



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

April 29, 2019

Mr. Alexander Smith, Manager
Robinson House
89 Main Street
Middlebury, VT 05753

Dear Mr. Smith:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **March 21, 2019**. 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".

Pamela M. Cota, RN
Licensing Chief

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 551	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/21/2019
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NAME OF PROVIDER OR SUPPLIER ROBINSON HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 89 MAIN STREET MIDDLEBURY, VT 05753
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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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T 001	Initial Comments	T 001		
	<p>An unannounced on-site re-licensure survey was conducted by the Division of Licensing and Protection on 3/18/19 and completed by phone on 3/21/19 to determine compliance with the Licensing and Operating Regulations for Therapeutic Community Residences (TCR). The following regulatory violations were identified:</p>			
T 044 SS=E	V.5.8.g.1.2.3.4.5.6. Resident Care and Services	T 044		
	<p>5.8 Medication Management</p> <p>5.8.g Residences must establish procedures for documentation sufficient to indicate to the health care provider, registered nurse, certified manager or representatives of the licensing agency that the medication regimen as ordered is appropriate and effective. At a minimum, this shall include:</p> <ol style="list-style-type: none"> (1) Documentation that medications were administered as ordered; (2) All instances of refusal of medications, including the reason why and the actions taken by the residence; (3) All PRN medications administered, including the date, time, reason for giving the medication, and the effect; (4) A current list of who is administering medications to residents, including staff to whom a nurse has delegated administration; (5) For residents receiving psychoactive medications, a record of monitoring for side 			

Division of Licensing and Protection

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

TITLE

(X6) DATE

STATE FORM

6899

WMPM11

If continuation sheet 1 of 3

[Handwritten Signature] Director of Commission of Rehabilitation Services and Treatment 4/17/19

Division of Licensing and Protection

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T 044 Continued From page 1 T 044
effects; and
(6) All incidents of medication errors.

This REQUIREMENT is not met as evidenced by:
Based on staff interview and record review, there was a lack of evidence for monitoring residents for side effects of psychoactive medications for 2 of 7 residents. (Residents # 1 & 2) Findings include:

Per record review, Resident #1 is prescribed Risperdal 1 mg and Seroquel 400 mg orally, both administered at bedtime and Resident #2 is prescribed Zyprexa 20 mg also administered at bedtime. These specific medications are classified as antipsychotic and side effects may accompany the use of such medication. The TCR failed to demonstrate a process for monitoring the side effects associated with the antipsychotic medications.

*4/25/19
T-044
POC
ACCEPTED
J. J. [Signature]*

T 054 V.5.9.d Resident Care and Services T 054
SS=D
5.9 Staff Services

5.9.d The licensee shall not have on staff a person who has had a charge of abuse, neglect or exploitation substantiated against him or her, as defined in 33 V.S.A. Chapters 49 and 69, or one who has been convicted of an offense for actions related to bodily injury, theft or misuse of funds or property, or other crimes inimical to the public welfare, in any jurisdiction whether within or outside of the State of Vermont. This provision shall apply to the manager of the residence as

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T 054	<p>Continued From page 2</p> <p>well, regardless of whether the manager is the licensee or not. The licensee shall take all reasonable steps to comply with this requirement, including, but not limited to, obtaining and checking personal and work references and contacting the Division of Licensing and Protection and the Department for Children and Families in accordance with 33 V.S.A. §6911 and 33 V.S.A. §4919 to see if prospective employees are on the abuse registry or have a record of convictions.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the TCR failed to take all reasonable steps to comply with the requirements related to the employment of an individual who has been convicted of an offense for one out of four staff records reviewed. Findings include:</p> <p>Per review of personnel files, one employee hired in 2019 had a positive criminal background check for one misdemeanor in 1996 and larceny 1991. There was no evidence that the positive background check had been considered and reviewed at the time of the employee's hiring. The House Manager and representative from the Human Resource confirmed on the afternoon of 3/18/19, the Agency who provides the oversight of the TCR did not have evidence of concern, or a documented review process to determine if any action needs to be taken during the hiring process in consideration of the employee's past criminal record and potential impact for the safety and welfare of the resident residing in the TCR.</p>	T 054	<p><i>POC Accepted</i> <i>T-054</i> <i>De. Let. L. Tosh, RN</i> <i>4/25/19</i></p>	

Robinson House TCR License Plan for Correction

Resident Care and Services: Medication Management: "The TCR failed to demonstrate a process for monitoring the side effects associated with the antipsychotic medications."

Correction Plan:

All residents of Robinson House who take psychotropic medications work with members of the CSAC psychiatric team who routinely monitor the medications regarding efficacy, dosages, and side effects. While side effect monitoring is already viewed as a primary area of focus for any medication monitoring session, the team is looking to increase systematic use of the AIMS with the hope that the new EMR system CSAC is implementing can have the AIMS systematically populated into the med check documentation practices. The findings of the licensing review have been brought to the attention of the entire psychiatric team as a reminder to speak to side effect monitoring in their documentation if the AIMS tools is not being used.

Specific steps:

- Notification of psychiatric team at CSAC of license review findings as a reminder to assure sufficient documentation of ongoing practices of side effect monitoring – **Completed 4/9/19.**
- Development of a plan to implement systematic use of the AIMS side effect monitoring protocol with the implementation of new EMR system – scheduled to "go live" Nov. 2019. The intended practice standard will be to routinely conduct the AIMS at least every 6 months, and more frequently when indicated. – **Plan to include AIMS Into EMR development completed 4/12/19.**
- Robinson House RN will periodically review records to monitor documentation of side effects.

T-044
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Accepted
Q. Jett
4/25/19

Resident Care and Services: Staff Services - "...the agency who provides the oversight of the TCR did not have evidence of concern, or a documented review process to determine if any action needs to be taken during the hiring process in consideration of the employees past criminal record an potential impact for the safety and welfare of the resident residing in the TCR."

Correction plan:

CSAC conducts background checks on all employment applicants. HR and residential management did in fact weigh out the background check finding in question and determined it did not pose risk to residents, but did not sufficiently document the review in the HR file. All involved have agreed to a process to document the review of background check findings in HR records if it is determined ok to proceed with hiring and continued employment.

Specific steps:

- Document review of concerning background findings for any Robinson house employee - **review of this finding w/lt residential management and HR with conclusion that any decision hire**

T-054
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Q. Jett
4/25/19

employee with any criminal history must be documented in HR file re: process and findings of review was completed as of 4/4/19.

We hope these steps sufficiently meet requirements going forward, but please contact us if further information is needed.



Alexander Smith, MA

Director of Community Rehabilitation and Treatment Services

Counseling Service of Addison County