



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

July 10, 2024

Amanda St. Cyr, Manager
Brownway Residence
328 School Street
Enosburg Falls, VT 05450-5500

Dear Ms. St. Cyr:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **June 11, 2024**. 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.

If you have any questions, please feel free to contact me at (802) 585-0995.

Sincerely,

A handwritten signature in black ink, appearing to read "Carolyn Scott".

Carolyn Scott, LMHC, MS
State Long Term Care Manager
Division of Licensing & Protection

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0118	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/11/2024
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NAME OF PROVIDER OR SUPPLIER BROWNWAY RESIDENCE	STREET ADDRESS, CITY, STATE, ZIP CODE 328 SCHOOL STREET ENOSBURG FALLS, VT 05450
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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
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R100	Initial Comments: On 6/11/24 the Division of Licensing and Protection conducted an unannounced on-site annual relicensure survey. The following regulatory deficiencies were identified:	R100		
R190 SS=F	<p>V. RESIDENT CARE AND HOME SERVICES</p> <p>5.12.b.(4)</p> <p>The results of the criminal record and adult abuse registry checks for all staff.</p> <p>This REQUIREMENT is not met as evidenced by: Based on staff interview and record review there was a failure to ensure completion of all required criminal background checks for 5 out of 5 sampled staff. Findings include:</p> <p>The home's Background Checks Policy includes procedures which state, "All staff, volunteers and long term contractors will be subject to both criminal records and abuse background checks. Employment will be provisional pending the outcome of the background checks, The background checks will be completed annually thereafter."</p> <p>Per record review, the required National background checks were not completed for 5 out of 5 sampled Staff.</p> <p>At 4:05 PM on 6/11/24 the Owner/Manager of the home confirmed National background checks were not completed for all 5 sampled Staff as required.</p> <p>In conclusion this deficient practice is a potential</p>	R190		

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

Manda Steys

TITLE

Executive Director

(X6) DATE

7/5/24

Division of Licensing and Protection

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R190	Continued From page 1 risk for more than minimal harm for all residents, as the requirement for criminal background and abuse checks is intended to ensure all residents are free from the risk of harm.	R190		
R291 SS=F	IX. PHYSICAL PLANT 9.6 Plumbing 9.6.d Hot water temperatures shall not exceed 120 degrees Fahrenheit in resident areas. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview there was a failure to ensure water temperatures in the home are maintained at or below 120 degrees Fahrenheit. Findings include: The home's Physical Plant Plumbing Policy states, "Hot water temperatures shall not exceed 120 degrees Fahrenheit in resident areas. " 1. During a tour of the facility commencing at 10:05 AM on 6/11/24 water temperatures in resident accessible areas were observed to be above 120 degrees Fahrenheit as follows: a. Shared Bathrooms in the A Wing: A1 Bathroom 152.2 degrees A2 Bathroom 148.8 degrees A3 Bathroom 135.0 degrees A4 Bathroom 153.0 degrees b. Shared Bathrooms in the B Wing: B1 Bathroom 144.7 degrees B3 Bathroom 126.0 degrees	R291		

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R291	<p>Continued From page 2</p> <p>c. Shared Bathrooms in the C Wing: C1 Bathroom 139.6 degrees C4 Bathroom 140.7 degrees</p> <p>d. Private Bathroom in Resident Room D4 127.2 degrees</p> <p>e. Shared Bathroom E3 in the E Wing: An initial temperature of 140.0 degrees was observed with varying temperatures between 119-140 degrees observed over approximately 2 minutes followed by temperature sustained at 119.0 degrees.</p> <p>f. Kitchenette sink in area between D Wing and E Wing 121.1 degrees</p> <p>These findings were confirmed by the Owner Manager following the tour on the morning of 6/11/24.</p> <p>2. The Owner/Manager was requested to provide documentation of water temperature checks since January 2024. Per review of water temperatures documented during monthly water checks conducted in resident accessible areas of the home:</p> <p>a. Water temps in 22 out of 27 resident accessible areas were documented above 120 degrees during the January and February 2024 monthly checks</p> <p>b. Water temps in 24 out of 27 resident accessible areas were documented above 120 degrees during the March 2024 monthly check</p> <p>c. Water temps in 27 out of 27 resident accessible areas were documented above 120</p>	R291		

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R291	Continued From page 3 degrees during the April 2024 monthly check d. Water temps in 19 out of 27 resident accessible areas were documented above 120 degrees during the May 2024 monthly check e. Water temps in 12 out of 27 resident accessible areas were documented above 120 degrees during the June 2024 monthly check. At 11:04 AM on 6/11/24 Staff confirmed the June 2024 water checks were conducted on the morning of 6/11/24. 3. Water temperatures in resident accessible areas were rechecked Surveyor on the afternoon of 6/11/24. Water temperatures in resident accessible areas were confirmed with the Owner/ Manager to be sustained at or below 120 degrees Fahrenheit at 5:38 PM on 6/11/24 following adjustments made to both boilers of the home. In conclusion this deficient practice is a potential risk for more than minimal harm for all facility residents due to the risk for burns associated with water temperatures above 120 degrees Fahrenheit and increased risk for burns with injuries resulting for vulnerable adults.	R291		

Brownway Residence POC Annual Health Survey on June 11, 2024

R190:

Mandatory State Criminal and Adult/Child Background checks were all in compliance with regulations. The newer mandated National Criminal Background checks will be completed for all staff upon hire effective immediately. National Background checks will also be completed for current employees by August 7, 2024 and audited quarterly by HR.

Tag 190- Accepted 7-10-24-LTCM

R291:

The mixing valve failed on the hot water tank and was fixed immediately, along with all hot water temps back to normal temp ranges prior to surveyors leaving the building.

Hot water temps will be checked twice weekly x 1 week and then continuation of monthly audits by the Maintenance Director.

Tag 291- Accepted 7-10-24-LTCM