

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

May 28, 2013

Ms. Melissa Greason, Administrator  
Washington Elms  
126 Elm Street  
Bennington, VT 05201

Provider #: 0103

Dear Ms. Greason:

Enclosed is a copy of your acceptable plans of correction for the complaint investigation conducted on **April 16, 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:  0103	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 04/16/2013
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NAME OF PROVIDER OR SUPPLIER  WASHINGTON ELMS	STREET ADDRESS, CITY, STATE, ZIP CODE 126 ELM STREET BENNINGTON, VT 05201
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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, on-site complaint investigation was conducted by the Division of Licensing and Protection on 04/16/2013. The following regulatory deficiencies were identified:	R100		
R189 SS=D	V. RESIDENT CARE AND HOME SERVICES  5.12.b. (3)  For residents requiring nursing care, including nursing overview or medication management, the record shall also contain: initial assessment; annual reassessment; significant change assessment; physician's admission statement and current orders; staff progress notes including changes in the resident's condition and action taken; and reports of physician visits, signed telephone orders and treatment documentation; and resident plan of care.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the residential care home failed to assure the medical record includes an assessment, current orders, staff progress notes including changes in the resident's condition and action taken, and resident plan of care updates for 1 of 2 sampled residents (Resident # 1) after a hospital stay with reentry to the residential care home.  Per record review on 04/16/2013 at 12:42 PM, Resident #1 experienced seizures and was sent to the local hospital for evaluation on 03/04/2013. S/he was later transferred to another hospital and admitted on 03/04/2013. Staff report that Resident #1 did return to the residential care home but there is no date of readmission, no	R189	See Attached #1 Completed 5-2-13  R189, R206 POC's accepted as attached 5/23/13 G Coleman RN/PMC	

Division of Licensing and Protection

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

*Michelle Angelelli* TITLE RN MANAGER

(X6) DATE 5-3-13

STATE FORM

8899

L5J611

If continuation sheet 1 of 3

PMC

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0103	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____		(X3) DATE SURVEY COMPLETED  C 04/16/2013
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R189	Continued From page 1  admission note or assessment, and no documentation of medication review or clinical status after the hospitalization. Except for the nurse's note dated 03/04/2013 indicating that the resident was transferred to the hospital there is no other documentation until 03/14/2013 reporting that Resident # 1 was discharged to another residential care home in town, one that would be closer to places of scheduled appointments.  Staff confirm during interview on 04/16/2013 that there is no documentation in the medical record to indicate that Resident # 1 returned to the care home, was properly assessed and cared for following a hospitalization.	R189			
R206 SS=D	V. RESIDENT CARE AND HOME SERVICES  5.18 Reporting of Abuse, Neglect or Exploitation  5.18.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.  This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the residential care home failed to report a case of suspected staff to resident verbal abuse of 1 resident (Resident #1) to Adult Protective Services (APS) as required by 33 V.S.A. §6903. Reports must be made to APS within 48 hours of	R206	See Attached #2 Completed 4-17-13		

PRINTED: 04/29/2013  
FORM APPROVED

Division of Licensing and Protection

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R206	Continued From page 2  learning of the suspected, reported or alleged incident.  Per review of resident record and the home's internal investigation, and staff interviews on 04/16/2013, the residential care home failed to report an incident of potential verbal abuse to the licensing agency within the appropriate reporting time frame.  Resident #1 was allegedly "yelled at" by a staff member on 02/08/2013 for not coming downstairs to have his/her blood sugar checked and to eat the evening meal. Staff report during interview on 04/16/2013 at 1:08 PM that a report was faxed to APS when their internal investigation was completed. There is no written evidence in the chart or in the facility logs to support that a report was made to the licensing agency/APS. There is also no information in the licensing agency data base that a report was ever made by the home.	R206			

Washington Elms  
126 Elm Street  
Bennington, Vermont 05201  
Telephone (802)447-1219

1) R189 SS=D V Residents Care and Home Services

5.12. b (3) Resident #1

A new policy is in place to insure that proper documentation is provided in the residents permanent record of any overnight stays in the hospital. See attached.

2) R206 SS=D V residents Care and Home Services

5.18 Reporting of Abuse, Neglect or Exploitation

5.18. a Resident #1

A new Policy is in place to insure that the staff at Washington Elms understands the proper steps to report a suspected case of abuse, neglect or exploitation. See Attached.

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Washington Elms  
126 Elm Street  
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Policy for Residents Returning from Overnight Stay in a Medical Facility

- 1) Upon return to Washington Elms from overnight stay in a medical facility the medication delegated staff person and/or the RN will evaluate all returning medication orders. Any new orders will be faxed to Extended Care Pharmacy and a copy sent to the Primary MD.
- 2) The Medication delegated staff person or the RN will document in the clinical record the return of the resident. This note will include but not limited to any changes in medication, changes in treatment (Unsterile dressing changes, exercises, etc.), and changes in level of self care.
- 3) The RN will document the return of the resident in the attendance log
- 4) The Medication delegated Staff person or RN will complete body audit as needed to include full set of vital signs , visual observation of any wounds, rashes, or any skin abnormality .
- 5) The medication delegated staff person on the following twenty four hours will document on residents condition and as necessary.
- 6) RN will monitor for compliance

Revised - 5-17-13

See Attached May 2, 2013

MA

(1)

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- 3) The RN will document the return of the resident in the attendance log
- 4) The Medication delegated Staff person or RN will complete body audit as needed to include full set of vital signs , visual observation of any wounds, rashes, or any skin abnormality .
- 5) The medication delegated staff person on the following twenty four hours will document on residents condition and as necessary.
- 6) RN will monitor for compliance by assessing the resident within 24 hour of re admission. The RN will monitor the resident's record within twenty four hours of re admission to insure proper documentation. The

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**RN will again monitor the resident's record when the initial twenty four hours is complete and document in client record.**

**May 2, 2013**

**Updated May 17, 2013**

2)

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126 Elm Street  
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Telephone (802) 447-1219

### Mandated Reporting Requirements Policy and Procedure Policy

A written report of any reports or incidents of abuse, neglect or exploitation must be reported to the licensing agency. {5.12c (5)}

The Licensee and staff shall report any case of suspected or reported incidents of abuse, neglect or exploitation to the Adult Protective Services (APS) as required by 33V.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. [5.18.a]

The Licensee and staff are required to report suspected or reported incidents of abuse, neglect or exploitation. It is not the licensee's or staff's responsibility to determine if the alleged incident did occur or not 'that is the responsibility of the licensing agency. A home may and should, conduct its own investigation. However, that must not delay the reporting of the alleged or suspected incident to Adult Protective Services. [5.18b]

Incidents involving resident to resident abuse must be reported to the licensing agency if a resident alleges abuse, sexual abuse, if an injury requiring physician intervention results, or if there is a pattern of abusive behavior. All resident to resident incidents even minor ones must be recorded in the resident's record .Families or legal representative must be notified and a plan must be developed to deal with the behaviors.

2)

This will assist you in providing complete information, avoid unnecessary follow up phone calls and help you in making a determination on what is a required report and standardize the reporting process.

Licensed /certified facilities, agencies or residences must submit the following event report as identified by state and/or federal requirements within the following specified times:

24 hour (facility and residences only)

- . Any Fire
- . Untimely Death
- . Resident Missing More than 12 Hour
- . Breakdown in Physical Plant Operations

48 hours

. Allegations or suspicions of abuse, neglect, or exploitation of a vulnerable adult.

5 Working Days

.Results of Internal Investigation and if the Event verified  
Action Taken (How will the resident be safe during the investigation)

Complete Reporting Form and Submit as well any of The Following

- .Victim Statement(s)
- .Witness Statement(s): Provide contact numbers  
and/addresses
- .Pertinent Documentation

2)

### Procedure

It is the policy of Washington Elms that if any employee suspects any abuse or neglects him/her is to report suspicion to manager or Administrator.

The staff person has the right to make a report directly to Adult Protective Services.

An internal investigation will be completed and a plan of action will be instated to keep the victim safe while the investigation is completed.

An initial report will be made by the manager /administrator to Adult Protective Services. This report will be completed within 48 hours. The report will be followed up with a report including alleged victim, witnesses, and alleged perpetrator, along with any other pertinent information with our internal investigation summary this will be completed and submitted to Adult Protective Services within 5 working days. All reports will be made by phone and followed up via fax. Washington Elms Manager/administrator will keep a written report of all documentation in a locked filing cabinet.

April 17, 2013

See updated  
Sheet - dated  
5/17/16  
MARGERIN



## Procedure

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The staff person has the right to make a report directly to Adult Protective Services.

An internal investigation will be completed and a plan of action will be instituted to keep the victim safe until the investigation is complete.

An initial report will be made by the manager/administrator to Adult protective Services. This report will be completed within 48 hours. The initial report will be followed up by a complete report including alleged victim, witnesses, alleged perpetrator, as well as any other pertinent information, as well as our internal investigation summary this will be completed within the allowed five days.

April 17, 2013  
Updated 5, 17, 2013

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Washington Elms  
126 Elm Street  
Bennington, Vermont 05201  
Telephone (802) 447-1219

GRIEVANCE PROCEDURE

Welcome to Washington Elms, if you have a grievance or complaint related to either a Staff member or another Resident please follow the following procedure:

- 1) Speak to the staff member on duty.
- 2) Speak to the Nurse Manager Michelle Angell RN.
- 3) Speak to the Administrator Melissa Greason or co-owner Edgar Greason, at (802) 362-1332.

If this step fails to resolve your grievance/complaint, you may call one or all of the following for assistance:

- 1) Office on Aging: Telephone (802) 442-5436
- 2) Local Ombudsman: Name \_\_\_\_\_  
Telephone 1-800-769-7459
- 3) Adult Protection Services Telephone: 1-800-5641612
- 4) State of Vermont –Division of Licensing &Protection: Telephone 1-802-871-3317

\_\_\_\_\_  
Owner/Administer

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# ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I, \_\_\_\_\_ have received a copy of Washington Elms  
(Client name)

Notice of Privacy Practices, Resident Rights, and House Rules, and under stand my rights. If I have a grievance or feel my rights have been violated I can contact the office of Long Term Care Ombudsman at 1-800-769-7456. I can also contact the Disability Right of Vermont at 1-800-834-7890, as an alternative or in addition to Washington Elms grievance mechanism.

\_\_\_\_\_  
Signature of Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Client's Authorized Representative (If Applicable)

\_\_\_\_\_  
Date

\*\*\*\*\*

Copy to be kept in resident file and copy to be given to resident upon admission to facility.

2)

## Residential Care Home Licensing Regulations

### RESIDENTS' RIGHTS

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.
2. Each home shall establish and adhere to a written policy, consistent with these regulations, regarding the rights and responsibilities of residents, which shall be explained to residents at the time of admission.
- . Residents may retain personal clothing and possessions as space permits, unless to do so would infringe on the rights of others or would create a fire or safety hazard.
- . A resident shall not be required to perform work for the licensee. If a resident chooses to perform specific tasks for the licensee the resident shall receive reasonable compensation which shall be specified in a written agreement with the resident.
- . Each resident shall be allowed to associate, communicate and meet privately with persons of the residents own choice. Homes shall allow visiting hours from at least 8 a.m. to 8 p.m., or longer. Visiting hours shall be posted in a public place.
- . Each resident may send and receive personal mail unopened.
- . Residents have the right to reasonable access to a telephone for private conversations. Residents shall have reasonable access to the home's telephone except when restricted because of excessive unpaid toll charges or misuse. Restrictions as to telephone use shall be in writing. Any resident may, at the residents own expense, maintain a personal telephone in his or her own room.
- . A resident may complain or voice a grievance without interference, coercion or reprisal. Each home shall establish a written grievance procedure for resolving residents' concerns or complaints that is explained to residents at the time of admission. The grievance procedure shall include at a minimum, time frames, a process for responding to residents in writing, and a method by which each resident filing a complaint will be made aware of the **Office of the Long Term Care Ombudsman** and **Disability Rights Vermont** as an alternative or in addition to the home's grievance mechanism.

Page 2 of 3

- 9 Residents may manage their own personal finances. The home or licensee shall not manage a resident's finances unless requested in writing by the resident and then in accordance with the resident's wishes. The home or licensee shall keep a record of all transactions and make the record available, upon request, to the resident or legal representative, and shall provide the resident with an accounting of all transactions at least quarterly. Resident funds must be kept separate from other accounts or funds of the home.
10. The resident's right to privacy extends to all records and personal information. Personal information about a resident shall not be discussed with anyone not directly involved in the resident's care. Release of any record, excerpts from or information contained in such records shall be subject to the resident's written approval, except as requested by representatives of the licensing agency to carry out its responsibilities or as otherwise provided by law.
11. The resident has the right to review the resident's medical or financial records upon request.
12. Residents shall be free from mental, verbal or physical abuse, neglect, and exploitation. Residents shall also be free from restraints as described in Section 5.14.
13. When a resident is adjudicated mentally disabled such powers as have been delegated by the Probate or Family Court to the resident's guardian shall devolve to the guardian pursuant to applicable law.
14. Residents subject to transfer or discharge from the home, under Section 5.3 of these regulations, shall:
- Be allowed to participate in the decision-making process of the home concerning the selection of an alternative placement;
  - Receive adequate notice of a pending transfer; and
  - Be allowed to contest their transfer or discharge by filing a request for a fair hearing before the Human Services Board in accordance with the procedures in 3 V.S.A. §3091.
15. Residents have the right to refuse care to the extent allowed by law. This includes the right to discharge himself or herself from the home. The home must fully inform the resident of the consequences of refusing care. If the resident makes a fully informed decision to refuse care, the home must respect that decision and is absolved of further responsibility. If the refusal of care will result in a resident's needs increasing beyond what the home is licensed to provide, or will result in the home being in violation of these regulations, the home may issue the resident a

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Page 3 of 3

thirty (30) day notice of discharge in accordance with section 5.3.a of these regulations.

- 16. Residents have the right to formulate advance directives as provided by state law and to have the home follow the residents' wishes.
- 17. ACCS residents have the right to be away from the home for voluntary leaves of more than 24 hours, unless a legally appointed guardian directs the home otherwise. ~~ACCS residents have the right to make decisions about such voluntary leaves without influence from the home.~~
- 18. The enumeration of residents' rights shall not be construed to limit, modify, abridge or reduce in any way any rights that a resident otherwise enjoys as a human being or citizen. A summary of the obligations of the residential care home to its residents shall be written in clear language, large print, given to residents on admission, and posted conspicuously in a public place in the home. Such notice shall also summarize the home's grievance procedure and directions for contacting the **Ombudsman Program and Disability Rights Vermont.**

**IF YOU HAVE A PROBLEM**

The State Division of Licensing and Protection licenses and regulates residential care homes and investigates complaints of poor care or conditions. You may direct a grievance to this division by calling (802) ~~871-2317~~ or by writing the Division of Licensing and Protection through the Department of Aging and Independent Living, 103 South Main Street, Waterbury Vermont 05671-2306.

If you would like someone else outside the home to help you resolve a problem, or speak on your behalf, you may contact the ombudsman in your area. The Ombudsman will keep all information, even your name, confidential unless you give permission to use it.

Your **Ombudsman** is \_\_\_\_\_

And may be reached a \_\_\_\_\_ TOLL FREE at **1-800-899-2047**

Or **Adult Protective Services** at **1-800-564-1612**

Or **Disability Rights Vermont** at **1-800-834-7890**  
Licensing & Protection 802-871-3317