, as defined in 33 V.S.A. Chapters 49 and 69, or one who has been convicted of an offense for actions related to bodily injury, theft or misuse of funds or property, or other crimes inimical to the public welfare, in any jurisdiction whether within or outside of the State of Vermont. This provision shall apply to the manager of the home as well, regardless of whether the manager is the licensee or not. The licensee shall take all reasonable steps to comply with this requirement, including, but not limited to, obtaining and checking personal and work references and contacting the Division of Licensing and Protection in accordance with 33 V.S.A. §6911 to see if prospective employees are on the abuse registry or have a record of convictions. This REQUIREMENT is not met as evidenced by: Based on record review and interview, the home failed to obtain all necessary background checks for all staff members. Findings include: Per record review on 2/1/2011, 3 of 3 staff	R181	<p><i>R181</i></p> <p><i>Upon obtaining our license to operate in the state of VT - we were under the impression that our application included VT. Criminal, Adult Abuse & Child Abuse record checks.</i></p> <p><i>→ Systemic Changes:</i></p> <p><i>All 3 (2 owners & contracted nurse) have undergone the record checks. We have implemented documentation to include the record checks upon any</i></p>	

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R181	Continued From page 2 providing direct care to residents had no evidence of record checks from the Vermont Criminal Information Center, the Adult Abuse Registry or the Child Abuse Registry. Two volunteers who provide minimal levels of care and/or supervision had no evidence of Adult Abuse Registry and Child Abuse Registry checks. During interview at 9:40 AM, the owner / managers of the home confirmed that these checks were not available.	R181	<i>new employees or contracted services to our facility. We have also filed these records in said employee records.</i> <i>3-10-2011 R181 POC accepted</i> <i>— C. Lareway, RN —</i>	

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