

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

February 17, 2011

Church Hindes, Administrator
Vna Of Chittenden & Grand Isle Counties
1110 Prim Road
Colchester, VT 05446

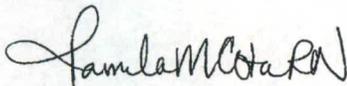
Provider ID #:471500

Dear Mr. Hindes:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on
January 26, 2011.

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

Sincerely,

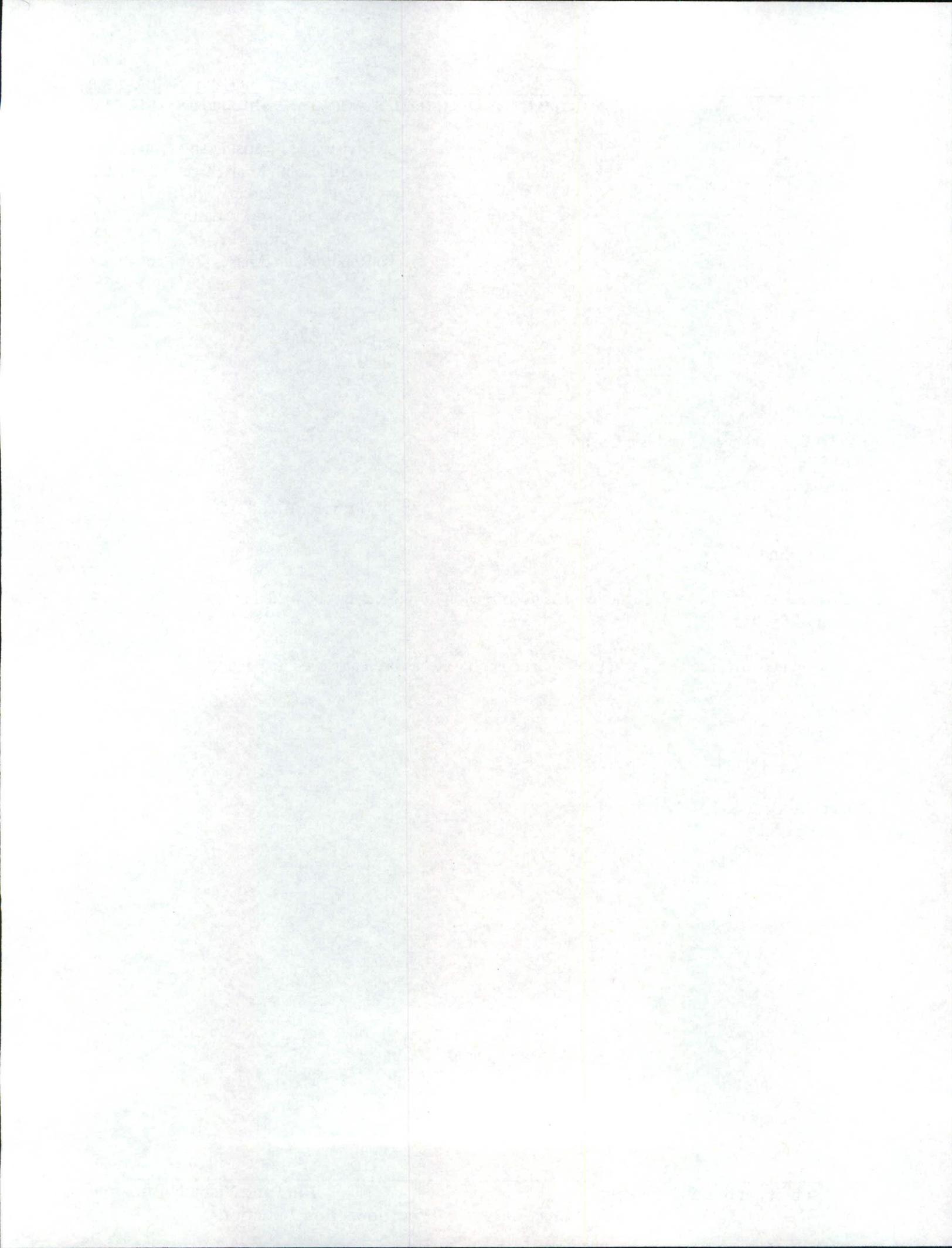


Pamela M. Cota, RN
Licensing Chief

PC:jl

Enclosure





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

RECEIVED
Division of

PRINTED: 01/28/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 471500	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	FEB 09 11 Licensing and Protection	(X3) DATE SURVEY COMPLETED C 01/26/2011
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NAME OF PROVIDER OR SUPPLIER VNA OF CHITTENDEN & GRAND ISLE COUNTIES	STREET ADDRESS, CITY, STATE, ZIP CODE 1110 PRIM ROAD COLCHESTER, VT 05446
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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)	(X5) COMPLETION DATE
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L 000	INITIAL COMMENTS	L 000		
L 637	418.76(j) HOMEMAKER QUALIFICATIONS A qualified homemaker is- (1) An individual who meets the standards in §418.202(g) and has successfully completed hospice orientation addressing the needs and concerns of patients and families coping with a terminal illness; or (2) A hospice aide as described in §418.76. This STANDARD is not met as evidenced by: Based on record review and interview the Agency failed to provide Hospice orientation training for homemakers. Findings include: 1. Per record review on 01/25/11 at 1:00 PM of 2 homemaker staff's personnel files, there was no documentation of a Hospice orientation being completed. Per the interview later that day at 3:26 PM the Assistant Hospice Director stated "Homemakers don't go through hospice training" and was not aware of the regulation for homemakers, providing services for hospice patients, needing hospice orientation. This was confirmed by the Director of Hospice at 3:45 PM	L 637		
L 638	418.76(k)(1) HOMEMAKER SUPERVISION AND DUTIES (1) Homemaker services must be coordinated and supervised by a member of the interdisciplinary group. This STANDARD is not met as evidenced by:	L 638	<p>Action Steps:</p> <ol style="list-style-type: none"> Identify all clients that have the potential to be affected. Person Responsible: Angel Means, MS, RN – Director, EOL Services Implement Hospice training specific to PCA's/Homemakers to be taught by PCA Educator : <ul style="list-style-type: none"> Overview of Concept of Hospice Communication/Sensitivity when working with dying patients and families The Dying Process Person Responsible: Gail Hagenbach <p>L637 POC Accepted 2/17/10 S. Emmons RN / J. McArthur</p>	<p>Date:</p> <p>Completion date no later than 30 days</p> <p>Completion date no later than 30 days</p>

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

[Signature] President & CEO 2/7/2011

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.