

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, 2012

Ms. Katherine Satterthwaite, Administrator
Watson House
18 Prospect Street
North Bennington, VT 05257

Dear Ms. Satterthwaite:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **October 8, 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
Licensing Chief

PC:jl



Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0160	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ Licensing and Protection	NOV 8 11 (X3) DATE SURVEY COMPLETED 10/08/2012
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NAME OF PROVIDER DR SUPPLIER WATSON HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 18 PRDSPECT STREET NORTH BENNINGTON, VT 05257
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R100	Initial Comments: An unannounced on-site re-licensing survey was conducted by the Division of Licensing and Protection on 10/08/12. The following are Residential Care Home regulation violations.	R100	<i>The admission agreement for Resident # 1 was located after the survey, however it was not appropriately placed in the Resident's Chart.</i>	
R104 SS=A	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 participants shall include: the ACCS services, the specific room and board rate,	R104	<i>As a result, a check list has been developed and placed in each chart outlining the documents required in the Medical Record. The Nurse Manager will review each chart monthly to ensure the check list is followed and all appropriate documents are properly filed within the chart. A mandatory inservice is scheduled for Nov 14, 12 at which time the check list will be discussed.</i>	R104 POC accepted 11/14/12 SEMMONS/PW/PMC 11/14/12

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Katherine Stathewick RN</i>	TITLE <i>RN</i>	(X6) DATE <i>11.6.12</i>
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PMC

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R104 Continued From page 1
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, for 1 of 4 resident records reviewed, the facility failed to assure that a written admission agreement describing daily, weekly, or monthly rate and/or other required information was provided to residents or their legal representative (Resident #1). Findings include:

1. Per record review on 10/08/12, Resident #1, who was admitted on 09/06/12, had an Admission agreement which contained no information regarding the daily, weekly, or monthly rate. The manager confirmed in an interview on 10/08/12 at 4:05 PM that there were no rates contained in the agreement.

R173 V. RESIDENT CARE AND HOME SERVICES
SS=D

5.10 Medication Management
5.10.h.
(1) Resident medications that the home manages must be stored in locked compartments under proper temperature controls. Only authorized personnel shall have access to the keys

This REQUIREMENT is not met as evidenced by:

R104

To ensure that medications are locked at all times, a new form has been implemented for each change of shift -

The "Medication Inventory sheet" states "accountable drug are to be counted at each shift's change. All medications are to be secured + locked and all keys are to be given to the next shift change person. The last name on the sheet is the

Responsible party"

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R173	Continued From page 2 Per observation and staff interview, the home failed to assure that refrigerated medications were stored in locked compartments under proper temperature controls. Findings include: Per observation on 10/08/12 during the initial tour at 10:30 A.M., the home's refrigerated medications (insulin's, flu vaccines and suppositories) were stored in a compact refrigerator. There was no lock on the refrigerator and the inside had a build up of ice. During interview at the time of observation, and confirmed by the Administrator, the compact refrigerator should be secured and should be free of the build up of ice.	R173	<i>To ensure that all meds are at a proper temperature and free of ice build up a new form has been put in place requiring the night charge person to check all refrigerators and freezers for ice build up. The form requires documentation of monthly defrosting or more frequently as needed. Times and dates of actions will be noted. The Nurse Manager will routinely check the form and refrigerators to ensure compliance.</i>
R190 SS=E	V. RESIDENT CARE AND HOME SERVICES 5.12.b.(4) The results of the criminal record and adult abuse registry checks for all staff. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the RCH failed to ensure required background checks were completed for 4 of 6 current staff. Findings include: Per record review of personnel files on 10/08/12 at 12:45 P.M., 4 out of 6 RCH employees did not have evidence of Vermont criminal (VCIC) and/or Adult Protective Services (APS) background checks. The Administrator on 10/08/12 at 1:00 PM stated that s/he was not aware of what exactly was required but is careful about who gets hired and thought that the Office of Inspector General background check and/or	R190	<i>A mandatory inservice will be held on 11/14/12 at which time this issue will be discussed.</i> <i>R173 POC accepted 11/14/12 SEM/mon/RN/AMC 11/14/12</i> <i>R190 - All VCIC Child and adult abuse checks are up to date and properly filed in each employee record.</i> <i>A new document has been developed outlining all information required on every individual prior to hire.</i> <i>The form will be completely onl</i>

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R190	Continued From page 3 Child abuse check was sufficient. S/he confirmed that the Vermont criminal record and adult abuse registry checks for all staff were not complete.	R190	<i>Successfully processed before employment commenced.</i> <i>The Nurse Manager will sign and date the form once all requirements are successfully met.</i> <i>11/5/12</i> <i>R190 POC accepted 11/8/12 Simmons RUI/Pme</i>	
R234 SS=C	VII. NUTRITION AND FOOD SERVICES 7.1.a.(3) The current week's regular and therapeutic menu shall be posted in a public place for residents and other interested parties. This REQUIREMENT is not met as evidenced by: Per observation, the current week's regular menu was not posted in a public place for residents and other interested parties. Findings include: Per observation on 10/08/12 at 10:30 A.M. during the initial tour, the lunch menu was posted on a 'white board' in the hall near the dining room area. However, the menu for the week was not posted in a public place. Per interview at 3:15 P.M. the Administrator stated that the menu can change from day to day and is written on the 'white board' prior to each meal. S/he confirmed at that time the weekly menu is not posted. Also see R235	R234		
R235 SS=C	VII. NUTRITION AND FOOD SERVICES 7.1.a.(4) The home must follow the written, posted menus. If a substitution must be made, the substitution shall be recorded on the written menu. This REQUIREMENT is not met as evidenced by:	R235		

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R235	<p>Continued From page 4</p> <p>Per observation and interview the RCH failed to follow the written posted menu, and failed to record substitutions made to the written menu. Findings include:</p> <p>Per observation on 10/08/12 at 10:30 A.M. during the initial tour, the lunch menu was posted on a 'white board' in the hall near the dining room area. Per interview at 3:15 P.M. the Administrator stated that the menu can change from day to day and that a weekly menu plan is available for staff to follow but changes are noted on 'post-it' paper on the master menu plan. Per observation at 4:30 P.M. a quiche was being prepared for the evening meal and the master menu had pork chops listed. Although the quiche was noted on the 'white board' it was not recorded as a substitution of the day, as the menu is not posted for the week. This was confirmed by the Administrator.</p> <p>Also see R234</p>	R235	<p><i>A new monthly menu has been developed. It is now posted on The Resident Bulletin Board weekly. The Nurse Manager will ensure this is done on a weekly basis.</i></p> <p><i>A Dietary Notebook has been introduced to include any daily menu changes to be recorded and kept on file.</i></p> <p><i>This will be discussed at a mandatory inservice held on 11/14/12</i></p> <p><i>11/14/12</i></p> <p><i>R234 + R235 PDC's accepted 11/01/12 Semmons RN/PMC</i></p>