

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 14, 2013

Ms. Lynnette Smith, Administrator
Residential Care at the Manor
577 Washington Highway
Morrisville, VT 05661

Provider #: 0378

Dear Ms. Smith:

Enclosed is a copy of your acceptable plans of correction for the unannounced onsite re-licensing survey conducted on **October 15, 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: 0378	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/15/2013
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NAME OF PROVIDER OR SUPPLIER RESIDENTIAL CARE AT THE MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 577 WASHINGTON HIGHWAY MORRISVILLE, VT 05661
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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 re-licensing survey was conducted by the Division of Licensing and Protection from 10/14-10/15/13. The following regulatory findings were identified.	R100		
R128 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.5 General Care 5.5.c Each resident's medication, treatment, and dietary services shall be consistent with the physician's orders. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the home failed to assure there was a current physician's order for all medication and treatments for 1 of 5 residents sampled (Resident #2). Findings include: Per record review on 10/14/13, Resident #2 was identified as using continuous oxygen therapy. Per review of the MD orders for this resident, there was no signed order for the oxygen therapy. The Nurse Manager in charge was not able to locate a signed order for the oxygen, and called the MD office to obtain a signed order on 10/14/13. Per interview on 10/15/13 at 8:50 AM, the Nurse Manager confirmed that the resident had been on oxygen for a long time, and that there was no signed order in the medical record prior to obtaining the faxed order from the MD on 10/15/13 at 8:14 AM.	R128	R128 Resident Care and Services 5.5 General Care Signed order for resident #2 obtained 10/15/13. Residential Care Director to review all physician orders quarterly and all new orders are cosigned in system. Residential Care Director will review cosign report weekly. Completed 10/15/13	

Division of Licensing and Protection
 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

[Signature], NHA

[Signature]
Executive Director

11-11-13

STATE FORM

6899

9HHX11

If continuation sheet 1 of 3

R128, R247, + R246 POC's accepted 11/14/13
 K Campos RN / PML

PML

Division of Licensing and Protection

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R247 R247 SS=E	Continued From page 1 VII. NUTRITION AND FOOD SERVICES 7.2 Food Safety and Sanitation	R247 R247		
R266 SS=D	<p>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.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to assure that refrigerators located in the resident's rooms were monitored for proper temperature control for 5 of 5 residents sampled (Residents #1, #2, #3, #4, and #5). Findings include:</p> <p>During the initial tour on 10/14/13 at 9:45 AM, the surveyors observed that there were refrigerators located in each resident room, some containing food items and water bottles. At 10:15 AM, the aide working on the unit stated that the staff check weekly during cleaning the residents' rooms for old food that may need to be thrown away, however did not have a temperature monitoring system such as a log to assure safe food temperatures of each refrigerator. Per interview on 10/14/13 at 11:10 AM, the acting Nurse manager confirmed that there was no system in place to assure that the refrigerator temperatures were monitored regularly to assure that they were in range for safe food storage.</p>	R266	<p>R247 Nutrition and food services 7.2 Food Safety and sanitation</p> <p>All refrigerator temperatures are being monitored weekly.</p> <p>Logs are kept in the Manager's office for daily review.</p> <p>Director of Residential Care will check compliance monthly.</p> <p>Completed 10/15/13</p>	

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R266	<p>Continued From page 2</p> <p>9.1 Environment</p> <p>9.1.a The home must provide and maintain a safe, functional, sanitary, homelike and comfortable environment.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to assure that potentially hazardous items were secured in locked areas. Findings include:</p> <p>Per observation on 10/14/13 at 9:20 AM, during the initial tour of the home, the laundry room was found to be opened, and a gallon jug of bleach sitting on the sink counter, along with a spray bottle of cleanser. Per interview with the acting Manager, some of the residents do their own laundry, and the bleach belonged to a recently deceased resident of the home. Per interview on 10/14/13 at 9:30 AM, the Manager confirmed that the laundry room was left opened with the two bottles sitting out on the counter, and that any resident walking by the room would have access to the potentially harmful cleaning agents.</p>	R266	<p>R266 Physical Plant</p> <p>9.1 Environment</p> <p>Chemicals involved were taken care of on 10/15/13.</p> <p>Lock placed on cabinets in laundry room and all potentially hazardous items needed in that room are stored there.</p> <p>Director of Residential Care and Manager will monitor for compliance on daily rounds.</p> <p>Completed 10/15/13</p>	