

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

August 12, 2011

Ms. Roxanne Ladabouche, Administrator
Giordano Manor
34 Canada Street
Swanton, VT 05488

Dear Ms. Ladabouche:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **April 20, 2011**. 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



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Division of
AUG 10 11

PRINTED: 07/19/2011
FORM APPROVED

Division of Licensing and Protection		STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0038	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 04/20/2011
NAME OF PROVIDER OR SUPPLIER GIORDANO MINOR			STREET ADDRESS, CITY, STATE, ZIP CODE 34 CANADA STREET SWANTON, VT 05488			
(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 complaint investigation was conducted on 4/20/11. The following are regulatory violations.	R100				
R161 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.10 Medication Management 5.10.b The manager of the home is responsible for ensuring that all medications are handled according to the home's policies and that designated staff are fully trained in the policies and procedures. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to assure all medications are handled according to the home's policies and that designated staff are fully trained in the policies and procedures. Findings include: 1) Per interview with staff and manager on 4/20/11, staff did not do a medication count on 4/16/11 at the change of shift per facility policy.	R161	As of 4/20/11 we have made a schedule sheet for beginning and ending of each shift to sign they have counted all medication in the lock box and that the med lock box and med room door is double locked. In a previous shift did not sign the sheet. The manager will be called to find out why. Anyone not complying with the new policy & procedure will 1. Be put on probation if there was a good reason for not complying. Or 2. Fire. R161 POC Accepted 8/11/11 Smedern			
R181 SS=E	V. RESIDENT CARE AND HOME SERVICES 5.11 Staff Services 5.11.b The licensee shall not have on staff a person who has had a charge of abuse, neglect or exploitation substantiated against him or her, as defined in 33 V.S.A. Chapters 49 and 69, or one who has been convicted of an offense for acts related to bodily injury, theft or misuse of funds or property, or other crimes inimical to the	R181	The manager was not clear about 5.11. The manager thought it was only if an employee was accused			

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Rosanne Ladebaux* TITLE: *manager* (X6) DATE: *Aug 9-11*

STATE FORM 1109 6/97 11 CONTINUATION SHEET 1 OF 2

Division of Licensing and Protection

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Division of Licensing and Protection

TITLE

(X6) DATE

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

STATE FORM

6899

IG9711

If continuation sheet 1 of 2

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R181	Continued From page 1 public welfare, in any jurisdiction whether within or outside of the State of Vermont. This provision shall apply to the manager of the home as well, regardless of whether the manager is the licensee or not. The licensee shall take all reasonable steps to comply with this requirement, including, but not limited to, obtaining and checking personal and work references and contacting the Division of Licensing and Protection in accordance with 33 V.S.A. §6911 to see if prospective employees are on the abuse registry or have a record of convictions. This REQUIREMENT is not met as evidenced by: Based on record review and interview, the facility has two current staff members with criminal record charges substantiation against them. Findings include: 1. Per review on 4/20/11 of personnel records, two current staff members had positive criminal record check for several misdemeanor violations. This was confirmed with the manager on 4/20/11.	R181	<i>if physical abuse that they were not allowed to work in Residential Care. The Manager is now aware of the correct licensing regulation and will 1. do a review of background checks for past & present or new employees. 2. Will write to licensing Chief to ask for exception to the regulation to keep an employee the manager feels is doing a good job. 3. The manager will keep a list of employees and will do rechecks of employees every 2 yrs.</i> R181 POC Accepted 8/11/11 <i>Amotepn</i>		