

## 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

December 12, 2013

Ms. Linda Gingras, Administrator  
Gingras Community Care Home  
24 Averill Street  
Barre, VT 05641

Provider # 0312

Dear Ms. Gingras:

Enclosed is a copy of your acceptable plans of correction for the unannounced onsite re-licensing survey and self-reported incident investigation conducted on **October 7, 2013**. 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:ne

Enclosure

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0312	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	Licensing and Protection  (X3) DATE SURVEY COMPLETED  C 10/07/2013
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NAME OF PROVIDER OR SUPPLIER  GINGRAS COMMUNITY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 24 AVERILL STREET BARRE, VT 05641
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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) COMPLETE DATE
R100	Initial Comments:  An unannounced onsite re-licensing survey and self-reported incident investigation was conducted by the Division of Licensing and Protection on 10/7/13. There were regulatory findings identified.	R100		
R173 SS=D	V. RESIDENT CARE AND HOME SERVICES  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: Based on observation and staff interview, the home failed to assure that a refrigerator storing medications was monitored for proper temperature control. Findings include:  Per observation on 10/7/13 at 2:00 PM, the food refrigerator adjacent to the kitchen, which also stored Insulin Pens, had a thermometer present on the shelf that read 28 degrees F. The food in the refrigerator was not frozen, nor excessively cold to the touch. There was also a locked box in the refrigerator that contained the unopened Insulin Pens for a resident. After bringing this to the attention of the Home Manager, a new thermometer was placed in the refrigerator, which after one hour at 3:00 PM read 42 Degrees F. Per	R173	The food refrigerator in the kitchen that is also used for storing insulin pens is now and will continue to be monitored daily for proper temperature control with the temperatures being recorded on the calendar above the desk in the kitchen. These actions were put into place on 10/8/13 and will be monitored by the manager.  <i>Linda Gingras</i> Owner / Manager	10/8/13
			R173 POC accepted 12/11/13 PMcotarN	

Division of Licensing and Protection LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0312	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  C 10/07/2013
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R173	Continued From page 1  interview, the Home Manager stated that there was no log kept of the monitoring of refrigerator temperatures. Per interview on 10/7/13 at 3:05, the Home Manager confirmed that the new thermometer was showing the temperature to be over 41 Degrees F., and that there was no log kept to show regular monitoring for temperatures that were within safe limits for food and medication storage.	R173		
R213 SS=F	VI. RESIDENTS' RIGHTS  6.1 Every resident shall be treated with consideration, respect and full recognition of the resident's dignity, individuality, and privacy. A home may not ask a resident to waive the resident's rights. <i>Waiting for results of a review to respond to this.</i> This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to assure the residents' right to privacy for 7 of 7 residents. Findings include:  Per observation on 10/7/13 at 9:35 AM during the initial tour, the Home Manager pointed out a door on the second floor that leads to the third floor where there are three private rented apartments. None of the tenants on the third floor are residents of the home, however are allowed to use the front door and stairway to the second floor to access the stairway to their respective apartments. In accessing the stairway to the third floor, the tenants have visual access to the living room used by all the residents, and must pass by the room doors of three of the care home's residents. Also the tenants sometimes have visitors that are also allowed access through the	R213	<i>See addendum, attached.</i>  <del>The fire escape leading to the third floor will be used by the third floor tenants and their visitors to enter and exit the building. They will no longer use the front door and stairway to the second floor to access the third floor and their respective rooms. We are having a cover with lighting built over the metal fire escape leading to the third floor, so the fire escape will be safe for our tenants to use. We have hired a carpenter and an electrician to do the work. Work is scheduled to begin on 11/6/13 and should be completed by 11/27/13.</del>	11/27/13

*Linda Gingras*  
*Owner / Manager*  
10/31/13

R213 POC accepted as addendum 12/11/13 pmcotarw

Division of Licensing and Protection

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R213	Continued From page 2  residential care home corridors.	R213		
R247 SS=F	VII. NUTRITION AND FOOD SERVICES  7.2 Food Safety and Sanitation  7.2.b All perishable food and drink shall be labeled, dated and held at proper temperatures: (1) At or below 40 degrees Fahrenheit. (2) At or above 140 degrees Fahrenheit when served or heated prior to service.  This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to assure that food refrigerator temperatures were documented as being monitored on a regular basis. Findings include:  Per observation on 10/7/13 at 2:00 PM, the food	R247	<i>The food refrigerator in the kitchen that is also used for storing insulin pens is now and will continue to be monitored daily for proper temperature control with the temperatures being recorded on the calendar above the desk in the kitchen. These actions were put into place on 10/8/13 and will be monitored by the manager.</i>  <i>Linda Gingras Owner/Manager</i>	10/8/13

R247 POC accepted 12/11/13 PmcotaRN

Division of Licensing and Protection

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R247	Continued From page 3  refrigerator adjacent to the kitchen, which also stored Insulin Pens, had a thermometer present on the shelf that read 28 degrees F. The food in the refrigerator was not frozen, nor even excessively cold to the touch. After bringing this to the attention of the Home Manager, a new thermometer was placed in the refrigerator, which after one hour at 3:00 PM read 42 Degrees F. Per interview, the Home Manager stated that there was no log kept of the monitoring of refrigerator temperatures. Per interview on 10/7/13 at 3:05, the Home Manager confirmed that the new thermometer was showing the temperature to be over 41 Degrees F., and that there was no log kept to show regular monitoring for temperatures that were within safe limits for food and medication storage.	R247		

December 8, 2013

Pamela M. Cota  
Licensing Chief  
Division of Licensing and Protection  
103 South Main Street, Ladd Hall  
Waterbury, Vt. 05671-2306

Ms. Cota:

This is the new plan of correction for the deficiency regarding the privacy of residents( R213) as the original plan of correction is not an acceptable solution due to Fire Safety requirements.

The tenants on our third floor have been given notice to vacate the premises at 24 Averill St. in Barre, Vt. (also the Gingras Community Care Home). They are to vacate by January 10, 2014.

After this occurs, the third floor will be rented to a woman who is an LNA and has worked for us for 13 years - cleaning, giving baths while we are on vacation and doing occasional coverage of the care home when we are away for short periods of time. She has had background checks done on her with no record from the Vermont Criminal Information Center and she was not found in the Adult or Child Abuse Registries.

This is planned as a long term solution, but if for some reason she needs to move out of our third floor, we will only rent to someone who either works or volunteers for us with the appropriate background checks being done.

Sincerely,



Linda Gingras, Administrator  
Gingras Community Care Home