VERMONT

AGENCY OF HUMAN SERVICES
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury, VT 05671-2060
http://www.dail.vermont.gov
Survey and Certification Voice/TTY (802) 241-0480
Survey and Certification Fax (802) 241-0343
Survey and Certification Reporting Line: (888) 700-5330
To Report Adult Abuse: (800) 564-1612

December 18, 2023

Ms. Sabrina Krafchuk, Manager
Vernon Assisted Living Residence
13 Greenway Drive
Vernon, VT 05354

Dear Ms. Krafchuk:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **November 13, 2023.** 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.

If you have any questions, please feel free to contact me at (802) 585-0995.

Sincerely,

Carolyn Scott, LMHC, MS
State Long Term Care Manager
Division of Licensing & Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	1006	A. BUILDING: _____ B. WING _____	C 11/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VERNON ASSISTED LIVING RESIDENCE	13 GREENWAY DRIVE VERNON, VT 05354

(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-licensure survey, along with two complaint investigations was conducted by the Division of Licensing and Protection on 11/13/23. No regulatory deficiencies were identified with the two complaint investigations. However, regulatory deficiencies were identified through the re-licensure survey. Findings include:	R100	R191 The statements made on this plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies herein. To continue to remain in compliance with state regulations, Vernon Hall Assisted Living Residence will take the actions set forth in this plan of correction. At no time was any resident actually harmed as a result of this situation.	
R191 SS=F	V. RESIDENT CARE AND HOME SERVICES 5.12 Records/Reports 5.12.c A home must file the following reports with the licensing agency: 5.12.c.(1) When a fire occurs in the home, regardless of size or damage, the licensing agency and the Department of Labor and Industry must be notified within twenty-four (24) hours. A written report must be submitted to both departments within seventy-two (72) hours. A copy of the report shall be kept on file. 5.12.c.(2) A written report of any accident or illness shall be placed in the resident's record. Any untimely deaths shall be reported and a record kept on file. 5.12.c. (3) A report of any unexplained absence of a resident from a home for more than 12 hours shall be reported to the police, legal representative and family, if any. The incident shall be reported to the licensing agency within twenty-four (24) hours of disappearance followed by a written report within seventy-two (72) hours, a copy of which shall be maintained.	R191	On 6/6/2023 Vernon Hall Assisted Living was notified that the potable water test results exceeded drinking water standards from a surveillance test that occurred on 6/1/2023. The following test results from a test that was conducted on 6/6/2023 resulted in <1 ug/L for Uranium from Vernon Hall Assisted Living Kitchen Prep Sink. Vernon Homes also conducted a raw water test on the same day, 6/6/2023, that resulted in 68 ug/L for Uranium. These results were received in the 72-hour period (8:30 AM on 6/7/2023) leading Vernon Hall Assisted Living to believe there was not a breakdown or cessation to the home's physical plant's major services.	

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R191	Continued From page 1 5.12.c.(4) A written report of any breakdown or cessation to the home's physical plant's major services (plumbing, heat, water supply, etc.) or supplied service, which disrupts the normal course of operation. The licensee shall notify the licensing agency immediately whenever such an incident occurs. A copy of the report shall be sent to the licensing agency within seventy-two (72) hours. 5.12.c. (5) A written report of any reports or incidents of abuse, neglect or exploitation reported to the licensing agency. 5.12.c. (6) A written report of resident injury or death following the use of mechanical or chemical restraint. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the Assisted Living Residence (ALR) failed to report a breakdown in the home's physical plant's major services (plumbing, heat, water supply, etc.) or supplied services, which disrupts the normal course of operations to the licensing agency. Per record review on 11/13/23 it was noted that on 6/06/23 water testing conducted by Vermont Department of Environmental Conservation on 6/01/23 resulted in above the 20 ug/L recommended Combined Uranium levels. On 06/01/23 the facilities water Combined Uranium levels were noted to be 178 ug/L leaving the facility and residents unable to consume facility water from 06/06/23 through 11/01/23. Per interview with the facility Manager conducted on 11/13/23 at 2:00 PM s/he confirmed that the facilities water had contained above	R191	Beliefs aside, Vernon Hall Assisted Living instituted immediate action on 6/6/2023 following the recommendations per Vermont Department of Environmental Conservation while determining the cause of the test result conducted on 6/1/2023. Stored bottled water was distributed to residents for consumption, the kitchen had access to gallon water to cook, bags of ice, and juice machine was shut off using bottled juice in place. The distribution letter was posted and handed out to residents on 6/6/2023 as well as being discussed in the resident association meeting held on 6/13/2023 at 2pm in the Chapel. Since then, it has been discussed on a monthly basis with ample opportunity for residents to vocalize questions, concerns, or feedback. Resident association meetings were held on 7/5/2023, 8/1/2023, 9/5/2023, 10/3/23. No concerns were brought up during these times. Residents were asked if they had sufficient water at each meeting, they were informed who to notify if they needed more or where to find it, and where to go for resources to receive another copy of the letter. On 11/1/23 a letter went out to all residents and was posted regarding the no drink order being lifted. The lift was discussed at the resident association meeting that was held on 11/21/2023.	

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R191	Continued From page 2 recommended Combined Uranium levels resulting in the facility and its residents being unable to consume the facility water from 06/06/23 through 11/01/23. Additionally, s/he confirmed that this incident was not reported to the licensing agency at the time of occurrence.	R191	**5.12.c** **What corrective action will be accomplished for those residents found to have been affected by the deficient practice;** A written report was completed and sent to DAIL on 12/1/2023 regarding the Uranium Levels and No Drink Order for Vernon Hall Assisted Living. Education for reporting procedures will be completed by 12/04/2023 to necessary personnel to ensure the licensing agency is informed within the 72 hour window. **What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur;** Director of Maintenance is to notify Administrator and Facility Manager of any potential breakdown and cessation regardless of extent. Any potential breakdowns or cessations will be reviewed internally within 48 hours and then reported within 72 hours if the issue is not rectified even with proper protocols in place. **How the corrective actions will be monitored so the deficient practice does not recur?** Director of Maintenance will provide monthly water testing schedule and water testing results upon receipt to the Facility Manager. Facility Manager will review test results with Maintenance Director to determine if the Facility Water system is in compliance with drinking water standard or noncompliance reporting is needed. Water test results will be reviewed at department head meetings on a monthly basis.	12/1/23 12/4/23 11/28/23 12/4/23

Tag 191 Accepted.
Jenielle Shea, RN
12/8/2023