

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

February 6, 2014

Mr. Francis Cheney, Administrator
Pines Rehab & Health Ctr
601 Red Village Road
Lyndonville, VT 05851-9068

Dear Mr. Cheney:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **January 15, 2014**. 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

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/22/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 475044	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/15/2014
NAME OF PROVIDER OR SUPPLIER PINES REHAB & HEALTH CTR			STREET ADDRESS, CITY, STATE, ZIP CODE 601 RED VILLAGE ROAD LYNDONVILLE, VT 05851	
(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) COMPLETION DATE
F 000	INITIAL COMMENTS	F 000		
F 516 SS=E	<p>An unannounced onsite recertification survey was conducted by the Division of Licensing and Protection from 1/13/14 - 1/15/14. The following regulatory violation was identified.</p> <p>483.75(l)(3), 483.20(f)(5) RELEASE RES INFO, SAFEGUARD CLINICAL RECORDS</p> <p>A facility may not release information that is resident-identifiable to the public.</p> <p>The facility may release information that is resident-identifiable to an agent only in accordance with a contract under which the agent agrees not to use or disclose the information except to the extent the facility itself is permitted to do so.</p> <p>The facility must safeguard clinical record information against loss, destruction, or unauthorized use.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and per staff interview, the facility failed to assure that medical records were stored in a secure area (Area # 1), and that medical records were maintained in a secure area (Area # 2). Findings include: Per observation on January 14, 2014 at 0730 AM the room designated for storage of closed medical records, (Area # 1) was not locked. The administrative office person responsible for unlocking the door on this day stated that she/he unlocks the door every morning and that it remains unlocked until she/he locks it at the end</p>	F 516	see POC with completion date: 2/21/14	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Francis Chenek* TITLE: *Administrator* (X6) DATE: *1-30-14*

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

PHL

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F 516	<p>Continued From page 1</p> <p>of his/her working day. When asked how the medical record storage room is monitored for access she/he replied that it is monitored via visual from his/her office across the hall. Per observation the office person was not in his/her office at all times to maintain constant visual through the course of the day. The medical records contained in storage are in unlocked file cabinets. The office person confirmed on January 14, 2014 at 0735 AM that she/he unlocked the door to the medical record storage area and that it remained unlocked even though it was not under constant monitoring for access.</p> <p>Per observation on January 15, 2014 the medical records for residents housed on B Wing and C Wing (Area # 2), were not secure. The records were contained in a common area in C Wing where residents congregate and receive visitors. The area is accessible to residents, visitors, and staff who do not have a medical record clearance. On January 15, 2014 at 11:40 AM the Director of Nursing Services confirmed that the records have been retained in that area for a very long time.</p>	F 516			

The Pines Rehabilitation and Health Center**Plan of Correction****Survey Completed on 1/15/2014****F516 483.75(3), 483.20(f)(5)****RELEASE RESIDENT INFORMATION, SAFEGAURD CLINICAL RECORDS**

The facility failed to assure that medical records were stored in a secure area (area #1), and that medical records were maintained in a secure area (area #2).

I. Action taken to correct the deficiency:

1. Area #1 had a combination lock added on 1/31/14 and it will remain locked at all times.
2. Area #2 charts have been temporarily moved to a locked location until a new wall is added.
3. Self-closing hinges will be added to the locked areas by 2/21/2014 (they had to be ordered).
4. Sign out sheets have been put in to place for record removal.
5. New policy in place for storage and retrieval of records.
6. All staff has been informed of new policy and protocol.

II. Corrective actions monitored so that deficiency does not recur:

1. LN's will walk through affected areas every shift to make sure doors to secured areas are shut (they lock automatically when shut). This will be done an ongoing basis to ensure compliance.

All residents have the potential to be affected.

Completion date: 2/21/2014

Francis E. Cheney Jr. is responsible for the correction of this deficiency.

F516 POC accepted 2/6/14 K Campos RN/PMC



The Pines Rehabilitation and Health Center

601 Red Village Road • Lyndonville, VT 05851

(802) 626-3361

Frank Cheney, Administrator

LOCATION AND STORAGE OF MEDICAL RECORDS

Policy statement

Our Facility shall protect and safeguard all medical records.

Policy and Interpretation and Implementation

1. All current medical records are filed in the Medical Records Department and are maintained by the Medical Records Clerk. If the Medical Records Clerk is unavailable the Administrator and Director of Nursing will maintain.
2. Medical records are stored in a locked room and protected from fire, water damage, insects, and theft.
3. Archived medical records (those being retained for a specific period beyond resident's discharge or death) will be clearly identified as archive records and stored appropriately.
4. Should this facility temporarily cease operation, all records shall be stored and maintained within the facility.
5. Should our facility be unable to store such records, they shall be boxed, properly labeled for easy identification, and forwarded to N/A, (at this time) until such time as they can be returned to the facility.
6. Should this facility cease operations permanently, records shall be boxed, properly labeled for easy identification, and forwarded to N/A (at this time), until such time as lawful disposition can be made.
7. The Medical Records Clerk shall be the only authority to retrieve filed medical records. During his/her absence, the Administrator or Director of Nursing Services may sign out medical records.



Love is Ageless

The Pines Rehabilitation and Health Center

601 Red Village Road • Lyndonville, VT 05851

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Frank Cheney, Administrator

SIGNING OUT OF MEDICAL RECORDS FROM NURSES STATION

Medical records removed from the nursing station are to be signed out.

Policy Interpretation and Implementation

1. Medical records taken from the nursing station must be signed out by the person taking such records.
2. Records must be signed in by the person returning the records.
3. The medical record Sign- Out/In Form must remain in the records department at all times.
4. Medical records are stored at the nursing station in a locked room at all times, except when needed by care plan team members or during Physician resident rounds. All records must be signed in and out.

1/20/2014