



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
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Survey and Certification Voice/TTY (802) 241-0480
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Survey and Certification Reporting Line: (888) 700-5330
To Report Adult Abuse: (800) 564-1612

October 20, 2023

Ms. Riley Browder
Pleasant Street
59 South Pleasant Street
Randolph, VT 05060

Dear Ms. Browder:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **August 29, 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 black ink, appearing to read "Carolyn Scott".

Carolyn Scott, LMHC, M.S.
State long Term Care Manager

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0671	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/29/2023
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NAME OF PROVIDER OR SUPPLIER PLEASANT STREET	STREET ADDRESS, CITY, STATE, ZIP CODE 59 SOUTH PLEASANT STREET RANDOLPH, VT 05060
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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: An unannounced on-site re-licensure survey was conducted along with a Follow-up Survey from a complaint investigation conducted on 7/20/23. The RCH was found to be back in compliance with regulations related to the 7/20/23 on-site. The following regulatory violation was identified as a result of the re-licensure survey. Findings include:	R100		
R302 SS=F	<p>IX. PHYSICAL PLANT</p> <p>9.11 Disaster and Emergency Preparedness</p> <p>9.11.c Each home shall have in effect, and 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 record review and staff interview the Residential Care Home (RCH) failed to ensure that fire drills were conducted during the previous 12 months. Findings include: On 8/29/23 the Manager was asked to demonstrate via documentation that they had conducted fire drills on a quarterly basis and</p>	R302	<p>As of 9/8/23 all plans were reviewed and updated for the protection of all persons in the event of a fire and for the evacuation of the building when necessary. The Fire Plan was updated 9/11/23 (See attached). Staff were instructed on the personalized plans of protection pertaining to each of the 3 residents in the event of an emergency evacuation. (See attached). Staff were instructed on the plan for the evacuation of the building when necessary. By 9/18/23 all Pleasant Street staff will review and sign off on the updated emergency plans and procedures. The personalized plans of protection and the updated Fire Plan are posted in a visible central location. By 9/15/23 all evacuation signs will be updated and posted at all exits and in a visible central location. All staff will be instructed quarterly and kept informed of their duties quarterly during team meetings and for all new hires.</p> <p>Tag 302 Accepted by Carol Scott-LTCM 10-20-23</p> <p>Fire Drills were conducted on the afternoon of 9/5/23 and the morning of 9/8/23. Date, time, and participating staff members were documented on the Fire Drill record. (Please see File Drill records attached). One more fire drill will be completed by 9/30/23 to assure all staff are trained and have participated in a fire drill and then conduct fire drills monthly moving forward. A Fire Drill Log has been developed to monitor the fire drills and to assure rotating times of day. (Please see sample File Drill Log attached). The Fire Drill Record has been updated to include signature of the Residential Coordinator and Program Director or Associate Program Director. Associate Program Director will monitor the Fire Drill Log to assure standards are being met. (Please see sample File Drill Record attached).</p> <p>(Continued next page)</p>	

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Carol Scott-LTCM UVS Randolph Program Director 9/13/23

Division of Licensing and Protection

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R302	Continued From page 1 rotating times among morning, afternoon, evening, and night. Based on record review the facility failed to provide evidence of quarterly fire drills, noting only one fire drill was conducted over the last 11 months on 6/23/23 at 10:30 AM. Prior to this drill, only 2 fire drills were conducted in 2022. Residents at this RCH are all disabled and are totally dependent on staff for assistance with evacuations of the building when necessary. The RCH Manager confirmed on the afternoon of 8/29/23 fire drills have not been conducted as required.	R302	The Randolph Village Fire Chief, (<i>Name redacted by DLP</i>), is scheduled for a site visit 9/14/2023 at 11:00 am to review Pleasant Street's fire and emergency evacuation plans. Tag 302 Accepted by Carol Scott-LTCM 10-20-23	