

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

March 22, 2016

Ms. Meagan Buckley, Administrator
Burlington Health & Rehab
300 Pearl Street
Burlington, VT 05401-8531

Dear Ms. Buckley:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on February 1, 2016. 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

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

PRINTED: 02/12/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 475014	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/01/2016
NAME OF PROVIDER OR SUPPLIER BURLINGTON HEALTH & REHAB		STREET ADDRESS, CITY, STATE, ZIP CODE 300 PEARL STREET BURLINGTON, VT 05401	

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F 000 INITIAL COMMENTS

An unannounced onsite complaint investigation was conducted by the Division of Licensing and Protection on 2/1/16. The following are regulatory findings.

F 353 483.30(a) SUFFICIENT 24-HR NURSING STAFF PER CARE PLANS
SS=E

The facility must have sufficient nursing staff to provide nursing and related services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care.

The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:

Except when waived under paragraph (c) of this section, licensed nurses and other nursing personnel.

Except when waived under paragraph (c) of this section, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty.

This REQUIREMENT is not met as evidenced by:
Based on observation, record review and interviews the facility failed to ensure sufficient nursing staff to provide nursing and related services to attain or maintain the highest emotional, physical, and psychosocial well-being

F 000

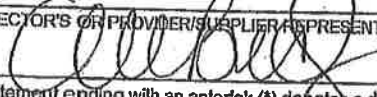
The following constitutes the facility's response to the findings of the Department of Licensing and Protection and does not constitute an admission of guilt or agreement of the facts alleged or conclusions set for the on the summary statement of deficiencies.

F 353

F353 E 483.30(a)

1. No residents were effected as a result of this alleged deficient practice.
2. Residents residing in the facility have the potential to be affected by this alleged deficient practice.
3. Facility administration are aware of state requirements for staffing.
4. Facility administration will continue to review staffing daily as well as conduct resident and family interviews.
5. Random weekly PPD audits will be conducted by the DNS or designee to monitor the effectiveness of the plan.
6. The results of the audits will be reported to the QAA committee by the DNS or designee monthly x3 months at which time the QAA committee will determine further frequency of the audits.
7. Corrective action to be complete by 3/1/2016.

F353 POC accepted 3/1/16 Amcatalan

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Sr. Executive Director	(X6) DATE 2/18/16
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A deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that 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.

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F 353	Continued From page 1 of residents. This has the potential to effect all residents residing on the 4th (36 residents), and 5th floor unit (34 residents) . *This is a repeat citation, previously cited on 12/18/13, 7/29/14, and 3/11/15.* Findings include: Per observation on 2/1/16, the day shift schedule showed 3 LNAs (Licensed Nursing Assistants) scheduled on both the 4th and 5th floor. The census reported for the 4th floor was 36 residents, and the census for the 5th floor was 34 residents. An LNA working on the 4th floor stated that there are 6 residents on that floor who are a two person transfer with a mechanical lift Per interview with three residents and one family member of a resident who all reside on the 4th and 5th floor, the facility does not have enough staff to address the needs of the residents in a timely manner. These residents and the family member, as well as the staff interviewed, requested confidentiality. 1. Per interview with Resident A on 2/1/16, the wait time for response to ringing the call bell was sometimes very long, although they were not specific. The resident utilizes a urinal to void when they are in bed, and sometimes they state that the wait is so long that the urinal becomes overfull so that it spills over on the bed. This resident stated that the staff seem overworked, and frustrated with answering call bells. This resident stated that the on night shift had the longest waits. 2. Resident B stated that they are unable to get up from bed by themselves, and require the assist of two staff persons and a mechanical lift. The resident stated that sometimes they had to wait over an hour for assistance to get to bed	F 353			

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F 353	Continued From page 2 after they have asked. The resident also stated that they do not feel they have a choice about when they get up in the morning due to availability of staff. The resident has been told that they should get up "now" instead of waiting due to being short staffed and they were available at that time but might be busy when the resident decided to get up. The resident felt "rushed" during care sometimes, as the staff are in a hurry to get to everyone. 3. Resident C was interviewed on 2/1/16 at 2:15 PM. This resident stated that they are dependent on staff for much of their care due to extreme weakness. The resident complained that the wait for their call bell to be answered is too long sometimes, and sometimes they are left in an uncomfortable position in bed for a long time due to staff saying they are busy and will return shortly, however sometimes it could be a half hour or more. The resident stated that sometimes a staff person will come in and turn off the call bell, say they will be back soon to assist but then do not return. Resident C stated that the LNAs have said many times that they were short staffed so the resident would have to wait for assistance. The resident stated that they often seem to rush through their personal care, and this causes discomfort as the resident has pain upon movement and needs to move slowly to minimize discomfort. 4. Resident D has a family member that spends a lot of time at the facility. This relative stated in interview on 2/1/16 that sometimes Resident D has to wait for an hour and a half to be put back to bed after a meal due to the LNAs being busy with other residents. The relative stated that sometimes Resident D is crying due to being tired	F 353			

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F 353	Continued From page 3 and in pain and wants to get in bed. The relative also stated that Resident D is at high risk for skin breakdown, and that it takes too long sometimes to change and clean the resident after an incontinent episode. The relative said that many staff have complained about being short staffed at the facility, and making this hard to get to all the residents who need assistance. The relative of Resident D was concerned that the LNAs were tired from working short staffed, and the facility was losing some of their good staff due to the strain. Per interview with staff working at the facility on 2/1/16, three staff members were interviewed regarding staffing levels at the facility. All staff members requested confidentiality. Per interview with Nurse A, the facility often has days when nursing is expected to pitch in to do LNA care of residents in addition to their nursing assignment due to a call out from an LNA or not enough scheduled LNAs for other reasons. Nurse A stated that there was a poor morale among staff, and that many good employees were leaving the facility due to the stresses of working short-staffed on many days. Nurse A stated that the Geri-Aides are helpful for answering call bells and supervision of residents, however they are not allowed to do personal care, take vital signs, feed residents, or any other type of personal care. This still leaves the LNAs and Nurses to have to complete personal care, and any other hands-on care. Per Nurse B, the facility has days when the LNAs are short-staffed due to scheduling or call outs, and this affects the quality of care provided to the residents. The nurses are expected to pitch in	F 353			

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F 353	Continued From page 4 with the LNA tasks as well as their own assignment, and this is difficult when they have medications to administer and treatments to provide. This nurse also stated that working with less than optimal staffing numbers (4 LNAs scheduled for 34-36 residents) was stressful for the staff, and the nurse said that the atmosphere on the unit becomes rushed and residents being told that they have to wait This nurse also stated that some very good employees were leaving the facility as they are tired of the stafing problems. Per interview on 2/1/16, one of the LNAs working on the unit asked to speak with me. This LNA stated that the facility is often understaffed, and they are shifted between units a lot to even out the staff/ resident ratio. This LNA stated that there are at least two residents on the 5th floor unit, and 6 or 7 on the 4th floor unit that require a mechanical lift and two staff persons for every transfer, and some residents that require two persons for personal care. The LNA stated that the care is very heavy on both of these long term care areas of the facility, and some residents with dementia needed frequent supervision. The LNA expressed a concern that they are rushing through care to get everything done, and that did not create a relaxed atmosphere for the residents. They also were frustrated with many colleagues leaving the facility due to burn-out. This LNA also stated that they often received a phone call from the facility on their day off to see if they would come in and work, and stated that they sometimes felt pressured by administrative staff to come in even if they really were tired or had other things to do that day, and this was contributing to people finding work elsewhere.	F 353			
F9999	FINAL OBSERVATIONS	F9999			

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F9999	Continued From page 5 Per Vermont Licensing and Operating Rules for Nursing Homes regulation 7.13(d)(1)(l): (d) Staffing Levels. The facility shall maintain staffing levels adequate to met resident needs. (1) At a minimum, nursing facilities must provide: (l) no fewer than 3 hours of direct care per resident per day, on a weekly average, including nursing care, personal care and restorative nursing care, but not including administration or supervision of staff; and of the three hours of direct care, no fewer than 2 hours per resident per day (PPD) must be assigned to provide standard LNA care (such as personal care, assistance with ambulation, feeding, etc.) performed by LNAs or equivalent staff and not including meal preparation, physical therapy or the activities program. This REQUIREMENT is NOT MET as evidenced by: Per review of staffing numbers for the months of December 2015 and January of 2016, the facility failed to meet the minimum two hours per day per resident for LNA (Licensed Nursing Assistants) services on multiple days, and sometimes on the weekly averaged hours also. In December 2015, the following days were recorded with less than 2 hours/day of LNA services. On December 1, the daily census was 113 residents, and only 211.2 hours of LNA recorded. On 12/4/15 the census was 115 residents, and the daily total for LNAs was 226.6 hours. On 12/13/15, the census was 115 residents, and LNA hors totaled 211 hours. On 12/14/15, the census was 117 residents, and the LNA total hours were 221.2. On 12/16/15, the census was 115, and the total for LNA hours 223.8. On 12/18/15, census was 115, and LNA	F9999		

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F9999	Continued From page 6 hours totaled 216.4. On 12/19/15, the census was 116 and the LNA hours totaled 218. On 12/20/15 the census was 116, and the LNA hours totaled 226.3. On 12/21/15, the census was 115, and LNA hours were 215.3. On 12/22/15, the census was 116, and LNA hours were 227.7. On 12/23/15, census was 114 residents, and LNA hours were 208.9. On 12/26/15, the census was 117, and the LNA hours recorded as 210.5. On 12/27/15, daily census was 117, and the LNA hours were 201.1. On 12/28/15, census was 116, and LNA hours totaled 202.2. On 12/29/15, the census was 114 residents, and the LNA hours were 223.5. 12/30/15, the census was 116, and LNA hours were 200.0. Per review of weekly averages for December, there were two weeks that also dipped below the 2 hour per day of LNA per resident. 12/1 -12/7/15 the average of LNA hours calculated to 199.4 hours per resident, and the 3rd week of the month 12/15 -12/21/15 totaled an average of 192.7 hours per resident per day. For January 2016, the following data was provided by the facility. Per a review of the staff schedule, and the administrator indicating which days also had nurses functioning in the role of an LNA, providing personal care etc, there were still many days that fell below the 2 hour/day of LNA services per resident. On 1/1/16, the census was 117 residents, and even with the addition of 16 hours of nurses functioning as LNAs, the total was 233.6. On 1/2/16, the census was 117, and the total LNA hours with other (nurses providing LNA services) was only 214.1. On 1/3/16, the census was 117, and the totaled LNA hours with other (Nurses) totaled 211.9 hours. On 1/4/16, the census was 117, and even with the addition of nurses providing care of 16 hours only totaled 195.5 hours. On 1/5/16, resident census was 117,	F9999			

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F9999	Continued From page 7 and total hours with nursing added was 216.7. On 1/10/16, the census was 116, and the LNA hours with the addition of 10 hours of nurses functioning as LNAs was 191.3. On 1/11/16, the census was 115, and the LNA hours were 227.9. On 1/20/16, the census was 112 residents, and the LNA hours with 4 hours of other (nurses) was 214.7. on 1/25/16, the census was 113, and the total LNA hours were 216.2. Per interview on 2/1/16 at 3:40 PM, the administrator confirmed that the days listed above for December 2015 and January of 2016 fell below the state requirement for staffing hours per resident to provide LNA care.	F9999			