
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

January 17, 2019

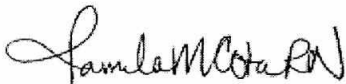
Mr. Eric Fritz, Manager
Woodstock Terrace
456 Woodstock Road
Woodstock, VT 05091-9759

Dear Mr. Fritz:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **December 27, 2018**. 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: 1005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/27/2018
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NAME OF PROVIDER OR SUPPLIER WOODSTOCK TERRACE	STREET ADDRESS, CITY, STATE, ZIP CODE 456 WOODSTOCK ROAD WOODSTOCK, VT 05091
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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
R100	Initial Comments: The Division of Licensing and Protection conducted an unannounced, onsite complaint investigation on 12/26/2018 which was concluded on 12/27/2018. The following regulatory violations were identified.	R100		
R202 SS=D	<p>V. RESIDENT CARE AND HOME SERVICES</p> <p>5.16 Transportation</p> <p>5.16.b Transportation for medical services and local community functions shall be provided up to twenty (20) miles, round-trip without charge, not to exceed four (4) round-trips per month. Residents may be charged, at a reasonable rate, for those miles in excess of twenty (20) miles round-trip and for any or all mileage for transportation not prescribed herein.</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview and documentation review, the residence failed to ensure that all residents received transportation to community outings as required by the Vermont Residential Care Home Regulations for one applicable resident (Resident #1). Findings include:</p> <p>The residence failed to provide transportation to Resident #1 up to 20 miles round-trip, not to exceed four trips in a month. Resident #1 provided documentation during an interview on 12/26/2018 that s/he had been transported to a requested community outing only twice in the last four months by residence staff, and had not requested transportation to other community functions. Per interview on 12/26/2018, the residence Director confirmed s/he was aware of</p>	R202	<p>R 202</p> <p>Resident #1 is now being provided transportation to her requested community outings according to regulation 5.16. The Residence will also provide transportation to community outings for other residents as requested according to regulation 5.16.</p> <p>The Chief Operating Officer shall conduct random interviews with residents to assure that this standard is being met. The Chief Operating Officer will report the results of these interviews to the Quality Assurance and Improvement Committee on a quarterly basis.</p>	1/11/19

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

EXECUTIVE DIRECTOR

(X6) DATE

1/11/19

STATE FORM

8899

9PG211

If continuation sheet 1 of 4

R202 - R220 POC accepted
1/16/19 S. Sherbrook, RN

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 1005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/27/2018
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R202 Continued From page 1
Resident #1's transportation request, but had to balance, "other residents' needs, scheduling and staffing" along with Resident #1's request. The Director confirmed at 1:30 PM on 12/26/2018 that Resident #1 had not been provided the transportation as requested.

R202

R213 VI. RESIDENTS' RIGHTS
SS=D
6.1 Every resident shall be treated with consideration, respect and full recognition of the resident's dignity, individuality, and privacy. A home may not ask a resident to waive the resident's rights.

This REQUIREMENT is not met as evidenced by:
Based on interview, the residence failed to ensure that Resident #1 was treated with consideration and respect. Findings include:

During an interview at 11:45 AM on 12/26/2018, Resident #1 reported to the Nurse Surveyor that s/he had brought their concerns regarding transportation to the residence Director on multiple occasions. Per Resident #1, the Director had responded, "No" to Resident #1's request before s/he was able to fully respond to questions. Resident #1 attempted to discuss the issue at a later date, and the Director stated s/he was, "working on it" but did not provide further explanation or details in response to Resident #1's request. During an interview, Resident #1 stated that the Director's response, "kind of made me feel upset and mad" and that the Director, "wasn't taking my requests seriously". Resident #1's perception of the conversation during which

R213

R 213
Resident #1 has been informed that her request for transportation to community outings has been granted and will continue to be granted for as long as she wants to attend. The Director has offered his apologies for any misunderstanding that has occurred and has reassured Resident # 1 that he fully respects her dignity and takes all of her requests seriously. Any requests by other residents will be considered in a respectful and dignified manner.

The Chief Operating Officer shall conduct random interviews with residents to assure that this standard is being met. The Chief Operating Officer will report the results of these interviews to the Quality Assurance and Improvement Committee on a quarterly basis.

1/11/19

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R213 Continued From page 2
s/he requested transportation was discussed with the Director at 11:45 AM on 12/26/2018.

R213

R220 VI. RESIDENTS' RIGHTS
SS=D

R220

6.8 A resident may complain or voice a grievance without interference, coercion or reprisal. Each home shall establish a written grievance procedure for resolving residents' concerns or complaints that is explained to residents at the time of admission. The grievance procedure shall include at a minimum, time frames, a process for responding to residents in writing, and a method by which each resident filing a complaint will be made aware of the Office of the Long Term Care Ombudsman and Vermont Protection and Advocacy as an alternative or in addition to the home's grievance mechanism.

This REQUIREMENT is not met as evidenced by:
Based on staff interview and documentation review, the residence failed to ensure that the Grievance procedure contained all required elements to facilitate the timely resolution of residents' complaints. Findings include:

At the time of the investigation, the residence's Complaint and Compliment Procedure (last revised 11/2013) did not include all required minimum elements. The procedure lacked an identified timeframe for which a resident could expect receive a response to their complaint after it has been submitted. The Director confirmed the Complaint and Compliment Procedure did not include a response timeframe at 1:30 PM on

R 220
The complaint procedure has been modified to require a response to any complaint by the Executive Director or his designee within 72 hours.

The Chief Operating Officer shall conduct random interviews with residents to assure that this standard is being met. The Chief Operating Officer will report the results of these interviews to the Quality Assurance and Improvement Committee on a quarterly basis.

1/11/19

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R220	Continued From page 3 12/26/2018.	R220		
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