

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

April 19, 2012

Ms. Melissa Greason, Administrator  
Washington Elms  
126 Elm Street  
Bennington, VT 05201

Dear Ms. Greason:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **February 14, 2012**. 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, MS  
Licensing Chief

PC:jl



Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0103	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  C 02/14/2012
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NAME OF PROVIDER OR SUPPLIER  WASHINGTON ELMS	STREET ADDRESS, CITY, STATE, ZIP CODE 126 ELM STREET BENNINGTON, VT 05201
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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 on-site re-licensure survey and complaint investigation were conducted on 02/14/12 & 02/15/2012. The following regulatory deficiencies were identified as a result of the recertification survey. There were no findings related to the complaint investigation.	R100	See attached sheets for Plans of Correction.	
R104 SS=C	V. RESIDENT CARE AND HOME SERVICES  5.1 Admission  5.2.a Prior to or at the time of admission, each resident, and the resident's legal representative if any, shall be provided with a written admission agreement which describes the daily, weekly, or monthly rate to be charged, a description of the services that are covered in the rate, and all other applicable financial issues, including an explanation of the home's policy regarding discharge or transfer when a resident's financial status changes from privately paying to paying with SSI or ACCS benefits. This admission agreement shall specify at least how the following services will be provided, and what additional charges there will be, if any: all personal care services; nursing services; medication management; laundry; transportation; toiletries; and any additional services provided under ACCS or a Medicaid Waiver program. If applicable, the agreement must specify the amount and purpose of any deposit. This agreement must also specify the resident's transfer and discharge rights, including provisions for refunds, and must include a description of the home's personal needs allowance policy.  (1) In addition to general resident agreement requirements, agreements for all ACCS	R104		

Division of Licensing and Protection

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

*Melissa Green*

TITLE

*owner/representative*

(X6) DATE

*02-15-12*

Division of Licensing and Protection

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R104	Continued From page 1  participants shall include: the ACCS services, the specific room and board rate, the amount of personal needs allowance and the provider's agreement to accept room and board and Medicaid as sole payment.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the facility failed to assure that the admission agreement provided to residents or resident representatives included all required information. Findings include:  Per record review, the admission agreement provided to all residents does not include the home's policy regarding discharge or transfer when a resident's financial status changes. The above was confirmed by the facility manager in an interview at 2 PM on 02/15/2012.	R104			
R145 SS=E	V. RESIDENT CARE AND HOME SERVICES  5.9.c (2)  Oversee development of a written plan of care for each resident that is based on abilities and needs as identified in the resident assessment. A plan of care must describe the care and services necessary to assist the resident to maintain independence and well-being;  This REQUIREMENT is not met as evidenced by: Based on observation, record review and staff interview, the facility failed to assure that a written plan of care was developed for each resident which described care and services necessary to	R145			

Division of Licensing and Protection

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R145	Continued From page 2 assist the resident to maintain independence and well-being. Findings include:  Per observation, record review and staff interview the facility serves a population of residents with mental health needs. The care plans for the five residents (Residents #1, #2, #3, #4, & #5) in the selected sample addressed the resident's physical needs however mental health needs and interventions were not addressed in any of the five care plans. The above was confirmed in an interview with the facility manager in an interview at 11:30 AM on 02/15/2012.	R145		
R162 SS=D	V. RESIDENT CARE AND HOME SERVICES  5.10 Medication Management  5.10.c. Staff will not assist with or administer any medication, prescription or over-the-counter medications for which there is not a physician's written, signed order and supporting diagnosis or problem statement in the resident's record.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to assure that delegated staff did not administer any medication for which there was not a written, signed physician's order for all medications that includes a route of administration for 1 resident (Resident #5). Findings include:  Per record review Resident#5 was admitted to the facility on 03/02/2011. The Medication Administration Record (MAR), indicating the start of medication administration on 03/02/2011, in the evening, lists the following:	R162		

Division of Licensing and Protection

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R162	Continued From page 3  Metoprolol 50 mg take 1 tablet twice a day Combivent 18-103 Inhaler take 1 puff every 6 hours as needed Lisinopril 5 mg take 1 tab daily Vitamin D3 2000 units take 1 tab daily Risperdal Consta 50 mg IM (Intra Muscular) every two weeks Clozapine 100 mg take 2 1/2 tabs at bedtime (dose 250 mg) Clonazepam 1 mg take one tab twice a day Clonazepam 1 mg take one tab at bedtime as needed Benzotropine 2 mg take 1 tab at bedtime Docusate 100 mg take 1 tab twice a day  The record contains a signed order for the last six medications listed above. It also contains a printed list which is an unsigned current medications list containing the first four medications. There is a separate sheet which states see attached list and same medications which was signed and dated 03/09/2011. In both the orders signed on 03/01/2011 and the printed current medications list, as well as the handwritten MAR there are no routes of administration for any medications with the exception of the IM Risperdal Consta. The above was confirmed in an interview with the facility manager at 11:30 AM on 02/15/2012	R162		
R179 SS=E	V. RESIDENT CARE AND HOME SERVICES  5.11 Staff Services  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	R179		

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R179	Continued From page 4  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:  (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.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to assure that staff providing direct care to residents completed twelve hours of education annually which included the seven mandatory topics. Findings include:  Per staff interview the direct staff inservice trainings are tracked by calendar year. In a review of records of five selected staff, for the year 2011, the staff completed just ten hours of education which included only four of the mandatory topics. Resident emergency response, Respectful and effective interaction with residents, and Infection Control were not included in the trainings.	R179		
R189 SS=B	V. RESIDENT CARE AND HOME SERVICES	R189		

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R189	Continued From page 5  5.12.b. (3)  For residents requiring nursing care, including nursing overview or medication management, the record shall also contain: initial assessment; annual reassessment; significant change assessment; physician's admission statement and current orders; staff progress notes including changes in the resident's condition and action taken; and reports of physician visits, signed telephone orders and treatment documentation; and resident plan of care.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the facility failed to assure that the record, for residents requiring nursing oversight and medication management, contained the initial assessment, for three residents in a sample of five (Residents #2, #3, & #4). Findings include:  Per record review, no admission assessments were found in the records of three residents (Residents #2, #3 and #4). Resident #2 was admitted 01/04/2000, Resident #3 was admitted 06/10/1999, and Resident #4 was admitted 10/23/2003. In an interview at 9:30 AM on 02/15/2012 the facility manager stated that the assessments were not in the records and were located in storage in the attic.	R189		
R240 SS=E	VII. NUTRITION AND FOOD SERVICES  7.1 Food Services  7.1.b Meal Patterns  The following guide provides the basis for meal	R240		

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R240	Continued From page 6  planning and will provide nearly 100% of the RDA for most residents. In cases of a resident's advanced age and very light activity, homes may consider each resident's needs with respect to portion size and frequency of eating but shall not compromise overall nutrient intake. In addition to the suggested food servings, particular emphasis must be given to fluid intake for residents.  Suggested Daily Food Group Servings      What Counts as a Serving  Bread, Cereal, 6-11      1 slice bread, tortilla Rice, Pasta      ½ bagel, English Muffin ½ hamburger/ hot dog roll, pita ½ cup cooked cereal, rice, pasta 1 oz ready-to-eat cereal 3-4 small or 2 large crackers  Fruit      2-4      ¾ cup 100% fruit juice 1 medium apple, banana or other fruit ½ cup fresh, cooked or canned fruit ¼ cup dried fruit  Vegetables 3-5 chopped      ½ cup cooked or raw vegetables 1 cup leafy, raw vegetables ¾ cup vegetable juice Milk, Yogurt, 3 or more      1 cup milk, yogurt Cheese      1 ½ oz natural cheese	R240		

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R240	<p>Continued From page 7</p> <p>Meat, Poultry, 2 (total of 2-3 oz cooked lean Legumes, Eggs 4-5 oz/day) meat, poultry or fish Nuts 1/2 cup cooked legumes 1 egg 2 tablespoons peanut butter 1/3 cup nuts Fluids 8 cups Water, juice, herbal tea, (8 fluid oz each) non-caffeinated Coffee, tea</p> <p>At least one serving of citrus fruit or other fruit or vegetable rich in vitamin C shall be served each day. At least one serving of fruit or vegetable rich in vitamin A shall be served at least every other day.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to assure that menus provide 100% of the recommended daily allowance of all foods, to include at least one serving of fruit or vegetables rich in Vitamin A.</p> <p>Per review the menus for a two week period, daily menus did not reflect 3-5 servings of vegetables on each day. Further, there were not fruits or vegetables rich in Vitamin A, such as apricots, cabbage, cantaloupe, leaf or romaine lettuce, mango, sweet potato, and/or watermelon, included on most days. The above was confirmed with the facility manager and administrator on 02/14/2012 at 2:45 PM.</p>	R240		

*POC ACCEPTED  
4-18-12  
Margaret Higgins*

Section: R104 V SS=C Resident Care And Home Services

5.1 Admission

5.2. a

The admission agreement will be modified to include the paragraphs : Washington Elms has the right to give a resident a thirty day notice to discharge or transfer in the event a residents financial status changes and the resident is unable to meet his/her monthly rent.

If the resident's financial status changes and the resident is eligible for Medicaid and Assistive Community Care services the facility will make the forms available and assist the resident to complete forms as necessary. Washington Elms reserves the right to discharge a resident for nonpayment of rent.

All contracts will be rewritten to add this addendum this will be monitored by the nurse manager.

POC Accepted  
Margaret Hyatt RN  
4-18-12

Section: R189 V. Resident Care And Home Services

SS=B 5.12.b (3)

Of the twenty four residents residing at Washington Elms All current Assessments are in the residents chart , If the resident has resided for more than one year the last years assessment is also in the residents chart. For twenty three residents the initial assessment is in the residents chart. The remaining one resident the initial assessment is at this time unable to be located. He was admitted in 2007, his 2008 assessment has been placed in his chart.

From this time forward RN Manager will monitor that all records will include initial assessment, current year assessment, last year assessment, and any significant change assessment.

All Resident assessments will be completed on admission to facility, upon significant change in condition, and yearly.

RN manager will monitor the resident assessment due dates. This will be done by completing a chart (sees attached) with the due dates clearly marked for each resident with the month and day. This will be monitored on a regular basis.

POC  
ACCEPTED  
Margaret Hyams  
RW  
4-18-12

Section: R240 SS=E VII. Nutrition and Food Services

7.1 Food Services

7.1. b Meal Patterns

The Manager and the Administrator will write a weekly menu plan. This plan will reflect more completely to the foods and fluids provided, including all meals and snacks. Recommended Dietary Guidelines will be utilized in completing these menus.

This week's menu is attached as a sample.

POC  
ACCEPTED  
Margaret Higgins  
RW  
11-18-12

Section:R162-SS=D V Resident Care And Home Services

5.10 Medication Management 5.10.c

Upon all new admission to Washington Elms the RN Nurse Manager will personally verify all medication orders. This process will include verification of Primary Care Physician, as well as any specialist signature on orders .All medication orders will include Resident, Medication, time, route, and dose. Any treatments will include medication where to be applied details of how to clean area, stop date or follow up date with MD. Copies of Medication orders will be sent to Extended Care Pharmacy and to primary MD if resident is transferring to primary MD within the area.

POC  
ACCEPTED  
Margaret Hyms  
4-18-12

Section: R179 V SS=E V . Resident Care And Home Services

5.11 Staf Services

5.11.b.

RN Manager will monitor the twelve hours per year of in-services that will include the seven hours of mandatory in-service for each employee. Washington Elms will utilize a calendar year system. A chart will be utilized with all staff name, and the seven mandatory in-services and blank squares for the remaining five hours of in-services to be documented (see attached). The RN will personally train the staff or obtain assistance from outside resources as required.

POC  
ACCEPTED  
Meyent 7/25/12  
RW  
4-18-12