

Division of Licensing and Protection

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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

October 21, 2019

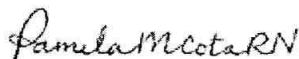
Ms. Amy Walker, Administrator
Rutland Healthcare And Rehabilitation Center
46 Nichols Street
Rutland, VT 05701-3275

Dear Ms. Walker:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **October 9, 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,



Pamela M. Cota, RN
Licensing Chief



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/17/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 475039	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/09/2019
NAME OF PROVIDER OR SUPPLIER RUTLAND HEALTHCARE AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 46 NICHOLS STREET RUTLAND, VT 05701	
(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) COMPLETION DATE			

F 000 INITIAL COMMENTS

An unannounced on site investigation of 3 facility reported incidents was conducted by the Division of Licensing and Protection on 9/30/2019, and the investigation was completed on 10/9/2019. The following regulatory finding was identified as a result of this investigation.

F 557 Respect, Dignity/Right to have Prsnl Property
SS=D CFR(s): 483.10(e)(2)

§483.10(e) Respect and Dignity.
The resident has a right to be treated with respect and dignity, including:

§483.10(e)(2) The right to retain and use personal possessions, including furnishings, and clothing, as space permits, unless to do so would infringe upon the rights or health and safety of other residents.

This REQUIREMENT is not met as evidenced by:

Based on staff interview and record review, the facility failed to ensure that one (1) of three (3) residents in the applicable sample (Resident #1) was treated with dignity and respect. Findings include:

Per record review, on 5/13/2019 Resident #1 was exhibiting aggressive behaviors. A Licensed Nursing Assistant, (LNA) attempted to assist the resident with getting ready for bed. When other staff members entered the resident's room, the LNA was witnessed leaning over the resident with his/her face close to the resident's face. The resident swore at the LNA calling him/her a bitch. The Licensed Practical Nurse, (LPN) who was present instructed the LNA to leave the room. As the LNA was leaving the room witnesses heard

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Rutland Healthcare & Rehab provides this plan of correction without admitting or denying the validity or existence of the alleged deficiencies. The Plan of Correction is prepared and executed solely because it is required by federal and state law.

F 557

E-Tag 557- Resident #1 was immediately comforted by staff, there was no negative impact to the resident. Nursing and Social Services monitored resident the days following the alleged incident without ill findings.

Residents/Patients who reside at the center have the potential to be affected.

The current Respect & Dignity Policies and Procedures will be re-addressed during October's direct care staff meeting during the week of 10/21/2019. The center's Nurse Educator consistently educates staff about resident rights to include abuse, neglect, respect and dignity by holding in-services and monitoring each staff member's quarterly education modules and will continue to do so.

Resident Rights pertaining to dignity will be reviewed with the residents at next the resident council meeting scheduled for 10/25/19 at 11:30am.

Administrator and/or designee will monitor staff interactions with residents/patients to include the three shifts x4 weeks then monthly x 3, results will be reviewed at QAPI for evaluation and further recommendations.

Compliance date of 11/1/19.

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

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 15 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

F557 POC accepted 10/21/19 SFrameau RN/PMU

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F 557 Continued From page 1

him/her make an inappropriate statement to, or in the presence of Resident #1.

Per review of a witness statement obtained on 5/13/2019, the LPN reported that LNA stated "Well at least I'm not the one locked up in a nut house". On 10/9/2019 at 10:30 AM during an interview with the LPN, confirmation was made that the LNA stated an inappropriate comment about Resident #1 in the resident's presence.

Per review of the LNA's statement given on 5/13/2019, the LNA reported that s/he "said under my breath we aren't in a nut house". During an interview with the LNA on 9/30/2019 at approximately 5:45 PM, the LNA confirmed that s/he did in fact make an inappropriate statement in the presence of Resident #1.

F 557