



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

September 12, 2024

Kathryn Andrews, Manager
Maplewood Recovery Residence
195 Stratton Road
Rutland, VT 05701

Dear Ms. Andrews:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **June 26, 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: 0614	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/26/2024
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NAME OF PROVIDER OR SUPPLIER MAPLEWOOD RECOVERY RESIDENCE	STREET ADDRESS, CITY, STATE, ZIP CODE 195 STRATTON ROAD 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 relicensure survey and complaint investigation was conducted by the Division of Licensing and Protection on 6/26/24. Regulatory deficiencies were identified as a result with the relicensure survey. Findings include:	T 001		
T 130 SS=F	<p>VII.7.2.e Nutrition and Food Services</p> <p>7.2 Food Safety and Sanitation</p> <p>7.2.e The use of outdated, unlabeled or damaged canned goods is prohibited and such goods shall not be maintained on the premises.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the TCR failed to ensure pantry food items and produce stored in the refrigerator were removed from these areas prior to expiration.</p> <p>Per observation on 6/26/24 at 9:40 AM, the refrigerator was observed to store fresh produce, upon opening the drawer in which the foods were stored, a rancid odor was detected, an 8 ounce bag of Spinach with a use by date of 5/31/24, a 20 ounce bag of celery with a use by date of 5/29/24, a bag of carrots and a cucumber wrapped in saran wrap appearing to be spoiled.</p> <p>Within in the cabinets, 3 canned goods exceeding their use by dates [15 ounce can of sliced beets, 12/2022, 19 ounce can of Chicken and Rice soup 2/2/24, (2) 23 ounce containers of butternut squash soup, 12/20/23], 5 varying flavors of 3 ounces boxes of jello, expired on 5/22/24, 3/27/24, 2/18/23, 3/21/23, 7/1/23, and a 7 ounce box of muffin mix expired on 11/29/23.</p>	T 130		

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

X Jamie Gochin

Maplewood Manager

8/2/24

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0614	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 06/26/2024
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T 130	Continued From page 1 The facility policy titled Kitchen and Food Safety under section 2.) Food Safety and Sanitation, c.) All food will be labeled and dated.. If food is spoiled before that time, it will be disposed of. " Per interview on 6/26/24 at 10:40 AM, the Residential Manager confirmed the out of dates food items observed and confirmed the policy in place for for and sanitation. The deficient practice is a potential for more than minimal harm to facility residents, due to the potential of food borne illness.	T 130		

X Jamie Goshin

Maplewood Manager

8/2/24

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T 130 SS=F	<p>VII.7.2.e Nutrition and Food Services 7.2 Food Safety and Sanitation 7.2.e The use of outdated, unlabeled or damaged canned goods is prohibited and such goods shall not be maintained on the premises.</p> <p><i>This REQUIREMENT is not met as evidenced by:</i></p> <p><i>Based on observation and staff interview, the TCR failed to ensure pantry food items and produce stored in the refrigerator were removed from these areas prior to expiration. Per observation on 6/26/24 at 9:40 AM, the refrigerator was observed to store fresh produce, upon opening the drawer in which the foods were stored, a rancid odor was detected, an 8 ounce bag of Spinach with a use by date of 5/31/24, a 20 ounce bag of celery with a use by date of 5/29/24, a bag of carrots and a cucumber wrapped in saran wrap appearing to be spoiled. Within in the cabinets, 3 canned goods exceeding their use by dates [15 ounce can of sliced beets, 12/2022, 19 ounce can of Chicken and Rice soup 2/2/24, (2) 23 ounce containers of butternut squash soup, 12/20/23], 5 varying flavors of 3 ounces boxes of jello, expired on 5/22/24, 3/27/24, 2/18/23, 3/21/23, 7/1/23, and a 7 ounce box of muffin mix expired on 11/29/23.</i></p> <p><i>The facility policy titled Kitchen and Food Safety under section 2.) Food Safety and Sanitation, c.) All food will be labeled and dated.. If food is</i></p>	T 130	<p>All pantries were immediately cleaned out and checked for expired food.</p> <p>Current Procedures outline Third Shift- Shift Duties to include going through all food, assessing, reviewing dates, and disposing of necessary food. This procedure was reviewed with Third Shift Staff on 6/27/24</p> <p>Maplewood Manager to provide periodic reviews of pantries and refrigerator</p> <p>All Staff will complete Additional Food Safety Training by 8/12/24.</p> <p style="color: blue;">T130 Accepted 8/13/24 Jenielle Shea, RN</p>	<p>6/26/24</p> <p>6/27/24</p> <p>Ongoing job expectation review</p> <p>8/12/24 All Staff will have completed.</p>

Jenielle Shea Maplewood Manager 8/13/24 Page 1 of 2

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X Amia Heon Maplewood Manager 8/2/24