

## **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 <u>http://www.dail.vermont.gov</u> Survey and Certification Voice/TTY (802) 241-0480 To Report Adult Abuse: (800) 564-1612 Survey and Certification Fax (802) 241-0343 Survey and Certification Reporting Line: (888) 700-5330

July 16, 2021

Ruth Hogan, Manager Heaton Woods 10 Heaton Street Montpelier, VT 05602-2480

Dear Ms. Hogan:

The Division of Licensing and Protection completed a complaint investigation at your facility on **July 13**, **2021**. The purpose of the investigation was to determine if your facility was in compliance with Residential Care Home Licensing Regulations. There were no regulatory violations as a result of this investigation.

If you have any questions regarding this report, please feel free to contact this office at (802) 241-0480.

Sincerely,

Jamela McotaRN

Pamela Cota, RN Licensing Chief

## PRINTED: 07/16/2021 FORM APPROVED

AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED C 07/13/2021	
		0297				
IAME OF PF	ROVIDER OR SUPPLIER		DDRESS, CITY, STATE,	ZIP CODE		
IEATON V	VOODS		ON STREET ELIER, VT 05602			
(X4) ID PREFIX TAG	(EACH DEFICIENC	TATEMENT OF DEFICIENCIES CY MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH CORRECTIVE ACTION SHOULD BE COR		(X5) COMPLETI DATE	
R100	Initial Comments:		R100			
	was conducted on 7/ Licensing and Protect	site complaint investigation 13/2021 by the Division of ction. No regulatory violations result of this investigation.				
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