

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

November 18, 2011

Mr. Steve Simpson, Administrator
Waterford Group Home
659 High Ridge Road
Waterford, VT 05819

Provider #: 0162

Dear Mr. Simpson:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **October 6, 2011**. 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



OCT 26 2011

PRINTED: 10/13/2011
FORM APPROVED

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0162	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/06/2011
NAME OF PROVIDER OR SUPPLIER WATERFORD GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 659 HIGH RIDGE ROAD WATERFORD, VT 05819		
(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 initiated by the Division of Licensing and Protection on 9/27/11, and concluded on 10/6/11 after offsite interviews were completed. The following regulatory violations were identified.	R100		
R167 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.10 Medication Management 5.10.d If a resident requires medication administration, unlicensed staff may administer medications under the following conditions: (5) Staff other than a nurse may administer PRN psychoactive medications only when the home has a written plan for the use of the PRN medication which: describes the specific behaviors the medication is intended to correct or address; specifies the circumstances that indicate the use of the medication; educates the staff about what desired effects or undesired side effects the staff must monitor for; and documents the time of, reason for and specific results of the medication use. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the home failed to assure that medication administration records were accurate, and contained clear instructions for usage for 1 of 2 residents sampled (Resident#1). Findings include: Per record review on 9/27/11, Resident #1 had an order for both scheduled and PRN (as needed) Lorazepam (Ativan) in June 2011. Per review of	R167	<i>See Attached</i>	

Division of Licensing and Protection

Sean Booker
TITLE *Acting manager*

(X6) DATE
10/21/11

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

Division of Licensing and Protection

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R167	Continued From page 1 the Medication Administration Record (MAR) the PRN order was for "Ativan 1 mg., 1 to 2 tabs as needed for aggression for a total of 2 mg./day". There was no indication or direction to staff regarding when it would be appropriate to give one tab or two. The physician discontinued both the scheduled and PRN dose of Ativan on 6/8/11 due to some unwanted side effects. The scheduled dose was removed from the MAR in July and August 2011, however the PRN dose remained listed on the MAR in July and August after it was discontinued. On 8/19/11, the physician prescribed "Lorazepam 1 mg. tab, take one orally PRN for anxiety, may repeat x1". There was no indication as to how soon after the first dose it could be administered again. Per interview on 9/27/11 at 3:30 PM, the Division Director confirmed that the MAR incorrectly listed the discontinued PRN order for Ativan in July and August 2011, and that there were no clear indications for staff to decide which dose, or how soon after the first dose, to administer the medication.	R167			
R293 SS=F	IX. PHYSICAL PLANT 9.7 Water Supply 9.7.b If a home uses a private water supply, said supply shall conform to the construction, operation and sanitation standards published by the Department of Health. Private water supplies shall be tested annually for contamination, and copies of results shall be kept on premises. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the home failed to annually test the private water	R293	<i>See Attached</i>		

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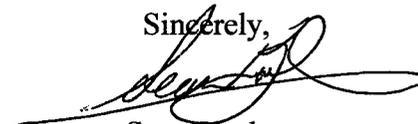
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R293	Continued From page 2 supply for contamination. Findings include: Per review of maintenance records on 9/27/11, there was no documentation available to show that the home's private water supply had been tested since 5/20/09. In follow up by telephone on 10/6/11, the Director of Residential and Risk Management stated that the home's water supply had not been tested annually for the years 2010 and 2011.	R293	<i>R167, R293 P.O.C accepted 11/3/11 Karen Campos RN</i>	

To: Division of licensing and protection
From: Sean Booker (Acting manager of the Waterford Group Home)
RE: Plan of correction for deficiencies noted during survey.
Date 10/21/2011
Time: 2:00pm

To whom it may concern. This letter is to inform you that the plan of correction has been active and ongoing. In regards to the deficiency tag R167. 5.10, Medication Management. All Written scripts pertaining to the PRN Ativan will be revised to specify the exact dose and a protocol that was always in place has since been displayed in a area of the medication book where all staff will be able to access the protocol page. On 10/19/2011, during a staff meeting, Staff reviewed the ativan administration protocol and made clear when to give the PRN Ativan and how much to give. Staffs are required to call the house manager before administering the PRN ativan and the house manager will determine if the administration of the Ativan is warranted. Staff members are required to count all controlled substances with another staff member before the start of every shift to confirm the count of the ativan. Staff will initial a controlled substance count sheet and the house manager will verify all counts and confirmation of the counts on a daily basis. The house manager will also make sure that the prescription is up to date and current with the agency psychiatrist on a quarterly basis and inform the agency nurse of any changes on a weekly and/or by incident basis. The Agency Psychiatrist has been informed that the prescription for the Ativan PRN will need to be re written to specify the exact dose of the medication and the exact times period in which it can be administered. This matter will be fully rectified by 10/26/2011, which is the date of the consumers' next follow up and med review with the agencies lead psychiatrist.

In regards to the deficiency tag R293, 9.7, Water Supply. The house manager has requested a water test to be completed by 11/4/2011. The house Manager will request a water test to be conducted every year thereafter on the eleventh month. Copies of the results will be filed in the licensing book at the group home, with Gilman Housing Authority (property owners), and with the Director of residential and risk management. I hope this will rectify any discrepancies pertaining to the Waterford Men's home. Please feel free to call the home at [REDACTED] with any questions or concerns that you may have.

Sincerely,



Sean Booker
Acting Manager
Waterford Group Home

R167, R293

POC accepted 11/3/11

Raven Campos RN