

## **Recent Changes to programming**

1. No locked doors unless there is an imminent risk
2. Significantly changed our behavior management system and Crisis response through nationally recognized guidance and training from:
  - a. TIER (Trauma Informed Effective Reinforcement) System - a research-based model that offers short-term detention and residential programs an effective alternative to compliance-focused behavior management systems.
  - b. Safe Crisis Management Training - a comprehensive continuum of prevention, de-escalation and safe emergency intervention strategies for responding to aggressive behavior in social service agencies and schools used throughout the United States, the United Kingdom, New Zealand and Guam.
3. Only one seclusion in 8 months (lasted 14 minutes)
4. Only one restraint in 8 months
5. Added "Calming Rooms" and bean bag chairs on the units. Also using Fitbits, weighted blankets, video games, and alternative therapies. (Yoga, mindfulness, fidget toys, Ipods, radios, scented items - stuffed animals)
6. Providing Mental Health Screening and Response in compliance with policies 301 and 302
7. Rooms refurbished with new furniture, more comfortable mattresses
8. Closed North Unit, no mechanical restraints, No strip searches

## **Current Building**

1. Structurally sound (BGS staff)
2. BGS staff clean daily in our building - sanitizing, vacuuming, waxing floors etc.
3. Kitchen operates by Dep. of Ed. standards - whole grains, unlimited fresh fruit and salad. 98/100 and 100/100 last 2 years from Dep. of Health. (see attached)
4. New carpet/floors in nearly entire building.
5. Modern nursing office/equipment.
6. Over the last 8 years, \$600,000 worth of updates.



Vermont Department of Health  
108 Cherry St PO Box 70  
Burlington, VT 05402  
802-863-7221

Establishment <b>WOODSIDE SCHOOL</b>			License Type 7512 - School License		
Physical Address 26 WOODSIDE DR E			City/State/Zip Code COLCHESTER/VT/05446		
Licensee Name WOODSIDE SCHOOL			Inspection ID # 24518		
Date 5/24/2019	Time In/Time Out 09:25 AM/10:05 AM	Telephone 8026554990	Purpose of Inspection: Routine		

Item	Debit Points	Description	Item	Debit Points	Description	Item	Debit Points	Description
<b>Foodborne Illness Risk Factors</b>			17	0	Thermometers, Chemical Kits and Pressure Gauges Provided	<b>Insect &amp; Rodent Control</b>		
<b>Supervision</b>			18	1	Single-Service Articles Stored and Dispensed	*35	4	Establishment free of insects, rodents and pests.
1	In	Person in charge present, demonstrates knowledge and performs duties	19	2	No Re-Use of Single-Service Items	<b>Floors, Walls &amp; Ceilings</b>		
<b>Food Source</b>			<b>Food Equipment &amp; Utensils - Cleanliness</b>			36	1	Floors are properly constructed and maintained.
*1(a)	5	Food is obtained in sound condition and from acceptable sources.	*20	1	Dry Cleaning and Pre-Cleaning Methods	37	1	Walls, ceilings and attached equipment are properly constructed and maintained.
<b>Food Protection</b>			21	2	Warewashing and Rinsing	<b>Lighting</b>		
2	1	Food is in acceptable container and properly labeled.	*22	4	Sanitization Rinse	38	1	Light bulbs are protected and of adequate intensity.
*3	5	Potentially Hazardous Food Temperature Requirements	23	0	Use of Wiping Cloths	<b>Ventilation</b>		
*4	4	Preventing Cross Contamination	24	2	Cleaning Food-Contact Surfaces of Equipment and Utensils	39	1	Rooms and equipment have adequate and clean ventilation.
5	1	Adequate Facilities to Maintain Product Temperature	25	1	Cleaning of Nonfood-Contact Surfaces	<b>Dressing Rooms</b>		
6	2	Thawing Potentially Hazardous Food	26	1	Storage of Clean Equipment and Utensils	40	1	Adequate and Clean
*7	4	Unwrapped Foods: Return and Reservice	<b>Water System</b>			<b>Miscellaneous Inspection Items</b>		
8	2	Food Protected from Contamination	*27	5	Water Supply	*41	5	Poisonous or Toxic Materials
9	2	Handling of Food Minimized	<b>Sewage Disposal</b>			42	1	Premises Free of Rubbish, Litter, Unnecessary Articles
10	1	In-Use Dispensing Equipment	*28	4	Sewage System and Disposal	43	1	Separation from Food Operation Areas
<b>Personnel</b>			<b>Plumbing</b>			44	1	Clean and Soiled Linens
*11	5	Restriction of Employees with Infections and Communicable Diseases	29	1	Plumbing Properly Maintained and Installed	<b>Total Debit Points: 2</b>		
*12	5	Acceptable Hygiene Practices	*30	5	No Cross-Connection, Backflow or Back Siphonage	<b>Rating Score: 98</b>		
13	1	Uniforms, Bib Aprons, and Effective Hair Restraints	<b>Toilet &amp; Handwashing Facilities</b>					
<b>Food Equipment &amp; Utensils</b>			*31	4	Fixture Requirements			
14	2	Food & Ice Contact Surfaces	32	2	Miscellaneous			
15	1	Non-Food-Contact Surfaces	<b>Garbage &amp; Refuse Disposal</b>					
16	2	Dishwashing Facilities	33	2	Facilities on the Premises			
			34	1	Construction and Cleanliness			

Observations and Corrective Actions				
Violations cited in this report must be corrected within the inspector's specified timeframes				
Item Number	Violation of Code	Priority Level	Comment	Correct By Date
17	5-207.17		Testing strip or device was not used to accurately measure the concentration of sanitizing solution.	
23	5-208.23		Cloths for wiping food spills were not stored in a sanitizing solution at the proper concentration - bleach solution concentration should be 50-100 ppm. Verify with test strips.	

Inspection Published Comment:

Visit Date	Person In Charge	Person In Charge Signature	Sig. Date	Public Health Inspector	Public Health Inspector Signature	Sig. Date	Time In	Time Out
5/24/2019	David Brigham	<i>[Signature]</i>	5/24/2019	Rachael Gregory	<i>[Signature]</i>	5/24/2019	09:25 AM	10:05 AM

2018

Health

Inspection



Vermont Department of Health  
108 Cherry St PO Box 70  
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Physical Address 26 WOODSIDE DR E			City/State/Zip Code COLCHESTER/VT/05446		
Licensee Name WOODSIDE SCHOOL			Inspection ID # 21619		
Date 11/7/2018	Time In/Time Out 09:45 AM/10:20 AM	Telephone 8026554990	Purpose of Inspection: Routine		

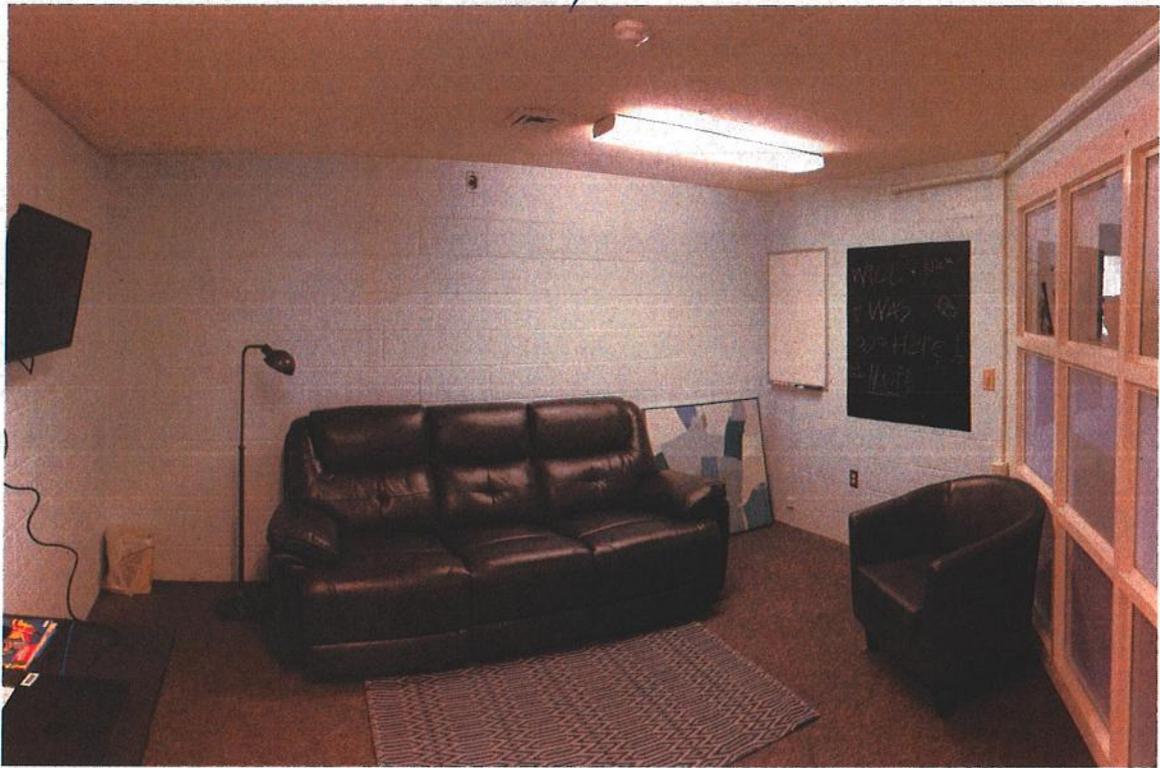
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*12	5	Acceptable Hygiene Practices	*30	5	No Cross-Connection, Backflow or Back Siphonage	<b>Rating Score: 100</b>		
13	1	Uniforms, Bib Aprons, and Effective Hair Restraints	<b>Toilet &amp; Handwashing Facilities</b>					
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Item Number	Violation of Code	Priority Level	Comment	Correct By Date

Inspection Published Comment:  
No violations noted.

Visit Date	Person In Charge	Person In Charge Signature	Sig. Date	Public Health Inspector	Public Health Inspector Signature	Sig. Date	Time In	Time Out
11/7/2018	David Bringham	<i>[Signature]</i>	11/7/2018	Emily Jarecki	<i>[Signature]</i>	11/7/2018	09:45 AM	10:20 AM

Screening/Intake Room



Nursing Station

