

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

May 3, 2021

Mr. Jayesh Shukla, Renal Center Director
University Of Vt Medical Center Dialysis St Albans
7 Crest Rd Ste 78
Saint Albans, VT 05478

Dear Mr. Shukla:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **April 14, 2021**. 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,



Suzanne Leavitt, RN, MS
Assistant Division Director
State Survey Agency Director

CC: Carol Muzzy, UVMHC Regulatory and Compliance Director

THE
University of Vermont
MEDICAL CENTER

Jeffords Institute for Quality
Accreditation and Regulatory Affairs Department
111 Colchester Avenue
Burlington, VT 05401

April 28, 2021

Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury, VT 05671-2060

Re: CMS Certification Number (CCN): 473502
Conditions of Participation for 42 CFR Part 405.2150

Dear Suzanne Leavitt,

Please find the attached Plan of Corrections and form CMS-2567 in response to the Statement of Deficiencies and Findings in regards to survey number 473501.

The University of Vermont Medical Center is committed to continuously improving the quality of services we provide to respond to the regulatory deficiencies that were cited.

If you have questions regarding the attached Plan of Correction or require further clarification, please do not hesitate to contact me.

Sincerely,



Carol Muzzy, Director
Accreditation & Regulatory Affairs
The University of Vermont Medical Center
111 Colchester Avenue
Burlington, VT 05401
Telephone: 802-847-5007
Fax: 802847-6274
Carol.Muzzy@UVMHealth.org

CC: Jayesh Shukla, Director Renal Services and Endoscopy

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/21/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 473502	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/14/2021
NAME OF PROVIDER OR SUPPLIER UNIVERSITY OF VT MEDICAL CENTER DIALYSIS ST ALBANS			STREET ADDRESS, CITY, STATE, ZIP CODE 7 CREST RD STE 78 SAINT ALBANS, VT 05478	
(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) COMPLETION DATE
E 000	Initial Comments During an unannounced on-site re-certification survey from 4/12/21 through 4/14/21, the Division of Licensing and Protection conducted a review of the facility's Emergency Preparedness Program. The facility was found to be in substantial compliance with Emergency Preparedness planning.	E 000		
V 000	INITIAL COMMENTS An unannounced on-site re-certification survey was conducted by the Division of Licensing and Protection from 4/12/21 to 4/14/21 to determine compliance with 42 Code of Federal Regulations Part 405 Subpart U, Condition of Participation: End Stage Renal Disease Services. The following regulatory violation was identified.	V 000		
V 113	IC-WEAR GLOVES/HAND HYGIENE CFR(s): 494.30(a)(1) Wear disposable gloves when caring for the patient or touching the patient's equipment at the dialysis station. Staff must remove gloves and wash hands between each patient or station. This STANDARD is not met as evidenced by: Based on observation and interview staff failed to wear gloves when providing care and/or touching the equipment in a dialysis (The process of removing excess water, solutes, and toxins from the blood in people whose kidneys can no longer perform these functions naturally.) station for 1 applicable patient (Patient #5). Findings include:	V 113	See attached POC-CH	4/15/21

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

Carol Brown

TITLE

Director

(X6) DATE

4/28/21

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

*POC accepted
4/30/21
D. W. Deane*

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V 113	<p>Continued From page 1</p> <p>Per observation on 4/12/21 at 12:21 PM, a Staff Nurse entered Patient #5's dialysis station with a glove on his/her left hand and no glove on his/her right hand, s/he proceeded to touch the table in the patient's station with his/her bare hand and without sanitizing his/her hand(s) put a glove on the ungloved right hand, performed his/her assessment of Patient #5, removed both gloves and then sanitized his/her hands.</p> <p>Per observation on 4/12/21 at 12:24 PM a Hemodialysis Technician (HT) donned gloves, applied the blood pressure cuff to Patient #5's right arm, attached heparin (medication used to thin the blood) to the dialysis machine, arranged supplies used to cannulate (put a needle into) Patient #5's Arterial Venous fistula (AVF-A connection that's surgically made between an artery and a vein for a dialysis access.) on the table in the patient's station, put a disposable absorbent pad under the patient's left arm, with the same gloves, opened the supplies on to the table, touched the dialysis machine, and touched a dialysate (solution of pure water, electrolytes and salts used to pull toxins from the blood) jug. At 12:27 PM, with the same gloves, the HT palpated the AVF, then proceeded to clean the arterial side of the patient's fistula with a disinfectant sponge. At 12:29 PM, with the same gloves, the HT cleaned the venous side of the patient's fistula with a new disinfectant sponge; and then removed his/her gloves and sanitized his/her hands.</p> <p>Per observation on 4/12/21 at 12:40 PM, the HT entered Patient #5's dialysis station and with bare hands touched the television and turned out the lights in the station. At 12:47 PM, the HT re-entered Patient #5's station and without gloves</p>	V 113	<p><i>See attached POC-RA</i></p>	<p><i>5/13/21</i></p>

*POC accepted
4/30/21
D. W. Deaver*

DEPARTMENT OF HEALTH AND HUMAN SERVICES
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V 113	<p>Continued From page 2</p> <p>on put a blanket and headphones on the patient.</p> <p>Per interview on 4/13/21 with the Renal Nurse Supervisor, s/he confirmed that when entering a patient station and/or performing patient care gloves should be worn; and that the above practice "wasn't correct".</p> <p>Per review of the facility policy "Infection Prevention Policy: Hemodialysis Out-patient and In-patient Care Sites"-effective 7/12/20, it states, "I. Infection Prevention Precautions for All Patients A. 1. During the process of hemodialysis, exposure to blood and potentially contaminated items can be routinely anticipated; thus, gloves are required whenever caring for a patient or touching the patient's equipment".</p> <p>Per review of the facility policy "Vascular Access: Needle Placement and Removal, including Managing New AVF"-effective 5/10/18, it states, "STEPS: 2. Don gown and mask, perform hand hygiene and don gloves. 3. Place chux (absorbent pad) under vascular access ...From this point forward, any contact made with objects other than the vascular access and the supplies needed for the procedure requires repetition of hand hygiene and donning of new gloves."</p>	V 113	<p><i>See attached POC</i></p> <p><i>CM</i></p>	<p><i>4/15/21</i></p>	

POC accepted
4/30/21
S. Wickert

E 000 INITIAL COMMENTS

During an unannounced on-site re-certification survey from 4/12/21 through 4/14/21, the Division of Licensing and Protection conducted a review of the facility's Emergency Preparedness Program. The facility was found to be in substantial compliance with Emergency Preparedness planning.

V 000 INITIAL COMMENTS

An unannounced on-site re-certification survey was conducted by the Division of Licensing and Protection from 4/12/21 to 4/14/21 to determine compliance with 42 Code of Federal Regulations Part 405 Subpart U, Condition of Participation: End Stage Renal Disease Services. The following regulatory violation was identified.

V 113 IC-WEAR GLOVES/HAND HYGIENE CFR(s): 494.30(a)(1)

Wear disposable gloves when caring for the patient or touching the patient's equipment at the dialysis station. Staff must remove gloves and wash hands between each patient or station.

This STANDARD is not met as evidenced by: Based on observation and interview staff failed to wear gloves when providing care and/or touching the equipment in a dialysis (The process of removing excess water, solutes, and toxins from the blood in people whose kidneys can no longer perform these functions naturally.) station for 1 applicable patient (Patient #5).

Findings include:

Per observation on 4/12/21 at 12:21 PM, a Staff Nurse entered Patient #5's dialysis station with a glove on his/her left hand and no glove on his/her right hand, s/he proceeded to touch the table in the patient's station with his/her bare hand and without sanitizing his/her hand(s) put a glove on the ungloved right hand, performed his/her assessment of Patient #5, removed both gloves and then sanitized his/her hands.

Per observation on 4/12/21 at 12:24 PM a Hemodialysis Technician (HT) donned gloves, applied the blood pressure cuff to Patient #5's right arm, attached heparin (medication used to thin the blood) to the dialysis machine, arranged supplies used to cannulate (put a needle into) Patient #5's Arterial Venous fistula (AVF-A connection that's surgically made between an artery and a vein for a dialysis access.) on the table in the patient's station, put a disposable absorbent pad under the patient's left arm, with the same gloves, opened the supplies on to the table, touched the dialysis machine, and touched a dialysate (solution of pure water, electrolytes and salts used to pull toxins from the blood) jug. At 12:27 PM, with the same gloves, the HT palpated the AVF, then proceeded to clean the arterial side of the patient's fistula with a disinfectant sponge. At 12:29 PM, with the same gloves, the HT cleaned the venous side of the patient's fistula with a new disinfectant sponge; and then removed his/her gloves and sanitized his/her hands.

Per observation on 4/12/21 at 12:40 PM, the HT entered Patient #5's dialysis station and with bare hands touched the television and turned out the lights in the station. At 12:47 PM, the HT re-entered Patient #5's station and without gloves on put a blanket and headphones on the patient.

Per interview on 4/13/21 with the Renal Nurse Supervisor, s/he confirmed that when entering a patient station and/or performing patient care gloves should be worn; and that the above practice "wasn't correct".

Per review of the facility policy "Infection Prevention Policy: Hemodialysis Out-patient and In-patient Care Sites"-effective 7/12/20, it states, "I. Infection Prevention Precautions for All Patients A. 1. During the process of hemodialysis, exposure to blood and potentially contaminated items can be routinely anticipated; thus, gloves are required whenever caring for a patient or touching the patient's equipment".

Per review of the facility policy "Vascular Access: Needle Placement and Removal, including Managing New AVF"-effective 5/10/18, it states, "STEPS: 2. Don gown and mask, perform hand hygiene and don gloves. 3. Place chux (absorbent pad) under vascular access. From this point forward, any contact made with objects other than the vascular access and the supplies needed for the procedure requires repetition of hand hygiene and donning of new gloves."

ACTION PLAN

- Under direction of the renal site supervisor, all staff, applicable to their role, received education on the expectations outlined in the facility's Infection Prevention Policy "REN195: Infection Prevention Policy: Hemodialysis Outpatient and Inpatient Care Sites". This policy is related to gloving and hand sanitizing practices.
- Under direction of the renal site supervisor, all staff, applicable to their role, received education on the expectations outlined in the facilities Vascular Access Policy "REN100047: Vascular Access: Needle Placement and Removal, Including Managing New AVF". This policy is related to gloving and hand sanitizing practices specific to activities performed in the cleaning and the needle insertion process.
- Education on both of the above noted policies occurred through in-person staff meetings led by the renal site supervisor in April 2021.
- The training included policy review on preventing transmission of infection to hemodialysis patients, infection prevention precautions for all patients and appropriate hand sanitizing and gloving practices.
- Compliance will be monitored monthly by the renal site supervisor. The results of these audits will be presented at the regular interdisciplinary QAPI meetings.
- Monitoring the audit frequency will be re-evaluated by the renal leadership team based on sustained performance.
- All actions will be completed by May 15 2021.

*PBC accepted
4/30/21
D. W. de la Vega, MD*