

Division of Licensing and Protection
103 South Main Street, Ladd Hall
Waterbury, VT 05671-2306
[http //www dail vermont gov](http://www.dail.vermont.gov)
Voice/TTY (802) 871-3317
To Report Adult Abuse (800) 564-1612
Fax (802) 871-3318

May 10, 2013

Ms Catherine Rooney, Administrator
Harvey House Ltd
1997 Main Street
Castleton, VT 05735

Provider # 0380

Dear Ms Rooney

Enclosed is a copy of your acceptable plans of correction for the investigation of a complaint conducted on **March 21, 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: 0380	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/21/2013
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NAME OF PROVIDER OR SUPPLIER HARVEY HOUSE LTD	STREET ADDRESS, CITY, STATE, ZIP CODE 1997 MAIN STREET CASTLETON, VT 05735
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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
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R100 Initial Comments

An unannounced onsite investigation of a complaint was conducted on 3/21/2013 by the Division of Licensing and Protection. The following regulatory deficiencies were identified:

R182 V RESIDENT CARE AND HOME SERVICES
SS=E

5 10 Medication Management

5 10.c Staff will not assist with or administer any medication, prescription or over-the-counter medications for which there is not a physician's written, signed order and supporting diagnosis or problem statement in the resident's record.

This REQUIREMENT is not met as evidenced by:
Based on record review and staff interview the facility failed to assure that staff did not administer medications for which there is no supporting diagnosis or problem statement in the resident's record. Findings include:

Per record review of the records for all seven residents in the facility, there was no problem list or supporting diagnosis statement in the resident's records. Additionally, there are not associated diagnoses listed with each medication in the physician's orders nor on the MARs (Medication Administration Records) for any resident. The above was confirmed with the facility Administrator, in interview on 3/21/13 at 3:20 PM.

R100

R182

5:10 my understanding of this rule was that no medication could be administered without a physician's order (in writing). The written dr. orders are in each resident's file for each medication administered. I will now have started to have the diagnosis recorded also for each resident. All records should be completed by May 1st 2013.

REC ACCEPTED
5/1/13 m.j.gunn

R181 V RESIDENT CARE AND HOME SERVICES
SS=D

5.11 Staff Services

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]* TITLE: *manager* (X6) DATE: *4/25/13*

STATE FORM 6899 VYP411 If continuation sheet 1 of 4

Division of Licensing and Protection

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R181	Continued From page 1 5.11.d 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 actions related to bodily injury, theft or misuse of funds or property, or other crimes inimical to the 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. §6011 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 staff interview the facility failed to request a waiver to employ a person with a positive criminal background check from the Division of Licensing and Protection. Findings include: Per a review of staff background checks, for six present and past employees, the facility failed to request a waiver to employ one of the six, with a criminal conviction, from the Division of Licensing & Protection. In an interview on 03/21/2013 the facility Administrator confirmed that s/he had not requested a waiver for this employee	R181	<i>I immediately applied for a waiver, which has been granted for this employee. (4/3/13) I now know that any hit on the criminal background no matter how old it is will require a waiver request</i> POC ACCEPTED 5/1/13 MLL/mrn 3/22/13	
R206 SS=D	V RESIDENT CARE AND HOME SERVICES	R206		

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STATE FORM

6899

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Division of Licensing and Protection

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R206	<p>Continued From page 2</p> <p>5.1B Reporting of Abuse, Neglect or Exploitation</p> <p>5.1B a The licensee and staff shall report any case of suspected abuse, neglect or exploitation to the Adult Protective Services (APS) as required by 33 V.S.A. §6903. APS may be contacted by calling toll-free 1-800-564-1612 Reports must be made to APS within 48 hours of learning of the suspected, reported or alleged incident.</p> <p>This REQUIREMENT is not met as evidenced by Based on interviews and record review the facility failed to report an incident of suspected exploitation of one resident, Resident #3, who had reported the alleged theft of a debit card and cash. Findings include:</p> <p>Per interview with Resident #3, s/he had a locked box which contained \$300-400 and her Bank Debit card, in the closet of her bedroom. On 3/17/2013 s/he noticed that the box had been priad open and that the money and card were gone. S/he states that s/he reported it to the facility manager who then reported it to local police.</p> <p>In an interview at 3.30 PM the Facility Administrator confirmed that the resident had reported missing money and the Debit card and that s/he had called the police who are investigating. She states that she has not heard anything back from them. S/he stated that facility staff had also tried to determine what might have happened but have been unable to reach any conclusion. S/he confirmed that the facility did not report this to APS but that she would report it immediately</p>	R206	<p>5'18 I will from now on call APS if this kind of incident happens again Not just the police</p> <p>POC ACCEPTED 5/1/13 mHygromu</p>	3/25/13

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VVP411

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