

Division of Licensing and Protection
103 South Main Street
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

February 13, 2015

Ms. Ladonna Hines, Administrator
Merry Meadow Farm, Inc - Main House
2122 Lower Plain
Bradford, VT 05033-8936

Dear Ms. Hines:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **January 14, 2015**. 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

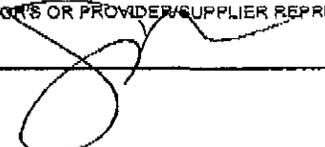
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Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0520	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/14/2015
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NAME OF PROVIDER OR SUPPLIER MERRY MEADOW FARM, INC - MAIN HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 2122 LOWER PLAIN BRADFORD, VT 05033
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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
T 001	Initial Comments An unannounced onsite re-licensure survey and self-repbrt investigation was conducted by the Division of Licensing and Protection on 01/14/15. The following are Therapeutic Community Residence (TCR) regulatory findings.	T 001	Please see attached Plan of Correction.	
T 038 SS=E	V.5.8.d.1.2.3.i.ii.iii.iv. Resident Care and Services 5.8 Medication Management d) If a resident requires medication administration, unlicensed staff may administer medications under the following conditions: (1) A registered nurse must conduct an assessment of the resident's care needs consistent with the physician's or other health care provider's diagnosis and orders. (2) A registered nurse must delegate the responsibility for the administration of specific medications to designated staff for designated residents. (3) The registered nurse must accept responsibility for the proper administration of medications, and is responsible for: i. Teaching designated staff proper techniques for medication administration and providing appropriate information about the resident's condition, relevant medications, and potential side effects; ii. Establishing a process for routine communication with designated staff about the resident's	T 038		

Division of Licensing and Protection LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE DIRECTOR	(X6) DATE 2-4-15
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T 038	Continued From page 1 condition and the effect of medications, as well as changes in medications; iii. Assessing the resident's condition and the need for any changes in medications; and iv. Monitoring and evaluating the designated staff performance in carrying out the nurse's instructions. This REQUIREMENT is not met as evidenced by: Based on interviews and record review, the TCR failed to assure that, prior to unlicensed staff administering medications to residents, the RN assesses the residents care needs, for three applicable residents in the sample. (Residents #1, #2, & #3) Findings include: 1. During record review on 01/14/15 of three applicable resident charts (Resident #1, #2 and #3), there was no evidence that an assessment was conducted by the Registered Nurse (RN) for the care needs consistent with the health care provider's diagnosis and orders. During an interview with the House Manager and Administrator at 3:45 PM confirmed the RN did not do assessments for all care needs consistent with diagnosis and orders.	T 038		
T 052 SS=C	V.5.9.b.1.2.3.4.5.6.7 Resident Care and Services 5.9 Staff Services 5.9.b. The residence must ensure that staff demonstrate competency in the skills and techniques they are expected to perform before	T 052		

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T 052	<p>Continued From page 2</p> <p>providing any direct care to residents. There shall be at least twelve (12) hours of training each year for each staff person providing direct care to residents. The training must include, but is not limited to, the following:</p> <ul style="list-style-type: none"> (1) Resident rights; (2) Fire safety and emergency evacuation; (3) Resident emergency response procedures, such as the Heimlich maneuver, accidents, police or ambulance contact and first aid; (4) Policies and procedures regarding mandatory reports of abuse, neglect and exploitation; (5) Respectful and effective interaction with residents; (6) Infection control measures, including but not limited to, hand washing, handling of linens, maintaining clean environments, blood borne pathogens and universal precautions; and (7) General supervision and care of residents <p>This REQUIREMENT is not met as evidenced by: Based on staff interview and record reviews, the facility failed to assure that all staff completed the annual training for all of the TCR required trainings. (Five of five staff training records reviewed were incomplete.) Findings include:</p> <p>Per review of staff personnel file, the facility had not demonstrated 12 hours of staff training for the past year of the trainings specified in the TCR regulations annually. Of the 5 staff records</p>	T 052		

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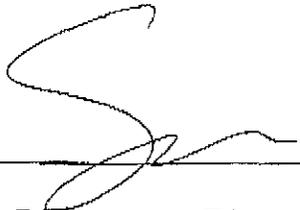
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T 052	Continued From page 3 reviewed, none had completed all of the required training specified in the TCR regulations. Per interview on 01/14 /15 at 3:16 PM, the House Manager acknowledged that "we can't find all the trainings and I am not sure how many hours were completed." S/he confirmed not all the information was found.	T 052		

**Plan of Corrections per State Inspection completed on 1/14/2015
Merry Meadow Farm – Main House**

**V.5.b.d -Resident Care and Services (Medication Management)
(T038)**

1. Upon admission, a nursing care plan will be developed, implemented, and monitored by the RN.
2. RN will be notified by email of any medication additions. Residential staff will monitor for and report any observed side-effects.
3. RN will be notified by email within 24 hours of any significant change in resident status.

TD38 Plan of correction accepted 2/12/15 SEMMONS/RN/PMU



Stephen J Schramm, Director

2-9-15

Date

**Plan of Corrections per State Inspection completed on 1/14/2015
Merry Meadow Farm - Main House**

**V.5.b.d - Resident Care and Services (Medication Management)
(T038)**

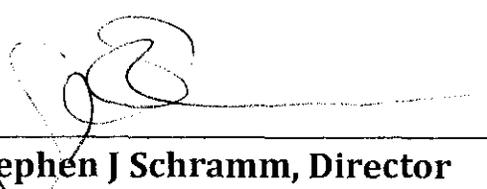
1. A meeting has been scheduled with June Manly, (Nurse), for Feb 4th at 6pm to review new regulations, survey results and to institute a new policy to satisfy current regulations. This was discussed with inspector at time of inspection and authorized. The new policy will be forwarded upon completion, no later than February 11th 2015. Inspector and June Manly have been in direct contact.

See addendum for T038 Plan of Correction.

V.5.b.d - Resident Care and Services (Staff Services) (T052)

MMF has instituted a training schedule (see accompanied) to assure that all staff complete required and additional trainings. See also, training attendance log as tool to track.

T052 POC accepted 2/12/15 SEMMONS/SPN/PMU



Stephen J Schramm, Director

1/27/15
Date