



AGENCY OF HUMAN SERVICES

DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

October 1, 2019

Mr. Steele Johnson, Manager  
Averte - Main House  
2122 Lower Plain  
Bradford, VT 05033-8936

Dear Mr. Johnson:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **September 16, 2019**. 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,

A handwritten signature in cursive script that reads "Pamela M. Cota RN".

Pamela M. Cota, RN  
Licensing Chief

ST Sep. 26. 2019 10:52AM  
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA  
IDENTIFICATION NUMBER:

0520

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: \_\_\_\_\_

B. WING: \_\_\_\_\_

No. 0497

(X3) SURVEY  
COMPLETED

09/16/2019

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

AVERTE - MAIN HOUSE

2122 LOWER PLAIN  
BRADFORD, VT 05033

(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

T 001

An unannounced on-site re-licensure survey was conducted by the Division of Licensing and Protection on 9/16/19 to determine compliance with the Licensing and Operating Regulations for the Therapeutic Community Residences (TCR). The following regulatory violation was identified:

T 052 V.5.9.b.1.2.3.4.5.6.7 Resident Care and Services T 052  
SS=D

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 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

Please see attached  
Plans of Correction

Division of Licensing and Protection

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

*[Signature]* TITLE House manager

(X5) DATE 9/24/19

STATE FORM

8899

WV7B11

If continuation sheet 1 of 2

T052 POC accepted 9/30/19 Fmclntshkn/pme

|   |   |  |  |
|---|---|--|--|
| STA: Sep. 26, 2019 10:53 AM<br>AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br>0520 | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____ | No. 0497<br>P. 5<br>(X3) SURVEY<br>COMPLETED<br><br>09/16/2019 |
|---|---|--|--|

|  |  |
|--|--|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>AVERTE - MAIN HOUSE</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2122 LOWER PLAIN<br/>         BRADFORD, VT 05033</b> |
|--|--|

| (X4) ID<br>PREFIX<br>TAG | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)   | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE |
|--------------------------|--|---------------------|--|--------------------------|
| T 052                    | Continued From page 1  | T 052               |  |                          |
|                          | <p>(7) General supervision and care of residents</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on record review and staff interview, the TCR failed to demonstrate that 2 of 5 applicable staff were provided and participated in the annual twelve hours of training as required by TCR regulation. Training topics must be specific to resident rights, fire safety and emergency evacuation; first aid; abuse, neglect and exploitation; respectful communication; infection control, and general care and supervision.</p> <p>Findings include:</p> <p>Per record review on 9/16/19, there was a lack of evidence that required training was provided on an annual basis for 2 of 5 applicable employees whose training records were reviewed. This was confirmed with the TCR manager on the afternoon of 9/16/19.</p> |                     |  |                          |

Averte -Main House  
House Manager: Steele Johnson  
2122 Lower Plain  
Bradford, VT 05033  
(802) 222 - 4412  
[steele.johnson@averte.com](mailto:steele.johnson@averte.com)

**T 052 V.5.9.b.1.2.3.4.5.6.7 Resident Care and Services; SS=D**

"Per review of staff training/in-service records on 09/16/2019, there was a lack of evidence that required trainings was provided on an annual basis for 2 of 5 applicable employees whose trainings records were reviewed. This was confirmed with (TCR) manager on the afternoon of 09/16/19."

**Plan of Correction**

- The selected staff who are lacking the required trainings will complete said trainings as well as being provided with additional supervisions for extra education.
- House Manager will implement a system with co-managers to ensure that all staff are completing the required trainings throughout the year. This will be done during weekly Manager's Meetings.
- Managers will monitor staff trainings on a monthly basis to ensure that staff are completing the necessary trainings.
- This POC will Implemented on 09/29/2019.