

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

January 12, 2015

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

Dear Mr. Mairs:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **December 16, 2014**. 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



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  C 12/16/2014
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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 006	Continued From page 1 Findings include:  1. Per interview on the afternoon of 12/16/14 both the TCR House Manager and the Service Coordinator confirmed admission agreements have not been provided upon admission to each of the residents and/or legal representative presently residing at the Seminary Street Group Home. Although other forms of review are conducted at the time of admission, information obtained does not reflect required specifics of an admission agreement.	T 006		
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 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:  (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	T 052		

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NAME OF PROVIDER DR SUPPLIER  SEMINARY STREET GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 45 SEMINARY STREET MIDDLEBURY, VT 05753		
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T 052	Continued From page 2 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  This REQUIREMENT is not met as evidenced by: Based on interview and record review, the TCR failed to assure all direct care staff were provided 12 hours of training on a yearly basis. Findings include:  Per review of yearly training records on 12/16/14 for 4 applicable direct care staff it was confirmed with Human Resource staff the 12 hours of training was not consistently being provided to the staff. Although the staff recently completed First Aid and CPR training, 4 of the 4 direct care staff had not received training in Respectful Communication; Abuse/Neglect and Exploitation and General Care and Supervision.	T 052		
T 078 SS=C	V.5.16.a Resident Care and Services  5.16 Reporting of Abuse, Neglect or Exploitation  5.16.a The licensee and staff shall report any case of suspected abuse, neglect or exploitation to 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 forty-eight (48) hours of learning of the suspected, reported or alleged incident.	T 078		

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T 078	Continued From page 3  This REQUIREMENT is not met as evidenced by: Based on interview and record review, the TCR failed to report to Adult Protective Services (APS) within 48 hours of learning of a suspected abuse as required by State Statue for 1 applicable resident who had been inappropriately touched by a resident who resides at this group home. (Resident #4) Findings include:  Per record review, during a gathering of residents from both Seminary Street Group Home and another Group Home on 4/15/14 an incident transpired between a female resident and Resident # 4 while they were both dancing during a "Sing Along". Staff who witnessed the inappropriate sexual touch acted quickly asking both residents to step away and no further action was necessary. Although the House Manager was made aware of the event, there was a failure of communication between staff regarding who would be responsible for filing a report with APS. It was not until 13 days after the event a report was filed with APS as required by 33 V.S.A. §6903.	T 078		
T 195 SS=C	XI. 11.2 Resident Funds and Property  11.2 If the residence manages the resident's finances, the residence must keep a record of all transactions, provide the resident with a quarterly statement, and keep all resident funds separate from the residence or licensee's funds.  This REQUIREMENT is not met as evidenced by: Based on interview, the TCR failed to develop a	T 195		

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T 195	<p>Continued From page 4</p> <p>process and policy for maintaining and handling resident funds. Findings include:</p> <p>Although TCR staff manage "pelly cash" for the residents to include daily and weekly access to resident funds for various needs and requests made by the residents, the resident and/or legal representative are not provided with at least quarterly statements of each residents funds. This was confirmed by the House Manager on the afternoon of 12/16/14.</p>	T 195		

Pamela M. Cota, RN Licensing Chief  
Division of Licensing and Protection  
103 South Main Street  
Waterbury, VT 05671-2306

1/2/15

Dear Ms. Cota,

The following is the plan of correction to address the deficiencies found during the re-licensing survey at the Counseling Service of Addison Counties Seminary Street TCR on 12/16/14.

V.5.2.a : Lack of an Admissions Agreement

An Admissions Agreement has been created (attached). This document will be reviewed with the residents and guardians and signed by 2/1/15.

5.9b Required training for staff.

A comprehensive training plan for staff has been developed (see attached). All staff will receive module 3 by 2/1, Module 2 by 3/1, Module 1 by 4/1/15. Agency administrative staff will maintain a training database and all trainings will be documented with sign-in sheets stating the content of the training, duration of the training and those in attendance. Staff will receive a minimum of 12 hours, including the mandatory topics, of training annually.

V.5.16.a Reporting abuse within the 48hr timeframe.

Training will be completed by 1/31/15 with the Managers and Service Coordinators of both homes around identifying when a report needs to be made, clarifying the process and communication channels to assure reports have been filed.

XI.11.2 Resident Funds and Property

The option to have personal funds managed by the residence is explained in the new Admission Agreement. A sign-off requesting or declining this service has been incorporated into the document. Accounting will be automatically mailed to guardians or given to the resident ( as applicable) monthly for those using this service (see attached ledger sheet).

Please contact me with any questions or if anything additional is needed to meet the licensing requirements.

Respectfully,



Jennifer Murdoch, Associate Director

802-388-4132 jmurdoch@csac-vt.org