

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

December 8, 2011

Ms. Sheryl Bellman, Administrator
Assist Program
300 Flynn Avenue
Burlington, VT 05401

Provider #: 0511

Dear Ms. Bellman:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **September 21, 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:ne

Enclosure



OCT 18 2011

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0511	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/21/2011
NAME OF PROVIDER OR SUPPLIER ASSIST PROGRAM		STREET ADDRESS, CITY, STATE, ZIP CODE 300 FLYNN AVENUE BURLINGTON, VT 05401		
(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
T 001	INITIAL COMMENTS An unannounced onsite re-licensing survey was completed by the Division of Licensing and Protection on 9/21/11. The following are regulatory findings:	T 001		
T 002	IV.A.1 Resident Care and Supervision* General The Director shall provide every resident with the personal care and supervision appropriate to his/her individual needs. This REQUIREMENT is not met as evidenced by: Based on record review and interview, the Director failed to assure that the residence followed uniform medication order procedures. Findings include: 1. Per record review, the residence admissions procedures do not provide assurance that medication presented by the client admitted through the crisis screening process are valid prescriptions nor is there an assessment process in place describing and /or confirming the clients ability to safely self medicate at the time of a weekend crisis admission. During interviews throughout the day, these findings were confirmed by the agency RN (Registered Nurse), the Program Coordinator and the Medical Director.	T 002	T002, T009, + T078 Plans of correction accepted with attached addendums 12/7/11. Pincoturn Med p.	
T 009	IV.B.1 Physical Environment General a. The residence must meet all appropriate provisions of local building codes and zoning ordinances and regulations of the Vermont State	T 009		

Division of Licensing and Protection

TITLE

(X6) DATE

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

Division of Licensing and Protection

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T 009	Continued From page 1 Fire Code. b. The residence shall provide a comfortable, sanitary and safe environment for residents. This REQUIREMENT is not met as evidenced by: Based on observation and interview, the residence did not assure a safe environment. Findings include: 1. Per observation and confirmed by the Director during the environmental tour, the basement access door located next to the residence common area was unlocked and the basement area contained 4 gallons of bleach and 4 gallons of ammonia.	T 009	<i>Done</i>		
T 078	VI.1.C.9: Common Model Program Standards * Structural Components Staff All staff members shall meet all applicable federal, local, or state requirements for their positions. This STANDARD is not met as evidenced by: Based on record review, the home failed to assure that 2 applicable staff members had completed background checks for the Assist Program. Findings include: * 1. Per record review on 9/21/11, the background checks provided for 2 current staff members had been previously completed for another program. There was no re-check for this separately licensed residence. During interview that afternoon, the Manager confirmed that the background checks for these employees had been completed for other employment within the	T 078	<i>Done</i> <i>Done</i>		

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T 078	Continued From page 2 Agency.	T 078			

October 14, 2011

Division of Licensure and Protection
103 South Main Street, Ladd Hall
Waterbury VT 05671-2306
Fax (802) 241-2358

Dear Ms. Cota:

Please, find below the Plans of Correction as requested by The Division of Licensure and Protection Survey Statement:

- Resident Care and Supervision (T002)
 1. Please see attached revised "Procedure for Storage, Handling and Giving Client Medications for Clients in the ASSIST Program" as per Medical Director Dr. Sandy Steingard. Completion Date: 12/6/11
- Physical Environment (T009)
 1. Requirement Locked Basement Door reviewed with staff. Door must stay locked at all times.
 2. Bleach and Ammonia will now be stored in an adjacent room that is locked at all times and is not accessible to any clients.
Completion Date: 9/22/11
- Background (T078)
 1. As of September 21st all new hire to ASSIST Program (including internal hire) must complete new background check. Completion date: 9/21/11

If you should have any further question on this matter please contact me at (802) 488-6240.

Sincerely,



Maria Pietralesca-Kind
ASSIST Program Coordinator

Procedures for Storage, Handling and Giving Client Medications for Clients in the ASSIST Program

Note: This replaces all previous policies and procedures addressing the oversight of medications at ASSIST.

1. Most clients admitted to ASSIST will take medications in a supervised self-directed manner. This means that clients take medications on their own but are supervised by staff to assure that medications are taken as prescribed by a physician.
 - a. At the time of admission (at ASSIST or in the ER), the clinician will review medications with the client to determine that the client knows what he/she is prescribed and is able to take them as directed by a physician.
 - b. ***If a client is not able to self direct medications, he/she can not take medications until medications have been reviewed by a physician and a nurse. If this delay in medication interferes with adequate care, then the person can not be admitted to ASSIST.***
 - c. ***If the patient is not able to self direct medication, a decision will be made with the physician covering ASSIST or the psychiatrist on call in the ER as to whether the person can be admitted to ASSIST without medications. If this occurs, no medications will be administered until a nursing assessment is completed and the administering of medications is delegated to a trained clinician.***
2. All medications shall be received from the client upon arrival and stored in the locked boxes in the ASSIST office. Assist staff will review all currently prescribed medications with client to assess that patient know what medications are prescribed and when to take them.
3. All medications, including over the counter medications, must be prescribed by a doctor or other licensed medical professional with prescribing privileges. Formatted: Bullets and Numbering
4. Dosages and exact time between dosages must be clarified on the bottle or obtained through a telephone verbal order by the prescribing physician, HowardCenter physician, or on call physician. Assist will look at the date the prescription was filled to insure that it is current. Formatted: Bullets and Numbering
5. We can not allow patients to take medications that come in unmarked bottles or if the medication in the bottle does not appear to be the same drug that is described on the label (for instance if more than one type of pill is in the bottle). It is not the responsibility of ASSIST staff to verify that all drugs in bottles are the same as what is in the bottle. If there are questions or concerns the staff can discuss with the physician covering for ASSIST that day. Formatted: Bullets and Numbering
 - a. One exception to the above rule is for the few clients of the CSP program who have medications put into pill boxes by our nurse. If one of those patients is admitted, he/she can take medications from the pill box with the approval of a member of the medical staff or a physician on call. It is not the responsibility of ASSIST employees to identify the medications in the pill box. The orders will be written as follows: "Take medications in pill box at the following times: _____. The medications are: _____."

6. If someone is admitted by a Crisis clinician at night or on the weekend, the Crisis clinician will talk to patient about all currently prescribed medications. **The crisis clinician follows the protocol as noted in 1a-c.**

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- a. A print out of current medications will be obtained and signed by a physician or PA.
- b. The crisis clinician will insure that any medications that the patient plans to take at Assist are in labeled containers that meet ASSIST guidelines.
- c. If medications are not in labeled containers, the Crisis clinician will discuss with the ER physician and determine if a short term supply of medications will be given in the ER or called in to a local pharmacy.

7. During work days, if there are questions about a patient's medications, they will be referred to the HowardCenter medical staff who will determine which medications can be taken by the patient.

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8. The ASSIST staff will review all medications brought in by the client and record them on the order sheet and the medication record following the indication listed on the bottle or medicine on time package. All medications, their dosages, and the times they are to be taken will be documented on each client's medication sheet. This sheet will also contain the doctor's name and client name.

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9. This is a self directed medication program. Clients administer the medications to themselves with staff supervision. Staff can hand the bottle or "bubble" to the client and he/she can take the medication on his/her own. Staff may help clients (e.g. opening bubble pack, pouring medications into client's hand, putting bottled medication into the cap of the bottle, etc.) if client asks for assistance and/or at staff discretion.

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10. Each time a client takes a medication it MUST be documented with the time given, and initialed by both the client and the staff member. When a client refuses to sign staff will document with a dash (---) in replacement of the initials.

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11. If a medication is discontinued but is in a client's bubble pack ASSIST staff will ask the client to remove the pill. Staff members will be updated of expectations of medication to be removed by a member of the HowardCenter medical staff.

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12. Any medications needing to be disposed of will be discarded by placing them in a contaminants box. Staff will document the disposal of medications in the client's chart.

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Authority for all medical policy determination(s) rests with the medical director.

Updated 11/30/11