



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

June 20, 2023

Mr. Chadd Viger, Manager
Grace House
35 Washington Street
Rutland, VT 05701-5029

Dear Mr. Viger:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **June 12, 2023**. 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

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0514	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/12/2023
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NAME OF PROVIDER OR SUPPLIER GRACE HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 35 WASHINGTON STREET RUTLAND, VT 05701
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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 001	Initial Comments An unannounced onsite re-licensure survey was conducted by the Division of Licensing and Protection on 6/12/23. The following regulatory violations were identified:	T 001		
T 127 SS=E	VII.7.2.b Nutrition and Food Services 7.2 Food Safety and Sanitation 7.2.b All perishable food and drink shall be labeled, dated and held at proper temperature. Hot foods shall be kept hot at 135 degrees F and cold foods shall be kept at 41 degrees F or cooler. This REQUIREMENT is not met as evidenced by: Based on observation and staff interviews there was a failure to ensure all perishable food and drinks were labeled and dated. Findings include: During a tour of the facility kitchen and food service areas commencing at 09:10 AM on 6/12/23 the following perishable food items were observed and confirmed by the house manager to be improperly stored: In the refrigerator, multiple items were not labeled as to when they were opened. These items include two gallons of milk, 2 half gallons of half and half, five packages of deli meat (Turkey, roast beef, ham), two packages of deli cheese, two 32 oz jars of mayonnaise, one 32 oz container of ricotta cheese, six 16 oz containers of salad dressing, one 8oz container of horseradish, one 8 oz container of cream cheese, one 5lb container of barbecue sauce, two 23oz containers of red hot sauce, one 12.6oz container of steak sauce, a 1qt container of orange juice,	T127	Recovery House provides food, but also allows clients to purchase and store food in the fridges. The following is a response to Deficiency T127: Recovery House will conduct retraining of staff related to food safety and proper labeling of food. Grace House staff will educate clients on labeling any food they bring into the building. Staff will also examine the fridge daily, discarding any expired food. Recovery House plans to conduct staff retraining by 7/15/2023 Recovery House will immediate dispose of the items identified in the survey. Grace House employees will audit the refrigerator and freezer weekly to ensure all expired foods are discarded. The manager of the house will be responsible for ensuring this task is done correctly.	7/15/2023
			Tag T127 accepted on 6/19/23 - C. Scott/S. Ross	

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

Chadd Viger

TITLE

Chief Executive Officer

(X6) DATE

6/9/

Division of Licensing and Protection

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T 127	Continued From page 1 one bowl of pre-made salad, and two 32oz containers of ketchup. In the freezer one 3 gallon container of ice cream, and one Ziploc bag containing waffles were noted to be opened without dates. This was confirmed by the house manager at time of finding.	T 127		
T 174 SS=F	IX.9.6.d 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 record review and staff interview there was a failure to provide documentation of fire drills conducted during the previous 12 months. Findings include: On 6/12/23 staff were asked to demonstrate via documentation that they were conducting fire drills on a quarterly basis and rotating times among morning, afternoon, evening, and night. Based on record review the TCR failed to demonstrate fire drills on a quarterly basis with rotating times. This was confirmed by the house manager on 6/12/23 at 11:32 AM.	T 174	Regarding Deficiency T174: Recovery House, when notified by DAIL's site surveyor about the elevated water temperatures, immediately corrected the hot water heater's temperature setting. Staff was further educated on the 120 degree Fahrenheit limit. Recovery House facilities manager will audit the water and heater setting monthly to ensure correct temperatures. The Grace House manager will ensure this is done a routinely.	6/12/2023
T 187 SS=F	IX.9.11.c Physical Plant 9.11 Disaster and Emergency Preparedness 9.11.c Each residence shall have in effect, and	T 187	Tag T127 accepted on 6/19/23 - C. Scott/S. Ross Recovery House has a Disaster Preparedness Plan, which includes fire drill protocols at each location (Grace House, Serenity House). Allthought fire drills had been conducted in the previous 12 months, some were missed. The following is response to Deficiency T187: Grace House will be retrained on the Disaster Preparedness Plan by 7/15/2023. A schedule of fire drills will be developed - to meet the requirment for drill frequency.	7/15/2023

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T 187	<p>Continued From page 2</p> <p>available to staff and residents, written copies of a plan for the protection of all persons in the event of fire and for the evacuation of the building when necessary. All staff shall be instructed periodically and kept informed of their duties under the plan. Fire drills shall be conducted on at least a quarterly basis and shall rotate times of day among morning, afternoon, evening, and night. The date and time of each drill and the names of participating staff members shall be documented.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and staff interview there was a failure to ensure water temperatures did not exceed 120 degrees Fahrenheit in resident areas. Findings include:</p> <p>Per observation on 6/12/23 at 9:30 AM water temperatures exceeded the recommended 120 degrees Fahrenheit in three resident areas. Upstairs female resident restroom water temperature was noted to be 133.2 degrees Fahrenheit, upstairs gentleman resident restroom water temperature was noted to be 132.6 degrees Fahrenheit, and downstairs resident restroom water temperature was noted to be 131.6 degrees Fahrenheit. This observation was confirmed by the house manager at the time of findings.</p> <p>Per interview with house manager on 6/12/23 at 9:45 AM, house manager stated " I thought water temperatures needed to be 125 degrees Fahrenheit or below, but I will have it fixed by the end of the day".</p>	T 187	<p>(continued) The Grace House manager will ensure quarterly fire/evacuation drills are being conducted.</p> <p>Tag T187 accepted on 6/19/23 - C. Scott/S. Ross</p>	