VERMONT

Department of Disabilities, Aging and Independent Living
Division of Licensing and Protection
280 State Drive/HC 2 South
Waterbury, VT 05671-2060
www.dlp.vermont.gov

[phone] 802-241-0344
[fax] 802-241-0343

AGENCY OF HUMAN SERVICES

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

July 6, 2026

Samantha Tracey, Manager
Historic Homes Of Runnemede-Evarts House
40 Maxwell Perkins Lane
Windsor, VT 05089

Dear Ms. Tracey:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **June 8, 2026.** 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.

If you have any questions, please feel free to contact me at (802) 585-0995.

Sincerely,



Carolyn Scott, LMHC, MS
State Long Term Care Manager
Division of Licensing & Protection

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0374	A. BUILDING: _____ B. WING _____	06/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HISTORIC HOMES OF RUNNEMEDE-EVARTS HOUSE	40 MAXWELL PERKINS LANE WINDSOR, VT 05089

(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 On 6/08/2026 the Division of Licensing and Protection conducted an unnanounced on-site annual survey. The following deficiences were identified.	R100		
R382 SS=F	7.2.b Food Safety and Sanitation 7.2.b All perishable food and drink must be labeled, dated and held at proper temperatures: (1) At or below 40 degrees Fahrenheit. (2) At or above 140 degrees Fahrenheit when served or heated prior to service. (3) Staff must monitor the temperature of temperature-controlled food storage areas. Staff must conduct regular temperature checks of prepared food to ensure proper food safety and must document the time and results of each check. The U.S. Department of Agriculture provides guidance for time and temperature curves to ensure prepared foods remain outside of the 'danger zone' for food safety. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview there is a failure to ensure all perishable food is labeled and dated. Findings include: The facility's Food Dating and Labeling policy is consistent with the licensing rules. During a tour of the facility commencing at 9:10 AM on 6/08/2026 the following perishable items were observed to be without labels indicating dates the items were prepared or opened in the main kitchen:	R382		

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R382	Continued From page 1 A container of meat sauce without a preparation date and 2 large containers of liquid with a broth-like appearance with no label or preparation date. Additionally, items found undated in the main kitchen include, but are not limited to, containers of whole milk, ketchup, mayonnaise, and a block of cheese. These findings were acknowledged by the Manager on the morning of 6/08/2026.	R382		
R430 SS=D	9.6.d Plumbing Hot water temperatures must not exceed 120 degrees Fahrenheit in resident areas. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, there is a failure to ensure the hot water temperature does not exceed 120 degrees Fahrenheit in the bathroom of 1 applicable resident. Findings include: The facility's Plumbing, Water Supply, Heating, and Ventilation policy is consistent with licensing rules. During the facility tour, commencing at approximately 9:10 AM on 6/08/2026, the water temperature in a Resident #1's bathroom was observed to be maintained at 122.4 degrees Fahrenheit. This was confirmed by the Manager of the facility the morning of 6/08/2026. Following adjustments made to the facility's water	R430		

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R430	Continued From page 2 heater, the water temperatures were observed to be maintained at or below 120 degrees Fahrenheit at 10:10 AM on 6/08/2026.	R430		

Deficiency Statement Plan of Correction (POC)

DLP Use Only:

Survey Date: June 8, 2026

Facility Name: Historic Homes of Runnemede – Evarts House

Deficiency Tag:	R382 7.2.b Food Safety and Sanitation
How the deficiency was corrected:	All unlabeled and undated perishable food items identified during the survey were discarded by the Kitchen Manager. The Kitchen Manager conducted a full inspection of the main kitchen and verified that all remaining perishable items were properly labeled and dated according to facility policy.
How you identified and applied the correction to other applicable aspects of your facility to ensure all potential deficiencies are corrected:	The facility reviewed food-handling procedures to ensure the labeling lapse identified was corrected and that proper practices were being consistently applied. Staff responsible for managing perishable food were re-educated on the required labeling and dating standards, and expectations were formally reinforced to ensure continued compliance throughout the facility.
System changes to ensure compliance with the regulation:	The facility implemented system changes by standardizing the labeling process, educating all staff responsible for handling perishable food, and incorporating routine supervisory checks to ensure labeling and dating procedures are consistently followed.
Date corrected:	Label issues addressed: 06/09/2026 Education: 07/01/2026
Who will monitor to ensure compliance:	Kitchen Manager
DLP Use Only	R382 Accepted on 07/01/2026 by YA

Deficiency Tag:	R430 9.6.d Plumbing
How the deficiency was corrected:	The fixture was immediately monitored, and the Maintenance Department adjusted the thermostat dial on the main water heater/boiler down to a safe operating level. Temperatures were re-measured to ensure they now consistently register under 120 degrees Fahrenheit.
How you identified and applied the correction to other applicable aspects of your facility to ensure all potential deficiencies are corrected:	To ensure all potential deficiencies were corrected, the Maintenance Department immediately audited all client-accessible water fixtures throughout the facility using a digital thermometer. No other sources were found to exceed the allowable limit, confirming the issue was isolated and the entire facility is operating within safe parameters.
System changes to ensure compliance with the regulation:	To ensure ongoing compliance, the maintenance department has implemented a mandatory bi-weekly schedule to re-test and log water temperatures in each wing of the facility.
Date corrected:	06/08/2026
Who will monitor to ensure compliance:	Maintenance Team
DLP Use Only	R430 Accepted on 07/01/2026 by YA