



November 18, 2016

Ms. Donna Jerry
Senior Health Policy Analyst
Green Mountain Care Board
89 Main Street
Montpelier, VT 05602

RE: Docket No. GMCB-024-15con, Proposed Renovation of Skilled Nursing Facility and Addition of Six Rooms, Project Cost: \$8,170,130

Dear Ms. Jerry:

Please find enclosed responses to the additional answers to your letter of November 4, 2016.

1. From the CMS' Nursing Home Compare website, provide copies of the current information contained in the tabs titled, General Information, Health and Fire Safety, Staffing including overall staffing and overall RN staffing, Quality Measures, and Penalties.

Please see the attached copies as requested, pages 1 – 12 Attachment A.

2. Relative to HRAP Standard 1.6, provide specific detail of how Wake Robin collects and monitors data relating to health care quality and outcomes.

Wake Robin uses data that is submitted to CMS using our MDS submissions and is updated monthly and reported back to us using multiple sources of data. LTC Trend Trackersm is a web-based tool that enables Wake Robin to access key clinical information. This data allows Wake Robin to benchmark personal metrics to those of our peers and to use the data for ongoing quality improvement efforts.

The Abaqis software program enables us to use the facility specific data for the following tasks: identification of the root cause of issues, assist the facility in preparing for surveys and quality monitoring, is a major component of the organizations' foundation for QAPI (Quality Assurance Performance Improvement) actions, tracks and trends hospital readmissions, measures and benchmarks customer satisfaction. This software enables the facility to do deeper analysis of clinical trends and specific auditing of clinical services provided for individual residents or groups.

In addition, the facility has task specific groups that meet regularly to assess specific clinical areas such as weekly skin/wound rounds, weekly falls review, monthly reviews of pharmacy audits and recommendations to list a few.



3. Relative to HRAP Standard 1.7, provide specific detail of how Wake Robin implements evidence-based practices and how practitioners are made aware of evidence-based practice guidelines and how such guidelines are incorporated into decision making.

Wake Robin's health services department participates in many outside initiatives such as Advancing Excellence, OASIS dementia culture change practices, MDRO (Multi drug resistant organism) collaborative that works with the Vermont Department of Health and area hospitals and nursing homes to improve the communication between receiving facilities for residents with potentially contagious infections. This group also collaborates with the infection control practitioners from the hospitals and Health Department to implement best practice approaches for infection control, environmental modifications and environmental approaches to cleaning, care of laundry, precaution techniques etc. The Director of Nursing and the Nurse Educator/Infection Control Nurse work directly with the facility staff in education and updates of new recommendations and care protocols.

The Medicare Quality Innovation Network – Quality Improvement Organization contractor for CT, ME, MA, NH, RI and VT otherwise known as the QIO (Quality Improvement Organization) is also used as a resource and provides the facility with real time ideas, suggestions, protocols and research data for clinical changes. This information is provided through the website, emails, webinars, and conference calls with regional facilities discussing best practices. The consulting QIO Nurse maintains great contact with the DNS of our facility to provide a resource for clinical focus areas. www.HealthCareforNewEngland.org

Large systematic changes in protocols or care delivery methods are reviewed with our Medical Director and any revisions, recommendations are included. Wake Robin has two primary physicians who see the majority of the residents in the health center and they work very collaboratively with the nursing staff to individualize the care being provided. These two physicians also are informed of any new changes and their input is requested. Supporting literature and information is always available. The physicians (2 – 3 currently), for the remaining four residents who do not receive care from the two physicians mentioned above, are informed by nursing staff of any appropriate protocols or care practices in effect in the facility and discussion between nursing and the doctor takes place prior to orders being requested.

The facility is participating in and is in process of implementing the INTERACT system developed by the University of Florida. INTERACT ("Interventions to Reduce Acute Care Transfers") program is intended to provide best practice recommendations and tools for nursing staff with the goal of decreasing/preventing unnecessary resident trips to the acute care setting.

Implementation of systems changes within the clinical area are done using the Quality Assurance Performance Improvement team and/ or smaller focused task groups. Root cause analysis and changes to systems are systematically implemented with information sharing, education and ongoing assessment of results. The formal CQI/QAPI team reviews all studies and data being tracked on at least a quarterly basis.

Sincerely,



Patrick McKee

CEO Wake Robin Corp.

Medicare.gov | Nursing Home Compare

The Official U.S. Government Site for Medicare

General information

WAKE ROBIN-LINDEN NURSING HOME

Overall rating ⓘ: *5 out of 5 stars*
Much Above Average

200 WAKE ROBIN DRIVE
 SHELBURNE, VT 05482
 (802) 264-5100

Distance ⓘ: 2.8 miles



Nursing home information

33 certified beds ⓘ

Participates in ⓘ:
 Medicare

Ownership ⓘ: Non profit -
 Corporation

Automatic sprinkler
 systems ⓘ in all required
 areas: Yes

Within a Continuing Care
 Retirement Community

(CCRC) ⓘ (CCRC)

Not in a hospital ⓘ

Has a Resident and Family
 Council ⓘ

Star rating categories

Health inspection ⓘ

5 out of 5 stars
Much Above Average

Staffing ⓘ

Not Available²

Quality measures ⓘ

4 out of 5 stars
Above Average

Ownership information

Ownership ⓘ: Non profit - Corporation

Legal business name: WAKE ROBIN CORPORATION

[Get more ownership information](#)

Health & fire safety inspections

| | |
|--|--|
| <p>WAKE ROBIN-LINDEN NURSING HOME</p> <p>Overall rating ⓘ: <i>5 out of 5 stars</i> Much Above Average</p> <p>200 WAKE ROBIN DRIVE SHELBURNE, VT 05482 (802) 264-5100</p> <p>Distance ⓘ: 2.8 miles</p> | <p>Nursing home information</p> <p>33 certified beds ⓘ</p> <p>Participates in ⓘ: Medicare</p> |
|--|--|

Health inspection ⓘ

5 out of 5 stars
Much Above Average

▼ **Health inspection summary**

| | |
|--|---|
| Date of standard health inspection: | 06/16/2015 View Full Report |
| Date(s) of complaint inspection(s) between 10/1/2015 - 9/30/2016: | No Complaint Inspections |
| Total number of health deficiencies: | 0 |
| Average number of health deficiencies in Vermont: | 4.4 |
| Average number of health deficiencies in the United States: | 7.1 |
| View all health inspections | |

▼ **Mistreatment: 0 deficiencies found**

No Mistreatment deficiencies were found during this inspection period.

▼ **Quality Care: 0 deficiencies found**

No Quality Care deficiencies were found during this inspection period.

▼ **Resident Assessment: 0 deficiencies found**

No Resident Assessment deficiencies were found during this inspection period.

▼ **Resident Rights: 0 deficiencies found**

No Resident Rights deficiencies were found during this inspection period.

▼ **Nutrition and Dietary: 0 deficiencies found**

No Nutrition and Dietary deficiencies were found during this inspection period.

▼ **Pharmacy Services: 0 deficiencies found**

No Pharmacy Services deficiencies were found during this inspection period.

▼ **Environmental: 0 deficiencies found**

No Environmental deficiencies were found during this inspection period.

▼ **Administration: 0 deficiencies found**

No Administration deficiencies were found during this inspection period.

▼ **Fire safety summary**

| | |
|---|----------|
| <p>Total number of Fire Safety Deficiencies for this nursing home:</p> | <p>0</p> |
|---|----------|

| | |
|---|-----|
| Average number of Fire Safety Deficiencies in Vermont : | 0.2 |
| Average number of Fire Safety Deficiencies in the United States: | 3.4 |
| Range of Fire Safety Deficiencies in Vermont : | 0-2 |
| View All Fire Safety Inspections | |

▼ **Building Construction: 0 deficiencies found**

No Building Construction deficiencies were found during this inspection period.

▼ **Interior Finish: 0 deficiencies found**

No Interior Finish deficiencies were found during this inspection period.

▼ **Corridor Walls and Doors: 0 deficiencies found**

No Corridor Walls and Doors deficiencies were found during this inspection period.

▼ **Vertical Openings: 0 deficiencies found**

No Vertical Openings deficiencies were found during this inspection period.

▼ **Smoke Compartmentation and Control: 0 deficiencies found**

No Smoke Compartmentation and Control deficiencies were found during this inspection period.

▼ **Hazardous Area: 0 deficiencies found**

No Hazardous Area deficiencies were found during this inspection period.

▼ **Exit and Exit Access: 0 deficiencies found**

No Exit and Exit Access deficiencies were found during this inspection period.

▼ **Exit and Egress: 0 deficiencies found**

No Exit and Egress deficiencies were found during this inspection period.

▼ **Illumination and Emergency Power: 0 deficiencies found**

No Illumination and Emergency Power deficiencies were found during this inspection period.

▼ **Emergency Plans and Fire Drills: 0 deficiencies found**

No Emergency Plans and Fire Drills deficiencies were found during this inspection period.

▼ **Fire Alarm Systems: 0 deficiencies found**

No Fire Alarm Systems deficiencies were found during this inspection period.

▼ **Automatic Sprinkler Systems: 0 deficiencies found**

No Automatic Sprinkler Systems deficiencies were found during this inspection period.

▼ **Smoking Regulations: 0 deficiencies found**

No Smoking Regulations deficiencies were found during this inspection period.

▼ **Building Service Equipment: 0 deficiencies found**

No Building Service Equipment deficiencies were found during this inspection period.

▼ **Furnishing and Decorations: 0 deficiencies found**

No Furnishing and Decorations deficiencies were found during this inspection period.

▼ **Laboratories: 0 deficiencies found**

No Laboratories deficiencies were found during this inspection period.

▼ **Medical Gases and Anesthetizing Areas: 0 deficiencies found**

No Medical Gases and Anesthetizing Areas deficiencies were found during this inspection period.

▼ **Electrical: 0 deficiencies found**

No Electrical deficiencies were found during this inspection period.

▼ **Miscellaneous: 0 deficiencies found**

No Miscellaneous deficiencies were found during this inspection period.

▼ **Complaints and facility-reported incidents in the past 3 years**

| Inspectors determined that the nursing home failed to: | Inspection date | Date of correction | Level of harm | Residents affected |
|--|-----------------|--------------------|---|--------------------|
| Develop a complete care plan that meets all of a resident's needs, with timetables and actions that can be measured. | 12/17/2014 | Not Available | 2 = Minimal harm or potential for actual harm | Few |

Staffing

WAKE ROBIN-LINDEN NURSING HOME

Overall rating : 5 out of 5 stars
Much Above Average

Nursing home information

33 certified beds 

200 WAKE ROBIN DRIVE
SHELBURNE, VT 05482
(802) 264-5100

Participates in  Medicare

Distance : 2.8 miles

Staffing 

Not Available²

RN staffing 

Not Available²

| | WAKE ROBIN-LINDEN NURSING HOME | VERMONT AVERAGE | NATIONAL AVERAGE |
|---|--------------------------------|------------------------|------------------------|
| Total number of residents | 24 | 70.4 | 86.2 |
| Total number of licensed nurse staff hours per resident per day | Not Available ⁶ | 1 hour and 41 minutes | 1 hour and 42 minutes |
| RN hours per resident per day | Not Available ⁶ | 57 minutes | 50 minutes |
| LPN/LVN hours per resident per day | Not Available ⁶ | 44 minutes | 51 minutes |
| CNA hours per resident per day | Not Available ⁶ | 2 hours and 30 minutes | 2 hours and 28 minutes |
| Physical therapy staff hours per resident per day | Not Available ⁶ | 6 minutes | 6 minutes |

How to read staffing charts | About staff roles

Quality measures

WAKE ROBIN-LINDEN NURSING HOME

Overall rating : 5 out of 5 stars
Much Above Average

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Nursing home information

33 certified beds 

Participates in  Medicare

Distance : 2.8 miles

Quality measures 





4 out of 5 stars
Above Average

▼ Short-stay residents

Find out why these measures are important.

Get more information about the data.

Get the current data collection period.

| | WAKE ROBIN-LINDEN NURSING HOME | VERMONT AVERAGE | NATIONAL AVERAGE |
|--|--------------------------------|-----------------|------------------|
|  Percentage of short-stay residents who made improvements in function. <i>Higher percentages are better.</i> | 95.1% | 73.2% | 63.3% |
|  Percentage of short-stay residents who were re-hospitalized after a nursing home admission. <i>Lower percentages are better.</i> | 20.9% | 17.9% | 22.6% |
|  Percentage of short-stay residents who have had an outpatient emergency department visit. <i>Lower percentages are better.</i> | 14.1% | 13.7% | 12.1% |
|  Percentage of short-stay residents who were successfully discharged to the community. <i>Higher percentages are better.</i> | NOT AVAILABLE | 62.2% | 56.9% |


| | WAKE ROBIN-LINDEN NURSING HOME | VERMONT AVERAGE | NATIONAL AVERAGE |
|--|--------------------------------|-----------------|------------------|
| <p>Percentage of short-stay residents who self-report moderate to severe pain. <i>Lower percentages are better.</i></p> | 12.3% | 19.0% | 16.4% |
| <p>Percentage of short-stay residents with pressure ulcers that are new or worsened. <i>Lower percentages are better.</i></p> | 0.0% | 0.8% | 1.2% |
| <p>Percentage of short-stay residents assessed and given, appropriately, the seasonal influenza vaccine. <i>Higher percentages are better.</i></p> | 100.0% | 80.0% | 80.0% |
| <p>Percentage of short-stay residents assessed and given, appropriately, the pneumococcal vaccine. <i>Higher percentages are better.</i></p> | 100.0% | 79.0% | 81.5% |
| <p>Percentage of short-stay residents who newly received an antipsychotic medication. <i>Lower percentages are better.</i></p> | 0.0% | 1.1% | 2.1% |

▼ Long-stay residents

Find out why these measures are important.

Get more information about the data.

Get the current data collection period.

| | WAKE ROBIN- LINDEN NURSING HOME | VERMONT AVERAGE | NATIONAL AVERAGE |
|--|---|--------------------|---------------------|
| <p>Percentage of long-stay residents experiencing one or more falls with major injury. <i>Lower percentages are better.</i></p> | 4.7% | 3.8% | 3.3% |
| <p>Percentage of long-stay residents with a urinary tract infection. <i>Lower percentages are better.</i></p> | 8.1% | 3.4% | 4.6% |
| <p>Percentage of long-stay residents who self-report moderate to severe pain. <i>Lower percentages are better.</i></p> | 19.4% | 10.8% | 7.8% |
| <p>Percentage of long-stay high-risk residents with pressure ulcers. <i>Lower percentages are better.</i></p> | 2.2% | 4.3% | 5.7% |
| <p>Percentage of long-stay low-risk residents who lose control of their bowels or bladder. <i>Lower percentages are better.</i></p> | 40.4% | 50.9% | 46.8% |
| <p>Percentage of long-stay residents who have/had a catheter inserted and left in their bladder. <i>Lower percentages are better.</i></p> | 5.4% | 3.3% | 2.8% |
| <p>Percentage of long-stay residents who were physically restrained. <i>Lower percentages are better.</i></p> | 0.0% | 0.2% | 0.7% |
| <p> Percentage of long-stay residents whose ability to move independently worsened. <i>Lower percentages are better.</i></p> | 25.2% | 22.4% | 18.2% |

| | WAKE ROBIN- LINDEN NURSING HOME | VERMONT AVERAGE | NATIONAL AVERAGE |
|--|---|--------------------|---------------------|
| <p>Percentage of long-stay residents whose need for help with daily activities has increased. <i>Lower percentages are better.</i></p> | 7.4% | 18.4% | 15.3% |
| <p>Percentage of long-stay residents who lose too much weight. <i>Lower percentages are better.</i></p> | 8.1% | 7.6% | 7.0% |
| <p>Percentage of long-stay residents who have depressive symptoms. <i>Lower percentages are better.</i></p> | 14.3% | 9.5% | 5.4% |
| <p>Percentage of long-stay residents who received an antianxiety or hypnotic medication. <i>Lower percentages are better.</i></p> | 8.5% | 20.3% | 23.5% |
| <p>Percentage of long-stay residents assessed and given, appropriately, the seasonal influenza vaccine. <i>Higher percentages are better.</i></p> | 100.0% | 95.7% | 94.5% |
| <p>Percentage of long-stay residents assessed and given, appropriately, the pneumococcal vaccine. <i>Higher percentages are better.</i></p> | 100.0% | 92.0% | 93.4% |
| <p>Percentage of long-stay residents who received an antipsychotic medication. <i>Lower percentages are better.</i></p> | 10.5% | 16.6% | 16.9% |

Penalties

Nursing home information

WAKE ROBIN-LINDEN NURSING HOME

Overall rating ⓘ: *5 out of 5 stars*
Much Above Average

200 WAKE ROBIN DRIVE
 SHELBURNE, VT 05482
 (802) 264-5100

Distance ⓘ: 2.8 miles

33 certified beds ⓘ

Participates in ⓘ: Medicare

| Federal fines in the last 3 years | Date | Amount |
|--|------|--------|
| <p style="text-align: center;">This nursing home has not received any fines in the last 3 years.</p> <p style="text-align: center;">States may also impose penalties under state law. To search state websites click here.</p> | | |
| Federal payment denials in the last 3 years | Date | |
| <p style="text-align: center;">This nursing home has not received any payment denials in the last 3 years.</p> <p style="text-align: center;">States may also impose penalties under state law. To search state websites click here.</p> | | |