



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

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 29, 2012

Joel Stephens, Administrator
Caledonia Home Health Care
161 Sherman Drive
Saint Johnsbury, VT 05819-1146

Provider ID #:477010

Dear Mr. Stephens:

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

Follow-up may occur to verify that substantial compliance has been achieved and maintained.

Sincerely,

A handwritten signature in black ink that reads "Pamela M. Cota RN". The signature is written in a cursive style.

Pamela M. Cota, RN, MS
Licensing Chief

PC:jl

Enclosure



PRINTED: 02/17/2012
FORM APPROVED

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VT477010	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/14/2012
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NAME OF PROVIDER OR SUPPLIER CALEDONIA HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 151 SHERMAN DRIVE SAINT JOHNSBURY, VT 05818
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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)	(X6) COMPLETE DATE
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H 001	Initial Comments An unannounced onsite complaint investigation was conducted by the Division of Licensing and Protection on 2/14/12. Regulatory violations were identified under the State Designation and Operation of Home Health Agencies.	H 001	To meet this requirement Caledonia has implemented the following: 1. On 2/2/2012 a mandatory in-service was conducted by Janice Bradley from APS. This training was based on the booklet Raising Awareness – A Guide to Recognizing and Reporting Abuse, Neglect, and Exploitation of Vulnerable Adults. This in-service focused on: a. Defining vulnerable adult b. Defining abuse, neglect, and exploitation based on state statute. c. Describing who is a mandated reporter, timelines for reporting and penalties for failure to report. d. Review how to make a referral to adult protective services.	
H 517 SS=D	5.7(a) Requirements for Operation V. Requirements for Operation 5.7 A home health agency shall notify the Department of all critical incidents among its current patient population within specified time frames below. Verbal reports shall be followed by a written report that summarizes the occurrence. (a) A home health agency shall report any suspicion of abuse, neglect or exploitation as defined in 33 V. S. A. §6902 to the Division of Licensing and Protection's Adult Protective Services unit within 48 hours. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the agency failed to make a report of alleged exploitation of a client to the Division of Licensing and Protection. Findings include: Per record review on 2/14/12, Client #1 stated to their case manager on 8/8/11 that they suspected theft of narcotic pain medication by a Personal Care Attendant. During a meeting on 8/9/11, the Case Manager and other supervisory staff from the agency met to discuss the allegation in a phone conference with the client. Client #1 refused to give the name of the person suspected of diverting medication, as there was no proof.	H 517	2. Review and update, if needed, all policies and procedures related to reporting to adult protective services and DAIL a. Completion Date: April 2012 3. Provide the following in-service to both management and staff regarding agency protocol for reporting adult protection related concerns to DAIL a. Completion date: May 2012 4. The Clinical Director will review all incident reports concerning suspicion of abuse, neglect or exploitation to assure that all critical incidents are reported to DAIL and/or adult protective services as outlined in regulation.	POC accepted Karen Campos/ Francis Keeler 2/29/12

Division of Licensing and Protection	TITLE	(X5) DATE
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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NAME OF PROVIDER OR SUPPLIER CALEDONIA HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 161 SHERMAN DRIVE SAINT JOHNSBURY, VT 05819
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H 517	Continued From page 1 The Case Manager told the client that they could not pursue the allegation any further without a named suspect. Per interview on 2/14/11 at 3:15 PM, the Case Manager and Clinical Director confirmed that because the client would not name a suspect they had not made a report to the State agency regarding the drug diversion allegation.	H 517	The Human Resources Department has reviewed the process utilized to ensure that staff are licensed. Upon hire, NCHC obtains copies of professional licenses and as licensure occurs, licenses are tracked and verified by the submission of copies of the new licenses. The employee handbook for NCHC also states that employees with professional licensure are responsible for maintaining their licenses and it further stipulates that failure to maintain current licensure will result in the employee being suspended from duty until their credentials are up to date.	
H 520 SS=D	<p>5.8 Requirements for Operation</p> <p>V. Requirements for Operation</p> <p>5.9 A home health agency shall comply with all applicable state and federal policies, guidelines, laws and regulations. In the event that State and federal regulations differ, the more stringent shall apply.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the agency failed to assure compliance with all applicable state and federal regulations regarding valid licensure of staff. Findings include:</p> <p>Per review on 2/14/12, the employee file of a Home Health Aide contained a copy of their temporary Licensed Nursing Assistant (LNA) license. The temporary license was valid from 6/3/11 until 9/1/11. The aide worked as a Personal Care Attendant for the agency, which does not require state licensure, and also as a Licensed Nursing Assistant, which does require a valid Vermont license. Per review of the schedule for September and October 2011, the Aide worked with the agency in the capacity of LNA with eight different clients on seven days: September 14, 24, 25, and 28; and October 3, 5, and 26. Per interview on 2/14/12 at 3:15 PM, the</p>	H 520	<p>As a method for prevention of further occurrences such as the one CHHC has been cited for, the HR Department has verified all professional licenses to date, and has developed a binder containing all of the names of licenses professionals within the organization, as well as their licenses. Further, the HR Coordinator has developed a reminder system to let the staff know of impending license expiration and then notifies the employee and supervisor if we have not received a copy of the new license within a week of the impending expiration. At that point, employees and their supervisors are reminded and informed that failure to provide NCHC with the license by that day will automatically result in suspension per the employee manual of NCHC.</p>	

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H 520	Continued From page 2 Clinical Director confirmed that the agency discovered upon termination of the employee on 10/27/11 that the aide had not renewed licensure on 9/1/11, and had been serving clients in the capacity of a Licensed Nursing Assistant Vermont State Statute: Per Title 26: Professional Occupations, Chapter 28 Nursing: § 1571. Purpose and effect In order to safeguard the life and health of the people of this state, no person shall practice, or offer to practice, registered or practical nursing unless currently licensed under this chapter. (Added 1979, No. 192 (Adj. Sess.), § 1; amended 1993, No. 201 (Adj. Sess.), § 1.)	H 520			

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

PRINTED: 02/17/2012
FORM APPROVED
OMB NO. 0938-0391

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NAME OF PROVIDER OR SUPPLIER CALEDONIA HOME HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 101 SHERMAN DRIVE SAINT JOHNSBURY, VT 05819
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G 000	INITIAL COMMENTS	G 000	<p>The Human Resources Department has reviewed the process utilized to ensure that staff are licensed. Upon hire, NCHC obtains copies of professional licenses and as re-licensure occurs, licenses are tracked and verified by the submission of copies of the new licenses. The employee handbook for NCHC also states that employees with professional licensure are responsible for maintaining their licenses and it further stipulates that failure to maintain current licensure will result in the employee being suspended from duty until their credentials are up to date. As a method for prevention of further occurrences such as the one CHHC has been cited for, the HR Department has verified all professional licenses to date, and has developed a binder containing all of the names of licenses professionals within the organization, as well as their licenses. Further, the HR Coordinator has developed a reminder system to let the staff know of impending license expiration and then notifies the employee and supervisor if we have not received a copy of the new license within a week of the impending expiration. At that point, employees and their supervisors are reminded and informed that failure to provide NCHC with the license by that day will automatically result in suspension per the employee manual of NCHC.</p>	
G 118	<p>484.12(a) COMPLIANCE WITH FED, STATE, LOCAL LAWS</p> <p>The HHA and its staff must operate and furnish services in compliance with all applicable Federal, State, and local laws and regulations. If State or applicable local law provides for the licensure of HHAs, an agency not subject to licensure is approved by the licensing authority as meeting the standards established for licensure.</p> <p>This STANDARD is not met as evidenced by: Based on record review and staff interview, the agency failed to assure compliance with all applicable state and federal regulations regarding valid licensure of agency staff. Findings include:</p> <p>Per review on 2/14/12, the employee file of a Home Health Aide contained a copy of their temporary Licensed Nursing Assistant (LNA) license. The temporary license was valid from 6/3/11 until 9/1/11. The aide worked as a Personal Care Attendant for the agency, which does not require state licensure, and also as a Licensed Nursing Assistant, which does require a valid Vermont license. Per review of the schedule for September and October 2011, the Aide worked with the agency in the capacity of LNA with eight different clients on seven days: September 14, 24, 25, and 28; and October 3, 5, and 26. Per interview on 2/14/12 at 3:15 PM, the Clinical Director confirmed that the</p>	G 118		

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

TITLE _____ (X6) DATE

POC accepted
Karen Campos / Francisco Kell
2/29/12

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.

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G 118	Continued From page 1 agency discovered upon termination of the employee on 10/27/11 that the aide had not renewed licensure on 9/1/11, and had been serving clients in the capacity of a Licensed Nursing Assistant. Vermont State Statute: Per Title 26: Professional Occupations, Chapter 28 Nursing: § 1571. Purpose and effect In order to safeguard the life and health of the people of this state, no person shall practice, or offer to practice, registered or practical nursing unless currently licensed under this chapter. (Added 1979, No. 192 (Adj. Sess.), § 1; amended 1993, No. 201 (Adj. Sess.), § 1.)	G 118			