

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

October 29, 2013

Ms. Lina Metivier, Administrator  
Metivier Residential Care Home  
27 Brooklyn Street  
Barre, VT 05641

Provider #: 0067

Dear Ms. Metivier:

Enclosed is a copy of your acceptable plans of correction for the unannounced onsite re-licensing survey conducted on **October 2, 2013**. 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

PC:ne

Enclosure



Division of Licensing and Protection

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>0067</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br>B. WING: _____<br><br>OCT 21 13<br>Licensing and Protection | (X3) DATE SURVEY COMPLETED<br><br><b>10/02/2013</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>METVIER RESIDENTIAL CARE HOME</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>27 BROOKLYN STREET<br/>BARRE, VT 05641</b> |
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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 |
|--------------------|--|---------------|---|--------------------|
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| R100         | Initial Comments:<br><br>An unannounced onsite re-licensing survey was completed by the Division of Licensing and Protection on 10/2/13. Based on information gathered, the following regulatory violations were cited.  | R100 | <i>Looking over my paper work I discovered</i>   |  |
| R181<br>SS=D | V. RESIDENT CARE AND HOME SERVICES<br><br>5.11 Staff Services<br><br>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.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on record review and staff interview, the home failed to assure that employees had not been convicted of adult abuse or crimes inimical to the public safety (1 of 2 in the employee sample). Findings include: | R181 | <i>When I requested Child and Adult abuse check on Jennifer Knight's They send me 2 Child Abuse Registry checks instead of one of each, I enclosed the Adult protection abuse check and the criminal check - Jennifer's criminal check was done but was misplaced.<br/><br/>Since the inspection we have re organized and labeled folders and now have a folder/file on each and every Employee.</i> |  |

*Adult Registry check  
Criminal Background Check*

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| Division of Licensing and Protection<br>LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE<br><br><i>Gene Metevce</i> | TITLE<br><br><i>owner</i> | (X6) DATE<br><br><i>10/18/13</i> |
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| R181         | Continued From page 1<br><br>1. During record review on 10/2/13, there was no documentation provided to indicate that 1 of 2 employees had been screened prior to hiring and caring for vulnerable residents, using the Adult Abuse Registry and the Vermont Criminal Information System. At noon on 10/2/13, the Administrator confirmed that the home could not provide evidence that the employee had been screened for adult abuse and criminal convictions.   | R181 | See page 1<br>→ explained and adult care is enclosed.<br>R181 POC accepted 10/23/13 JHomerRN/PAUC  | 10/18 |
| R247<br>SS=E | VII. NUTRITION AND FOOD SERVICES<br><br>7.2 Food Safety and Sanitation<br><br>7.2.b All perishable food and drink shall be labeled, dated and held at proper temperatures: (1) At or below 40 degrees Fahrenheit. (2) At or above 140 degrees Fahrenheit when served or heated prior to service.<br><br>This REQUIREMENT is not met as evidenced by:<br>Based on observation, record review and staff interview, the home failed to assure that perishable foods were held at proper temperatures (refrigerated at or below 40 degrees Fahrenheit and frozen at or below zero degrees Fahrenheit) in 3 of 3 refrigerators and 4 of 5 freezer compartments used for resident foods. Findings include:<br><br>1. During the initial tour of the home on 10/2/13 at 9:45 AM, the thermometer in the refrigerator in the office area read 44 degrees Fahrenheit. In the additional 2 refrigerators observed on the tour, there was no thermometer present. For the five freezers observed, including one brown and one | R247 | As of 10/18<br>All thermometers are in place and temps are correct and will be monitored weekly by myself.<br>R247 POC accepted 10/23/13 JHomerRN/PAUC | 10/18 |

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| R247 | Continued From page 2<br><br>white upright in the garage, and two of three freezer compartments over the three refrigerators, there was no thermometer present. The Administrator confirmed during the tour that evidence was not available to show that temperatures had been monitored to assure proper ranges in 3 of 3 refrigerators and 4 of 5 freezers. | R247 | <i>See page 2</i> | <i>10/18</i> |
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