

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 23, 2011

Mr. Greg Mairs, Administrator
Seminary Street Group Home
45 Seminary Street
Middlebury, VT 05753

Provider #: 0501

Dear Mr. Mairs:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **November 2, 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



STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0501	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ Licensing and B. WING _____ Protection DEC 12 11	(X3) DATE SURVEY COMPLETED 11/02/2011
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NAME OF PROVIDER OR SUPPLIER SEMINARY STREET GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 45 SEMINARY STREET MIDDLEBURY, VT 05753
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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 survey was conducted on 11/2/11 to determine compliance with the Vermont Therapeutic Community Residences Licensing Regulations. The following are regulatory violations.	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 record of medication delegation is current and signed / dated by the Registered Nurse (RN). Findings include: Per record review on 11/2/11, a list of unlicensed delegated staff that administers medications contained no RN signature and date of delegation / most recent review. During interview, a staff member confirmed that there was no RN signature / date on the delegation list to indicate completion by the RN.	T 002	<u>Action taken for Correction:</u> The internal tracking form for medication delegation has been modified to include RN signature with signature date. This will ensure that this error will not occur again. The group home manager will be responsible for monitoring that this form is used and all signatures are acquired. Existing documents lacking this information have been updated to include admission dates. Documents including admission dates have been put in the residence for reference for all residents. TDO2 POC accepted 12/20/11 Claraway RN / Pincot RN	12/5/11
T 101	VI.2.B.6.a. Common Model Program Standards Treatment Components Process--Resident Records A residence shall ensure: 1. its responsibility for safeguarding and protecting the resident record against loss, tampering or unauthorized disclosure of information;	T 101		

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Melinda Hamann

TITLE
Service Coordinator

(X6) DATE
12/8/11

AB

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0501	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/02/2011
NAME OF PROVIDER OR SUPPLIER SEMINARY STREET GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 45 SEMINARY STREET MIDDLEBURY, VT 05753		
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T 101	Continued From page 1 2. Content and format of resident records are kept uniform; 3. entries in resident records are signed and dated. This STANDARD is not met as evidenced by: Based on interview and record review, the Residence failed to assure that 2 of 3 applicable resident records included admission dates (Resident #1 and Resident #3). Findings include: Per record review on 11/2/11, the intake summaries of Resident #3 and Resident #1 contained no dates of admission. There was no additional information found in archived records obtained from the central office record storage area. During interview, the Service Coordinator confirmed that these records did not include original admission dates of these 2 residents who had resided in the Residence for more than 3 years and more than 20 years, respectively.	T 101	<u>Action taken for Correction:</u> 12/9/11 The ISA Personal Story Update which is done annually will now include a prompt to include the date of admission to current residence. This is done by the Records Department which also monitors quality assurance. Periodic audits by the Records department will ensure that this is done. T101 POC accepted 12/20/11 Clawwayrn / POC: CLAW	