

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

January 31, 2020

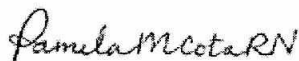
Ms. Jessica Jennings, Manager  
The Residence At Quarry Hill  
465 Quarry Hill Road  
South Burlington, VT 05403

Dear Ms. Jennings:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **January 8, 2020**. 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

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  1012	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  C 01/08/2020
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NAME OF PROVIDER OR SUPPLIER  
**THE RESIDENCE AT QUARRY HILL**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**465 QUARRY HILL ROAD  
SOUTH BURLINGTON, VT 05403**

(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:

R100

An unannounced on site investigation of multiple complaints was conducted on 01/07 through 01/08/20 by the Division of Licensing and Protection. The following violations were identified:

R224 VI. RESIDENTS' RIGHTS  
SS=D

R224

6.12 Residents shall be free from mental, verbal or physical abuse, neglect, and exploitation. Residents shall also be free from restraints as described in Section 5.14.

This REQUIREMENT is not met as evidenced by:  
Based on record review and staff interview the facility failed to ensure 1 resident was free from exploitation of a credit card (Resident #4). The findings include the following:

Per medical record review, Resident #4 resides on the Reflection Unit, a secure area designed to care for residents with memory impairment. Per interview with the Reflection Engagement Director on 01/07/20 at approximately 10 AM, s/he confirms on 12/06/19 a call was received from Resident #4's Power of Attorney (POA). The POA informed the Director that Resident #4 had a bill for credit use with fraudulent charges on it. The family deactivated the credit card and the facility began their internal investigation. The South Burlington Police were notified who also opened an investigation. Both investigations confirmed that Employee #1 had misappropriated personal property (use of a credit card without permission from the resident/family), of Resident

The submission of this plan of correction does not imply agreement with the existence of a deficiency. It is submitted in the spirit of cooperation, to demonstrate our commitment to continued improvement in the quality of the lives of our residents.

R224 The Associate involved in the mis-Appropriation of personal property of resident #4 was terminated per community policy regarding Resident Rights.

In order to assure that the deficient practice does not recur, all associates received in-servicing on Resident Rights/Elder Abuse Neglect and Exploitation on 12/13/19.

Division of Licensing and Protection

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

STATE FORM

TITLE

(X6) DATE

CMU711

If continuation sheet 1 of 4

R224-R266 POC: accepted 1/30/20 mbeaman RL/PM

Division of Licensing and Protection

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NAME OF PROVIDER OR SUPPLIER  THE RESIDENCE AT QUARRY HILL		STREET ADDRESS, CITY, STATE, ZIP CODE 465 QUARRY HILL ROAD SOUTH BURLINGTON, VT 05403		
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R224	Continued From page 1  #4.  Per review of the termination report dated 12/10/19, the employee was notified by the Director of Engagement, that the facility was informed of misappropriation of property of Resident #4. The facility's internal investigation has found that s/he engaged in conduct of exploitation of a vulnerable adult. The facility associate handbook identifies the conduct as a violation of resident rights and due to the egregious behavior/conduct, termination of employment was immediate.  Interview with the resident on 01/08/20 at approximately 3:30 PM, confirms that s/he has no recollection of any theft of a credit card and denies having a credit card while s/he has been at the Residence of Quarry Hill.  Per review of Employee #1's file, hired 08/15/18, identifies that facility protocol for employment was followed, two reference checks were completed with positive results, all criminal and child/adult registries identified no records and a performance appraisal was conducted on 02/22/19 that evidenced scores of 3 out of 5, demonstrating satisfactory performance. The employee had also completed all mandatory education at the time of hire.	R224	The corrective actions will be  Monitored By the Executive Director to ensure that the deficient practice does not recur. The ED and or her designee will perform Resident's Rights audits randomly.  The corrective actions will be Completed by February 7, 2020.	
R266 SS=E	IX. PHYSICAL PLANT  9.1 Environment  9.1.a The home must provide and maintain a safe, functional, sanitary, homelike and comfortable environment.	R266		

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R266	<p>Continued From page 2</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review the facility failed to maintain a safe environment of 2 residential and 3 commercial driers that were found to be heavily caked with lint. The findings are as follows:</p> <p>During a tour of the Reflection Unit in the presence of a Personal Care Attendant (PCA) on 01/07/20 at approximately 6:30 AM, two domestic driers on the Reflections Unit were found to have lint traps heavily filled with lint. The PCA confirmed the findings and shared that during the overnight shift staff are responsible for washing and drying resident clothing and maintaining the lint traps.</p> <p>Per tour of the basement laundry area in the presence of the Director of Maintenance on 01/07/20 at 8:15 AM, the three industrial driers were found with lint traps that are heavily caked with lint/dust. Review of the dryer lint clean-out logs of the laundry area identify inconsistent removal of lint. There were no logs in the Reflection Unit. The Director confirms that policy identifies that staff are instructed to clean out the lint traps every shift by the staff member operating the equipment. The laundry employee is present and stated ["I did not clean out the trap at the end of my shift yesterday"].</p> <p>Per review of the policy titled Dryer Vent Cleaning and Maintenance, identifies that commercial dryer lint traps should be cleaned after every third load and residential dryer lint traps should be cleaned after every load even if there is only a small amount of lint on the screen.</p>	R266	<p>R266 The lint traps in the Reflections Community as well as the laundry room Were cleaned on January 8, 2020.</p> <p>In order to assure that the deficient Practice does not recur, all Associates who operate the driers will receive education regarding the community policy for Dryer Vent Cleaning by February 7, 2020. The corrective actions will be Monitored by the Maintenance Director and or her designee to Ensure the deficient practice Does not recur. Weekly Audits will be performed to Assure lint traps are cleaned Per policy.</p> <p>The corrective action will be Completed by February 7, 2020.</p>	
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