VERMONT

AGENCY OF HUMAN SERVICES

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) 241-2345
To Report Adult Abuse: (800) 564-1612
Fax (802) 241-2358

October 31, 2011

Mr. Charles Medick, Administrator
Farm House
5899 Vt Route 116
Starksboro, VT 05487

Dear Mr. Medick:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **September 26, 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

Farm House TCR
Survey 09/26/11

Initial Comments:
An unannounced onsite recertification survey was conducted on 09/26/11 by the Division of Licensing and Protection. The following are regulatory violation.

T0076 – VI.1.C.7 Staff: The residence shall have written standards for the evaluation of staff performance.
This requirement is NOT MET as evidenced by:

Based on record review and interview, the residence failed follow their written standards for the evaluation of staff performance for 2 out of 3 staff reviewed. Findings include:

1. Per review on 09/26/11 for staff evaluations, there were no current yearly performance evaluations for 2 of 3 staff reviewed. Per review of the policy, performance evaluations are to be yearly. The 2 staff were employed in 2008, and have no current yearly review. Per interview on 09/26/11 at 3:15 PM, the Senior Manager confirmed that the yearly performance evaluations were not completed.

T0088 – VI.2.B.2.c Identification of Problems and Areas of Successful Life Function: The identified problems and achievements shall be used as a basis for the development of a treatment plan and goals for each resident.
This requirement is NOT MET as evidenced by:

Based on record review and interview the residence failed to use the Identification of Problems and Areas of Successful Life Function to develop a treatment plan for 1 applicable resident. (Resident #1) Findings include:

1. Per record review on 09/26/11, the 'Individual Service Agreement' (ISA) which identifies problems and achievements used as a basis for development of a treatment plan was not completed for Resident #1. Per review of Resident #1's chart, the ISA was not completed, signed, nor dated. Per interview at 2:21 PM, the house manager stated that s/he was new to the position so the previous manager might have sent the information to the main office. Per interview at 3:15 PM, the Senior Manager stated that the expectation for new residents is that the ISA is done within the first 30 days. Resident #1 was admitted June 7, 2011. Per interview at 3:15 PM, the Senior Manager confirmed that the ISA was not done for Resident #1.

See attached Plans of correction.

HowardCenter

102 SOUTH WINOOSKI AVENUE / BURLINGTON, VT 05401

T: 802.488.6500 / F: 802.488.6501

WWW.HOWARDCENTER.ORG

OCT 18 2011

SCANNED
10/18/11 [illegible]

Charles Medick, Team Lead CCM
HowardCenter
102 South Winooski Ave.
Burlington VT 05401

Division of Licensing and Protection
103 South Main Street, Ladd Hall
Waterbury, VT 05671-2306

To whom it may concern:

The Division of Licensing and Protection completed a survey at our facility, the Farm House on September 26th, 2011. At this time, there were two deficiencies noted. Below is our plan of correction for each deficiency.

1. **Yearly performance evaluations for staff reviewed did not occur.**

Plan: a) The yearly staff performance review will be completed for the previous year by next week. Evaluations have been completed by supervisors and are now waiting for meetings with each individual staff. Some staff do have current evaluations already completed.
b) Currently our human resources department is notifying us when the review process needs to begin and when it needs to be completed by. They also remind us when this does not get completed.
c) The HR department monitors this practice and notifies supervisors when it is not completed.

T0076 POC accepted 10/20/11 S.Emmons RN/[illegible] RN

2. **The Individual Service Agreement which identifies problems and achievements used as a basis for development of a treatment plan was not completed for one resident within the 30 day period.**

Plan: a) The ISA was not finished due to inability to contact the guardian for participation. On September 13th at 3:00, the ISA was completed. Unfortunately, I went out of the office unexpectedly and was not able to finish typing the ISA into our electronic health records system. The ISA is currently in our electronic system.
b) When the Guardian is not available for an ISA with in the first 30 days, a functional ISA will be created and will be subject to change when the guardian is available to be present.

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c) This process will be continue to be monitored the Teams Senior Leader and Team Lead and sent to the State by our intake department who request ISA and personal stories on all new clients 30 days after they enter services.

T0088 POC accepted 10/20/11 SEMumowRN/PMotaRN

Please contact me with any questions in regards to this response.

Sincerely,

Charles Medick
Team Lead, Howard Center