

Dear Douglas,

Thank you for contacting me regarding the Veteran's Home in Bennington.

I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding.

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I am grateful that the Vermont Veteran's Home will continue to provide critical services to Vermont veterans and the community of Bennington. My administration will work hard to ensure its continued success. Thank you again for your input on this issue and please don't hesitate to contact my office if I can ever be of assistance.

109 State Street, Pavilion
Montpelier, Vermont 05609
802-828-3333

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/21/2012 9:31:58 AM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Douglas</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>1277 Cabot RD</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL></AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>Dear Gov. Shumlin,

The Bennington Veteran's Home has lost funding. Why? These people have fought for our freedom. They deserve better, they deserve the BEST we can give them. They gave the best they could, they should get the same from us. What are you going to do to make sure they get the help and respect they deserve?

As a Veteran this is very near and dear to my heart and soul.

Sincerely,

Douglas [REDACTED]

Link to WCAX's story about the Bennington Veteran's Home.

<http://www.wcax.com/story/19603189/bennington-veterans-home-loses-federal-support>

</MSG>

</APP>

Close

Dear Suzanne,

Thank you for contacting me regarding the Veteran's Home in Bennington.

I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding.

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/8/2012 5:21:02 PM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Suzanne</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL></AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>Dear Governor Shumlin: I am writing a letter to a government official for the first time because I am deeply moved by a recent news investigation on WCAX about the Bennington Veterans Home. The information the news media presented seemed so counter to the values of Vermonters that I was skeptical. I sought out a staff member of the Home and asked some questions. Sir, what I learned is that the news story didn't exaggerate the situation at all and the residents of the Home and the caregivers there need help. As Vermonters I firmly believe that we have an obligation to our Veterans to provide for them in their final years and in times of distress for them. I also believe that we consider the fair and reasonable support of the people who provide compassionate and professional care on behalf of the State to be a part of our belief system and the responsibility of our Governor and Legislators. If the Board of Directors is not doing the job they are appointed or elected to do then some strong guidance from your office, Sir, is needed.

Thank you for allowing me the opportunity to ask for your help and attention to this sad matter.

Very Sincerely,

Suzanne [REDACTED] </MSG>
</APP>

Close

Dear Pam,

Thank you for contacting me regarding the Veteran's Home in Bennington.

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/15/2012 5:39:42 PM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Pam</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>WA</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL>EMAIL.OPTIN</AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>Please do not close the Bennington Veterans Home. My brother was so well cared for at the end of his life there and my Father was a member of a support group that gave him true meaning to his life.

I no longer live in Bennington but visit twice a year. My family there is very concerned this important

Ifeline for Verterans and their families will be remove. Not good for them, Not good for Bennington and not good for the wonderful state of Vermont.

Thank you

Pam [REDACTED] RN, MN</MSG>

</APP>

[Close](#)

Dear Janice,

Thank you for contacting me regarding the Veteran's Home in Bennington.

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/14/2012 3:19:48 PM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Janice</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL></AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>PLEASE SAVE THE VERMONT VETERANS HOME. WE ARE NOT GOING TO
POINT FINGERS

ABOUT WHOSE FAULT, IT IS BUT MANAGEMENT, HAS BROUGHT US TO THIS
POINT,

I HAVE BEEN THERE FOR 15+ YEARS, WE KNOW WHAT A GREAT HOME WE MAKE
FOR THE
VETERANS.

WE ARE LIKE FAMILY AND HAVE BEEN TRYING TO HOLD ON TO WHAT WE HAVE
STOOD FOR
YEARS,
CARING FOR OUR VETERANS AND THEIR FAMILY MEMBERS.
I KNOW YOU ARE TAKING CARE OF THE WRECKAGE OF IRENE,BUT WE NEED
YOUR HELP.

HELP,

JANICE [REDACTED]

</MSG>

</APP>

Close

Dear Polly,

Thank you for contacting me regarding the Veteran's Home in Bennington.

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/12/2012 8:23:43 PM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>polly</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL>EMAIL.OPTIN</AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>why have'nt you step in at vermont veterans home before this happen
to are veterans . thay are going to be homeless
and yes i work there, it not the shortness of staff it is the the poeple
running the home(management) .Administraition does'nt talking to staff! You
have two stander for management then the working employee. it ok for 2nd
administrator to say i'll go postal if i luse my job, but when a kitchen
employee said that ,that person was out on administrated leaveand but the
person 2nd doing the investagation!!!!.we care alot for are veterans! if it
was'nt for them we would not have are freedom.</MSG>

</APP>

[Close](#)

Dear Barbara,

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>

Date: 9/19/2012 11:01:55 PM

To: "governorvt@state.vt.us" <governorvt@state.vt.us>

Cc:

Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Barbara</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL>EMAIL.OPTIN</AFFL>

<ISSUE>Veterans</ISSUE>

<MSG>Governor, I really wish you would rethink the board of trustees as an overseer for the Vermont veterans home. I would much prefer a state overseer. Maybe we could do away with hiring family and friends. Maybe we could hire people because they are good at their job, rather than because they kiss our collective behinds. I don't believe that our vets should be at the mercy of people who are more concerned about themselves than about what is the right care for each individual veteran! Why do you suppose so many CCCs resigned their jobs. could it be that the paperwork borders on ridiculous? We get just 20 min. to do am/ pm care, but if the smallest incident happens there is 60 mins of paperwork. There is something terribly wrong with a system that puts more emphasis on paperwork than in hands on care! I am totally resentful of the apparent lack of concern over what I consider a near disaster (The mismanagement of the Vermont Veteran's Home!). Shame on you and your office for the uncaring attitude!</MSG>

</APP>

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>
Date: 9/19/2012 11:01:55 PM
To: "governorvt@state.vt.us" <governorvt@state.vt.us>
Cc:
Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM

<FIRST>Barbara</FIRST>

<LAST>[REDACTED]</LAST>

<EMAIL>[REDACTED]</EMAIL>

<ADDR1>[REDACTED]</ADDR1>

<ADDR2></ADDR2>

<CITY>[REDACTED]</CITY>

<STATE>VT</STATE>

<PHONE>[REDACTED]</PHONE>

<AFFL>EMAIL.OPTIN</AFFL>

<ISSUE>Veterans</ISSUE>

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</APP>

[Close](#)

People Summary for Ms. [REDACTED] (189155)

Primary Addresses:

Primary Home:	[REDACTED]		
Home:	[REDACTED]		
Type	Description	Primary	
Home Phone	[REDACTED]	Yes	

Other Information:

Household: Head of a 1 member household
 Household Name: [REDACTED] Family
 Household Salutation: [REDACTED] and Family
 Formal Salutation: [REDACTED]
 Informal Salutation: [REDACTED]
 Birthdate: 1/1/1963
 Affiliations: VOTER_2011 - VOTER_2011
 Added to the database: 11/4/2011
 Last updated: 10/22/2012 4:49:11 PM by Carolyn Wesley: Updated Primary Home Phone [REDACTED] Previously [REDACTED]

Pending Mail:

Completed Mail:

#	Mail ID	Date in	Method In	Assigned To	Issues	Method Out	Letter NameID	ate Out	Batch
1	5030748	9/25/2012	phone	Carolyn Wesley	Issues with health access	usmail		9/25/2012	
	Comments:	[REDACTED] of Burlington called [REDACTED] is a type two diabetic, and a former state employee. She contracted hepatitis while volunteering with the homeless. Because of this, the Veterans Home fired her because it was a contractible disease. [REDACTED] now is in need of an insulin drip, which costs \$10,000 dollars, and her Medicaid won't cover it. She has tried to go through Vermont Legal Aid to see if they could help her, but they were rude and she says they won't treat her like a human being. Her disease is debilitating, and even though she no longer tests positive for any contractible diseases, the state will not rehire her. Her phone number is [REDACTED]. Her address is [REDACTED].							

Open Workflow:

Closed Workflow:

#	WF ID	Opened	WF Code	Assigned To	Template	Closed	Prty
1	801875	9/25/2012	Agency of Human Services	Carolyn Wesley	Agency Request	9/26/2012	9

Calendar Info:

Board Info:

People Summary for Ms. Audrey S. Jones (305019)

Primary Addresses:

Primary Home:

Other Information:

Household: Member of a 2 member household consisting of: Mr. Arthur S. Jones, Ms. Audrey S. Jones

Household Name: The Jones Family

Household Salutation: Mr. Jones and Family

Formal Salutation: Ms. Jones

Informal Salutation: Audrey

Birthdate: 1/1/1927

Affiliations: VOTER_2011- VOTER_2011

Added to the database: 11/4/2011

Last updated: 11/14/2011 12:50:21 PM by QC: Background Address Checker update performed.

Pending Mail:

Completed Mail:

#	Mail ID	Date In	Method In	Assigned To	Issues	Method Out	Letter Name	Date Out	Batch
1	5030760	9/26/2012	phone	Ashley Burke	Veterans	usmail		9/26/2012	
Comments: Audrey Jones called to say that the care at Vermont Veterans Home is impeccable, and that she hopes it will not shut down.									

Open Workflow:

Closed Workflow:

Calendar Info:

Board Info:

Laurie,

[REDACTED] of Burlington called [REDACTED] is a type two diabetic, and a former state employee. She contracted hepatitis while volunteering with the homeless. Because of this, the Veterans Home fired her because it was a contractible disease. [REDACTED] now is in need of an insulin drip, which costs \$10,000 dollars, and her Medicaid won't cover it. She has tried to go through Vermont Legal Aid to see if they could help her, but they were rude and she says they won't treat her like a human being. Her disease is debilitating, and even though she no longer tests positive for any contractible diseases, the state will not rehire her. Her phone number [REDACTED]. Her address is [REDACTED].

Thank you for following up as appropriate and keeping me in the loop.

Carolyn Wesley
Constituent Correspondent
Office of the Governor
109 State Street
Montpelier, VT 05609
[REDACTED]

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From: "john dunham" <[REDACTED]>
Date: 9/28/2012 12:51:09 PM
To: "Governor Peter Shumlin" <governorvt@state.vt.us>
Cc:
Subject: Re: Responding to your message

Governor Shumlin- You letter did not address my concern that a Board Member is the father of the Director of Nursing. We at the Veteran's Home feel this is a conflict of interest. We presented you with a petition signed by over fifty employees. Please advise what your response is to this.

John Dunham

--- On Fri, 9/28/12, Governor Peter Shumlin <governorvt@state.vt.us> wrote:

From: Governor Peter Shumlin <governorvt@state.vt.us>
Subject: Responding to your message
To: [REDACTED]
Date: Friday, September 28, 2012, 12:44 PM

Mail Dear John, Thank you for contacting me regarding the Veteran's Home in Bennington. I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding. While CMS had been concerned about several issues at the Veteran's Home, they were impressed by the intensity of purpose with which staff, management, board, and the state sought to address and correct those issues. The board and administration took several decisive and positive steps, and brought in highly respected consultants in the field of nursing home care to make recommendations to staff and management. These decisions have already changed the delivery of services at the Home, and will help ensure the quality of life that Vermont veterans deserve long into the future. I am grateful that the Vermont Veteran's Home will continue to provide critical services to Vermont veterans and the community of Bennington. My administration will work hard to ensure its continued success. Thank you again for your input on this issue and please don't hesitate to contact my office if I can ever be of assistance.

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Montpelier, Vermont 05609

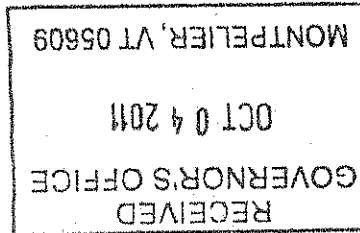
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12 September 2011

The Honourable Peter Shumlin, Office of the Governor
109 State Street, Pavilion
Montpelier, VT 05609 USA



Dear Governor Shumlin,

Regrettably, I am in the Vt Veteran's Home recuperating from complications of a tropical disease. With the proviso Vt Veteran's Home facilitates the therapy I need I have full expectations of returning home hopefully as a productive taxpaying Vermont citizen.

Please accept my humble apology for intruding on your valuable time. I am writing to you because Vt Veteran's Home is unwilling to provide me with an organisational chart or e-mail address of its staff. I do not know whom else to write.

In my judgement, the administration of Vt Veteran's Home is treating me as a "convict" who will be moulded to their suitability, not a human being. My sense is, to administration I am a necessary inconvenience justifying their salary. I am not an inconvenience. I am a human being and a veteran who honourably served his country.

They are attempting to treat my elephantiasis with untrained personnel. This is even after an expert gave demonstrations on proper elephantiasis care. No one here has certification in this speciality. An insufficient number of nurses observed the two demonstrations. This situation is potentially detrimental to my health (possibly life threatening); the consequences could cost tens of thousands as well.

It is my firm belief the records are false by both intent and omission. The management solution for the bandaging shortcoming appears to use me as a gratuitous consultant. When I refuse gratuitous consulting, I get attitude and I am sure the records indicate, refused treatment without the footnote of: trained/exposed personnel unavailable. I lack certification in this technique. If I advise wrongly or refuse to help, administration can never be wrong.

There is, in my judgement, insufficient staff to care for the veterans; minimum legally required and minimum for the task in all probability are not related. My laundry has been lost and damaged, along with a personal item pilfered. Personal documents are read just for curiosities sake. Medical confidentiality was violated. I was jeopardised with loss of the "privilege" to use my cell phone provided at my expense. Administration only knows they are not responsible and never wrong.

Inadequate staffing means I am in my own waste for hours and was left days without a call bell. As much as the therapy department attempts to cooperate with nursing, nursing has

[REDACTED]

difficulty adhering to a schedule due to insufficient personnel. My therapy gets cut short or is cancelled. Therapy is my ticket out of here, off the state's budget and paying taxes to help another veteran. This is the fault of administration's inadequate staffing, not the LNAs, therapy, or other caregivers!

Lack of planning has caused three ambulance rides instead of one for one MRI. How much did this cost? The food is insalubrious. In all probability, this leads to many medical issues in many people costing greater monetary expenditures than necessary. All I want is a salubrious food choice. That would be a pecuniary benefit as well as a health benefit.

In lieu of a rambling diatribe, ad nauseam I have attached my diary of events at Vt Veterans Home for you perusal.

I appeal to you to assist the ombudsman have the Vt Veterans Home

- Replace my missing personal item as well as replace my missing and ruined clothes
- Treat my elephantiasis consistently and properly
- Guarantee me personal document privacy
- Assure my communication rights and treatment, with respect, as a human being
- Resolve other issues covered in my diary

I remain with veneration,

Respectfully,
[REDACTED]

Enclosure: Vt Veterans Home Diary

cc: The Honourable Patrick Leahy, US Senator
The Honourable Bernard Sanders, US Senator
The Honourable Peter Welch, US House of Representative
Lim Su San, Lim Su San & Partners, Phnom Penh
Daphne Choy, Daphne Choy & Associates, Penang
Nora Dunne, Ombudsman

09 Aug - not bandaged - left in compression stocking

11 Aug - nurses are not trained in bandaging technique - forced to consultant to get medical care Who do I invoice. Hands on errors have caused wounds, cellulitis and setback in elephantiasis management

12 Aug Left in stocking for 24 hours plus

13 Aug - Left in stocking 10 hours - leg now wounded Dr King encouraged me to have my leg wrapped by an untrained and unqualified person. King has not had training in this technique.

Nurse Erica violated trust and refused to give me her last name. Supervisor Collen Dewey said I did not need Erica's last name

Purloined larder

insalubrious food - carbs and carbs flavoured with oil complimented with sugar on the side

advocate for myself, but not really

14 Aug - requested clean-up - 90 minutes

Social worker refused (unprocurable) to give me an organizational chart for this place

Lack of organizational effort contributes to wasted time and effort

Laundry issues.

Email list

treatment log, daily, to monitor refusals

15 Aug - no salad or dinner

17 Aug - told Ina bandage was urine soaked and to inform nurse. Nothing was done about it.

18 Aug - Told Ina at 0130 bandage was urine soaked. Night Nurse said she was unqualified to deal with it. I am patently being punished for advocating. Left urine soaked for several, eight, hours. Staff wanted gratuitous consulting on bandaging my leg again. They resent my request for a PO. The attitude of staff is I am treated as a convict not a customer or citizen. Nurse on duty at 1500 is not trained. Supervisor bandaged my leg, nurse observed for two minutes and not the special technique. The sleeves are both wet because my gratuitous consulting was unheeded. No staff space to store supplies so staff has no choice; my personal

items are constantly rummaged through for care supplies.

Therapy is a breath of fresh air as it is not vvh managed. LNAs are great and not the problem - they have too much work. This is a management problem! The staff is okay for the most part.

Response time for assistance with a urinal is longer than my system can conciliate

19 August - I had a shoulder X-Ray on 16 August. To date no one has imparted the results to me. On 17 August my shoulder was X-Rayed; again no results to date.

I asked for a Notary Public to have documents notarized. My "social worker" Shelia Millineaux (sp) was intrusive and read the document. She is not a notary and to the best of my knowledge, a notary is not required to and does not read the documents. This is invasively disturbing, incongruous and unprofessional behaviour beyond comprehension. I am not disported to say the least.

What is the avenue to institute abuse to elders and license revocation? At the very least I want another social worker assigned to me. Most of all I want her too NEVER come near me again. I do not want this buffoon near me in anyway, shape or form. Furthermore, I do not want anyone contacted she learned about by reading this document.

Bandage sleeve was not dried as per my gratuitous consulting. They are both damp, ergo unusable.

20 Aug - nurse changed my leg wrap at noon. She, Li Ann, was vocally upset at the poor job John had done; John has seen the demo. She lamented about the "lost ground" in my leg condition.

At 2330 20 Aug I was told I had to close my door as my phone call, to Thailand, bothered another convict through his closed door across the hall. The nurse wanted to close my door. I elected to say no, as I want to stay off the slippery slope. As the nurse/fief was challenged, words were exchanged. The nurse then threatened to revoke my phone privileges. I asked a bit later if communication was a right or privilege. The nurse indicated he thought it might be a right. I was approached because I do not ring my bell incessantly and have a mind. I have learned the lesson of complain and ring unremittingly for service. Again, I ask; am I a convict, or inmate? Am I expected to submit to intimidation? What do less forceful and resourceful convicts do?

I have learned the LNA's are being blamed if anyone, including me, complains. By in large it is not their fault. This is nothing more than a management stratagem to divert responsibility and blame.

22 Aug - it took 3 hours to get out of bed today and 1.5 hours to get back to bed. My two leg bandages were still wet as planning was poor; the third is lost. Nurses wanted gratuitous consulting again and thought my wanting a PO was bemusing. They then left it up to me as to what to do. My leg was left unbandaged. Based on the lack of training it was in all likelihood the prudent decision.

23 Aug - Leg not bandaged. Nurse asked me what to do. Once again, I am being asked for gratuitous consulting. I was left in compression stocking which

24 Aug - it is now two weeks since my last bed bath, bath, or shower.

25 Aug - The cylinders on my chair are inoperative. Therapy was going to have it repaired by maintenance, as they do not have a spare.

26 Aug - still no bed bath, bath, or shower. As of 1630, my chair is nowhere to be found so I cannot get up. Sitting in my chair is part of my therapy. This is not right or fair to me.

28 Aug - At 1745, my chair was found by the LNAs but no one knows if it is still broken. I was left in the compression stocking longer than the recommended duration. The plan to bandage my leg seems to be to have untrained, ergo unqualified, people do it from written pedagogy. If this protocol is so easy, why is there a certification process?

27 Aug - chair is fixed; sort of. My shirt has gone missing from the laundry. My leg was bandaged properly. It took 1.5 hours to get back to bed because it was mealtime. Once again staffing appears to be inadequate for normal workloads. The hurricane is the excuse for only sandwiches for dinner. My larder has been purloined again.

29 Aug - everything is the fault of the hurricane. I had an MRI appointment today I have known about for five days. There was disorganized confusion; id est a lack of coordination. Therapy was never notified so it cut into my therapy time. Transport was notified five minutes before my appointment so I was late. Transport showed up with the wrong equipment causing more delay. The hospital had the wrong paperwork so they were unable to do the MRI today. The MRI has been rescheduled for 31 Aug. Now I will lose two days of therapy.

30 Aug - The lack of schedule coordination is a consistent issue having a detrimental effect on my rehab.

31 Aug - At 0100 a nurse asked me to fill out a form for the MRI. I told her at this hour I do not do forms. I am certain objecting to convict treatment has "garnered" me the disobliging and noncompliant labels. The nurse asked what body parts were being MRIed. She indicated she did not know. The nurse was informed gratuitous consulting would not be entertained. I had to explain what gratuitous consulting is. I assume I have a "smart ass" label applied to me, which is better than a "dumb ass" label. I assume information promulgation apparently does not occur at report. Again, transportation arrived late for my MRI. Timely response is apparently not in the repertoire of the professionals here. Arriving an hour late for the MRI was not an issue. My shoulders would not fit in the machine. I assume checking this sort of thing before I left necessitates a degree in rocket science. The lack of minimal professionalism continues to influence my therapy.

1 Sep - The nurse saw a blister on my stomach. She questioned how long it had been there. The LNA informed her since 30 Aug and the nurse had knowledge about it. Report is not for disseminating patient information. My purloined larder returned but my sunglasses are missing. With no secure personal space, I should

02 Sep - Dr finally disseminated the x-ray information from weeks ago. Stated she has lost the battle of insalubrious food. It is over three weeks since I have had a bath, shower, bed bath or my hair washed. Once again, I must manage my care or no care is done. I was left in the compression bandage for ≈ 8 hours, double the recommended time. Karen, an untrained ergo-unqualified nurse wanted to bandage my leg. She admitted she had not seen the demo or been trained but it cannot be that difficult so I will try it. She expected gratuitous consulting from me. The time I was bandaged imperfectly, I got an open wound. The open wound in all likelihood led to a serious ailment, cellulitis. I reminded Karen of the due no harm mantra. She made me make the decision. I declined and got attitude. I strongly suspect this is political. Karen will document I refused treatment without the footnote she is untrained ergo unqualified; the system does a CYA and wins again. It is imperative I audit the treatment log on a daily basis to eliminate the CYA and he said she said. John the CCC who has seen the demo bandaged my leg in a wrong manner with Karen. She has seen a wrong demo so she is incorrectly qualified now. I asked the LNA to have the nurse, Karen, look at my blister. It was never done.

03 Sep - I rang for care at 0930 and was told I would have to wait awhile because it is mealtime. Minimum legal staffing level, staffing level for the task, and peak load staffing levels are three different things. Leann redid leg properly at 1330. I got up in my chair at 1400. At 1700, I noticed my leg bandage had slipped. LeAnn redid it immediately. A nurse asked me if I had and was using my inspirational spirometer. I have not been given an inspirational spirometer as ordered by the Dr on 02 Sep. She also asked if I was being reminded to use it. I said no. The nurse indicated the treatment log was initialled indicating I had been reminded to use the inspirational spirometer. This is hearsay; I have not seen the log myself. Does this constitute **Falsification of Records?** Is this business as usual or **Am I in Danger?** What do I do; ignore it or go after it? I still need the secretary of state contacts. Is it time to contact a newspaper or three, my senator, report certain things to 911 etcetera?

04 Sep - Leg looks good since LeAnn applied the bandage properly yesterday. Tried to get up in my chair but things just did not work out. This is part of my therapy and it is not happening. The bandage fell down. Leann redid it happily. My sunglasses are missing. No one seems to want to address the problem. Personal space is a basic need I lack. My fruit is served flavoured with onion. Perhaps chef is starting an epicurean trend, strawberries and grapes flavoured with onion. Second shift apparently had 40% of LNAs no show; ergo everything suffers. Excuses abound, the hurricane, it is a holiday weekend etcetera.

05 Sep - The plot on the MRI thickens! Nurse tammy queried everyone about the low probability of my shoulders fitting into the MRI machine as her husband had the same issue. The consensus was why not spend a \$1000.⁰⁰ on transportation and try it? Who pays for stupidity like this? I still have no official word on when and where the MRI will be done; no idea or official word when it will happen. I have waited over five hours for requested clean up, 1230 ~1800 plus. When I told one of the more caring LNAs, she was horrified at this situation. If I have to manage my own care. I want to be paid a management fee.

07 Sep - I still have not been informed when my MRI is. I refused to sign blank financial forms. I want Shelia removed from my case; she is boorish buffoon. She just does not understand; she works for me, not herself, or the system. MRI logistics were a joke again. The transport arrived 1 hour late. The MRI place had time for me so it was no hassle. I had my bed bath today. It is IMPERATIVE the treatment records be audited. At 2245, an untrained, ergo unqualified nurse wanted to bandage my leg. When I mentioned the lack of training, she said she could handle it. I commented that there was significant potential to do harm and the decision was hers. She tried to make me make the decision. When I refused to make a decision she said, "You are refusing treatment." I corrected her. It was her decision and my lawyer would handle mistakes. I am sure she enjoyed that almost as much as I enjoyed being threatened with loss of "phone privileges." At 2255, she made the decision to bandage my leg. However, she could not find the bandages. She found them eventually unrolled. She rolled them, began the bandaging at 2315, and finished at 2330. When I commented about the mismanagement she said she was doing her best. I responded with this is not the Boy Scouts. The only applicable words are success or failure.

08 Sep - My leg was not bandaged and I was left in the stocking for over the prescribed time.

09 Sep - My leg was still not bandaged and I was left in the stocking for well over the prescribed time.

10 Sep - My leg was still not bandaged

11 Sep - My leg was still not bandaged. The knee high stocking is missing. If it was washed in hot water, it is ruined

12 Sep - Stocking was found in laundry. It five weeks since my hair was last washed. The blue slipi is lost again for the umpteenth time. I was not offered dinner. It took ten days to get me an inspirational spirometer since the Dr requested it. Leg was finally bandaged today. MRI results were never sent to therapy. Therapy had to mount a quest, make their own phone calls, for the MRI results involving making their own phone calls.

13 Sep - Blue slipi was in the closet. Still waiting to get up. For a period, there was only one LNA for the wing. I am still in my own waste for hours at a time. Again, it is poor and inadequate staffing levels. Food is even worse and no effort is made to be accommodated by the kitchen. My leg was not bandaged and I was left in the stocking longer than recommended.

14 Sep - Bureaucracy abounds! It takes two nonmedical people to approve my shopping list for salubrious food. What does this cost and what benefit is this to the convicts? Might the money be better spent on additional staff and training for the medical people? It is now ≈ 5 weeks since my hair has been washed and $\approx 4 \sim 5$ days since my leg was bandaged. I again was approached for gratuitous consulting on my leg. Even though this is a unique skill, they seem to want me as a guinea pig with no regard for potential harm.

hours, 113 minutes, to get into my chair. It is apparent the LNAs do not know how to operate my chair. I am sure management is not over spending on training. I have no data to substantiate the LNAs claim that $\approx 20\%$ of a shift is dedicated to paper work. Ergo, only $\approx 80\%$ of the LNA staff is available to the convicts. Budgeting LNA time is difficult at best with an 80:20 ratio. Still no shampoo or leg bandage today. Staff is constantly complaining about management. Although it is a state institution I suspect it is the "Lean, Mean Profit Making Corporate Machine" expelling its shit down on low end staff.

16 Sep - I was told by a VCA rudely in no uncertain terms in front of the head of therapy that my (all) therapy was subordinate to meals and mealtime. This is a major systemic problem. I am sure she just echoes management. Convicts and convict care is subordinate to the needs of the "LMPMCM"¹; id convict gets no priority at all. Orice again, my leg was not bandaged. I am being neglected!

17 Sep - Good night shift people offered unsolicited care. Unsolicited care offered by the day shift today as well. Therapy commented my leg looks worse id est more edematous. Nurse Leona wanted to bandage my leg. She has not seen the demo or is not certified. She has only read instructions generated by VVH². By definition untrained, ergo unqualified. I asked if she was trained or certified. She said no. I told her, gratuitous consulting would not be entertained. I was asked if I wanted my leg bandaged. I told her I do not do gratuitous decisions either; the decision was hers. The nurse gave me attitude and left. After some time I asked Kimm, the LNA, to get the nurse and remain; I needed a witness. I told Leona she obviously made the decision not to bandage my leg, ergo I did not refuse treatment. I admonished her not to log it as a refusal. She tried her best, unsuccessfully, to get me to make the decision. She eventually said she would wait for the supervisor to make the decision. I am awoken every morning, apparently for my health and comfort. At 2215, I was bandaged. Lack of consist proper bandaging has deteriorated the leg. The edema is now bad enough that the bandaging sleeve does not fit properly

18 Sep - My leg was bandaged so we will see how it goes. Nothing else was noteworthy today.

19 Sep - I received no personal care from ≈ 1600 on 18/09 to 0830 on 19/09 id est 15½ hours. None was requested. I am awoken for VVH convenience, but not to do work. I had a visit from the Assistant Administrator and a QA person to discuss money issues. They had no other concerns. In my mind proof positive, this is not about care but about money.

20 Sep - New development at 0930 this morning. Shelia, the LSW, informed me I had a care plan meeting scheduled this morning. I told Shelia I needed time prepare for a meeting; I do not attend meetings unprepared. Shelia tried to convince me it was not that kind of meeting and I should attend, as preparation was unnecessary. Shelia indicated the meeting would occur with me or without me. They had eight days to inform someone else in writing about the meeting but no time to inform me. I strongly suspect skulduggery. They had their care plan

meeting without me as far as I know. I also received attitude from the LSW. As preposterous as this sounds, I am also aware that informing or inviting therapy to the meeting apparently was deemed unnecessary, ergo my suspicion of skulduggery. How could a prudent, professional, and ethical staff conduct my care plan meeting without involvement of therapy?

21 Sep - Getting up was a joke. Therapy wants a different method of transferring me to the chair. Nursing could not, coordinate with therapy to do it at all on any sort of schedule. The nurse, Jo-Ann wanted me to manage the situation. I informed her I do not do gratuitous management or consulting. I had to inform her of this several times. She acted as if she did not know what gratuitous meant. I also got attitude from her as well. When it came time to put on my stocking the slipper was nowhere to be found. We wasted 15~20 minutes looking for it. This place makes disorganized confusion an improvement that looks efficient. It is glaringly apparent no one except therapy knows how to operate my chair. This hindered getting back to bed.

October 11, 2012

Winifred Rose
223 Maple Street
Bennington, VT 05201-2517

Dear Winifred,

Thank you for sharing your concerns regarding the Veteran's Home Board with Governor Shumlin.

Please be aware that Mr. Dunn's relation to Christina Cullinane was addressed at the time of his appointment. Mr. Dunn has agreed that he will recuse himself from any meeting in which his presence may create or appear to create a conflict of interest.

Though the Veteran's Home has had a difficult past few months, we are confident that the board, under the new leadership of Joe Krawczyk, the staff, and management at the Home will continue to work together for the good of the veterans.

Sincerely,

Susan Spaulding
Boards and Commissions

SS/cw

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HTML

From: [REDACTED]
 Date: 9/28/2012 5:39:24 PM
 To: "governorvt@state.vt.us" <governorvt@state.vt.us>
 Cc:
 Subject: RE: Responding to your message

Dear Govenor Shumlin, is Fredrick Dunn sitting on the Board of Trustees at the VVH not a direct violation of the state policy?
 Thanks you for your response, Winnie

CONFLICTS OF INTEREST ARISING FROM EMPLOYMENT

Number 5.2

Effective Date: February 1, 2002

Subject: CONFLICTS OF INTEREST ARISING FROM EMPLOYMENT

Supersedes Policy 5.2 Dated March 1, 1996

Applicable To: All classified employees, as well as exempt, appointed, temporary, contractual, and applicants for employment with the Executive Branch of the State of Vermont.

Issued By: Department of Personnel

Approved By: Kathleen C. Hoyt, Secretary of Administration

POLICY STATEMENT

It is the State's responsibility to conduct employment matters in a manner that avoids not only conflicts of interest, but also any appearance of a conflict of interest. Conflicts of interest may arise in: hiring employees; their employment by the State in more than one capacity; outside employment or activities engaged in by employees; and the award of contracts to employees. This policy is intended to promote avoidance of conflicts of interest and the appearance thereof that arise through the employment in the same governmental unit of people who share certain familial or other close relationships. The primary goal is to avoid instances in which the hiring process or any term or condition of employment is inappropriately influenced by such familial or other relationships, or the perception among members of the public or other employees of such impropriety.

It is the general policy of the State that no one will be employed in the same department, institution, or organizational unit that employs a relative. In addition, it is the general policy of the State that no one will be employed in the same department, institution, or organizational unit as a person with whom he or she resides, or the relative of a person with whom he or she resides. It is important to note that the definition of "relative," for purposes of this Policy, includes spouses, civil union partners, and domestic partners, in addition to the other familial relationships listed in the definition.

This policy applies to all employment decisions including, but not limited to, those concerning new hires, promotions, demotions, transfers within State government, and changes in categories of employment (such as moving from temporary to classified service). Hiring managers must ask prospective candidates if they have any relatives, a civil union partner, a domestic partner, other person with whom they reside, or relative of any of the foregoing currently working for the State of Vermont. **DEFINITIONS**

CIVIL UNION PARTNER – a person who has entered into a civil union pursuant to Vermont law.

Civil union partners shall be treated the same as spouses under this policy.

DIVISION - a major unit of a department of State government, usually headed by a director.

DOMESTIC PARTNER - a person of the same or opposite sex who lives with a State employee under circumstances in which they have agreed between themselves to be responsible for each other's welfare.

EMPLOYMENT - working for the State in a permanent, limited, or temporary position; in an exempt position; or under contract.

RELATIVE - includes parent, grandparent, spouse, civil union partner, domestic partner, child, brother, sister, grandchild, aunt, uncle, niece, nephew, parent-in-law, brother-in-law, sister-in-law, step-parent, step-child, any other person so related through marriage, and any other person so related to one's civil union partner or domestic partner.

PROCEDURES FOR REQUESTING WAIVER Requests for waiver of the general policy may be submitted to the Commissioner of Personnel. Waiver requests will be evaluated to determine the extent of current or potential conflicts of interest, or the appearance thereof. The Commissioner's consideration will include, but not be limited to the following: * the size of the employer; * the closeness or remoteness of the relationship between the family members or cohabitants; * the reporting relationships within the organization and the likelihood that the employees would work together or either employee would be in a position to influence any aspect of the other's employment; * the degree to which the action would aid the department in attaining an applicable affirmative action goal; * the level, status, and geographic location of the positions; * the extent to which the proposed employment may reduce management's flexibility with respect to work assignments or future transfer or promotion of such person; * the availability of other qualified, suitable, and interested applicants for the position, as demonstrated by the documented results of the recruitment effort for the position that is the subject of the waiver request. Waivers will not be approved to allow employment of a person in any case in which thl think we will s

From: governorvt@state.vt.us

To: [REDACTED]

Subject: Responding to your message

Date: Fri, 28 Sep 2012 12:44:44 -0400

Mail

Dear
Winifred,

Thank
you
for
contacting
me
regarding
the
Veteran's
Home
in
Bennington.

I
am
happy

to
let
you
know
that,
thanks
to
the
hard
work
of
the
dedicated
staff,
administration
and
board
at
the
Veterans
Home,
our
Congressional
delegation,
and
my
administration,
the
Centers
for
Medicare
and
Medicaid
Services
(CMS)
have
concluded
that
we've
made
the
changes
necessary
to
continue
serving
Vermont
veterans
in
Bennington
with

full
federal
funding.

While
CMS
had
been
concerned
about
several
issues
at
the
Veteran's
Home,
they
were
impressed
by
the
intensity
of
purpose
with
which
staff,
management,
board,
and the
state
sought
to
address
and
correct
those
issues.
The
board
and
administration
took
several
decisive
and
positive
steps,
and
brought
in

highly
respected
consultants
in
the
field
of
nursing
home
care
to
make
recommendations
to
staff
and
management.

These
decisions
have
already
changed
the
delivery
of
services
at
the
Home,
and
will
help
ensure
the
quality
of
life
that
Vermont
veterans
deserve
long
into
the
future.

I
am
grateful
that
the

Vermont
Veteran's
Home
will
continue
to
provide
critical
services
to
Vermont
veterans
and the
community
of
Bennington.
My
administration
will
work
hard
to
ensure
its
continued
success.
Thank
you
again
for
your
input
on
this
issue
and
please
don't
hesitate
to
contact
my
office
if
I
can
ever
be
of
assistance.

109
State Street,
Pavilion

Montpelier,
Vermont
05609

802-828-3333

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Close

From: Wesley, Carolyn
Sent: Thursday, May 03, 2012 1:47:50 PM
To: Jackson, Melissa
Subject: RE: Vets Home Family Concern

Melissa,

Thank you for the heads up. We have heard from Kathy this week. She is going to send a written statement of all her complaints to you, the board, and our office. I explained to her that the extent of our involvement in the situation was to listen to her concerns and share them with you.

It sounds like you are taking the appropriate follow up and thanks again for keeping us in the loop.

Sincerely,

Carolyn Wesley
Constituent Correspondent
Office of the Governor
109 State Street
Montpelier, VT 05609
802-828-3333
Visit Governor Shumlin's Online Resources:
[Website](#) | [Facebook](#) | [Twitter](#) | [YouTube](#)

From: Jackson, Melissa
Sent: Tuesday, April 24, 2012 1:29 PM
To: Appleby, Leigh
Cc: Reardon, Jim; [REDACTED]
Subject: Vets Home Family Concern

Leigh,

I wanted to let you know that the Governor may be receiving a phone call or letter from Kathy Layne. She is a family member of one of the Veterans at the Vets home. She has had numerous concerns that I have been working to address. Her current concern is she feels we do not have enough staffing. I have met with her on a few occasions in an attempt to address her concerns. She has cancelled three meetings with me in the recent past. I spoke with her today and she informed me that she was not happy with the staffing and would be contacting Governor Shumlin and would be encouraging other family members to do the same. The Vets home staffing ratios are above what is required by state regulation. I do have an issue with excessive call outs and FMLA use. I have been working to address this issue. If you should need additional information please do not hesitate to contact me.

Thank you,

Melissa Jackson, BSW, LNHA
Vermont Veterans Home
325 North St
Bennington, VT
05201



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<http://vvh.vermont.gov>

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>
Date: 6/4/2012 9:08:46 AM
To: "governorvt@state.vt.us" <governorvt@state.vt.us>
Cc:
Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM
<FIRST>Susan</FIRST>
<LAST>Morale</LAST>
<EMAIL>[REDACTED]</EMAIL>
<ADDR1>[REDACTED]</ADDR1>
<ADDR2></ADDR2>
<CITY>[REDACTED]</CITY>
<STATE>VT</STATE>
<PHONE>[REDACTED]</PHONE>
<AFFL>EMAIL.OPTIN</AFFL>
<ISSUE>Health Care</ISSUE>
<MSG>Dear Governor Shumlin:

Greetings:

As a graduate student enrolled online at Champlain College for a Masters in Healthcare Management, Lawyer and RN I would like to contact your Medicaid Health IT Coordinator.

I was recently in contact with a representative for the Assistant Secretary of Planning and Evaluation who advised it might be useful for me to review the State of Vermont documents for Health IT and Medicaid Planning.

I am at a disadvantage to know how to contact your Medicaid Health IT Coordinator. I am anxious to find out why the Vermont Veterans' home does not have HIT or HIE.

I am a Vermonter who wants to assist in advancing healthcare in my state. I appreciate your fine work in this area and proud to have you as our Governor.

Please advise.

Very truly yours,

Susan L. Morale, Esq., RN

</MSG>

</APP>

Close

Dear John,

Thank you for contacting me regarding the Veteran's Home in Bennington.

I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding.

While CMS had been concerned about several issues at the Veteran's Home, they were impressed by the intensity of purpose with which staff, management, board, and the state sought to address and correct those issues. The board and administration took several decisive and positive steps, and brought in highly respected consultants in the field of nursing home care to make recommendations to staff and management. These decisions have already changed the delivery of services at the Home, and will help ensure the quality of life that Vermont veterans deserve long into the future.

I am grateful that the Vermont Veteran's Home will continue to provide critical services to Vermont veterans and the community of Bennington. My administration will work hard to ensure its continued success. Thank you again for your input on this issue and please don't hesitate to contact my office if I can ever be of assistance.

109 State Street, Pavilion
Montpelier, Vermont 05609
802-828-3333

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>
 Date: 9/14/2012 8:20:32 PM
 To: "governorvt@state.vt.us" <governorvt@state.vt.us>
 Cc:
 Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM
 <FIRST>John</FIRST>
 <LAST>Dunham</LAST>
 <EMAIL>[REDACTED]</EMAIL>
 <ADDR1>[REDACTED]</ADDR1>
 <ADDR2></ADDR2>
 <CITY>[REDACTED]</CITY>
 <STATE>VT</STATE>
 <PHONE>[REDACTED]</PHONE>
 <AFFL>EMAIL.OPTIN</AFFL>
 <ISSUE>Other</ISSUE>
 <MSG>Governor Shumlin- My name is John Dunham, Jr. I am an RN at the Vermont Veteran's Home in Bennington. I have been employed there for six years. I am the ninth generation from right in Bennington. I love this town and I love the Vermont Veteran's Home and all the Veteran's we take care of.

Over the last year, I have seen administration Bully the staff, turn a blind eye to staffing issues. (Even though we had brought these issues to their attention MONTHS before receiving citations by the state surveyors for SHORT STAFFING). In addition, it was ADMINISTRATION who sent an unlicensed staff member with a Veteran against regulations and ordered her to give medications to the Veteran. When surveyors came back to re-survey on that deficiency, they found that again ADMINISTRATION again did not send a licensed staff member (with that very same Veteran) to provide incontinence care for the Veteran. Governor Shumlin these decisions and failure to correctly write, follow, educate on, and follow a plan of correction for this deficiency hangs on the ADMINISTRATION at the Vets home not it's employees as they would have the public and you believe.

The Boad of Directors at the Vermont Veteran's Home has no real clue what has transpired there. They only get information from phone calls from the administration (Who in my view is the root of the problem). An investigation further into these deficiencies will prove that indeed it was their doing. I am also aware that mistakes by staff have been made resulting in other deficiencies. Governor Shumlin I can guarantee you that these mistakes were not made intentionally or in support of the VSEA as some ADMINISTRATION has asserted. In my opinion, these CAN be attributed to short staffing that we have been encountering for over a year at VVH. If you put a nurse on for 12 days straight without down time, there ARE going to be mistakes made because

of exhaustion! In addition, people are being made to stay over almost on a daily basis to work 12-16 hours without notice. (Administration may assert that mandation does not occur often, and they may be correct in actuality, but people are being told if they do not "volunteer" someone will be mandated). Staff is trying to "volunteer" when they can as it is better to do so when you have no plans than the next day when their name would be up for mandation again and they have appointments set, funerals, weddings, school plays etc.

I write this with a heavy hand Governor Shumlin. I never in a million years imagined myself as any activist, but my love of my job, the Veteran's Home, and all the Veteran's I take care of demands it.

I employe you to come visit the Veteran's Home. Do a little investigation personally into this matter, and while down talk to the Veteran's and the staff without ADMINISTRATION. We would be glad to meet with you at any time to fill you in on other issues affecting the care at VVH.

I look forward to hearing from you soon as we are under an impending deadline before we lose federal funding.

A Very Concerned VVH RN and Democratic Voter,

John Dunham, Jr., RN

</MSG>
</APP>

Close

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From: "The Official Website of the Governor of Vermont" <vt-cms-support@egov.com>
Date: 6/4/2012 9:08:46 AM
To: "governorvt@state.vt.us" <governorvt@state.vt.us>
Cc:
Subject: Form submission from: Send a Message to Governor Peter Shumlin

<APP>CUSTOM
<FIRST>Susan</FIRST>
<LAST>Morale</LAST>
<EMAIL>[REDACTED]</EMAIL>
<ADDR1>[REDACTED]</ADDR1>
<ADDR2></ADDR2>
<CITY>[REDACTED]</CITY>
<STATE>VT</STATE>
<PHONE>[REDACTED]</PHONE>
<AFFL>EMAIL.OPTIN</AFFL>
<ISSUE>Health Care</ISSUE>
<MSG>Dear Governor Shumlin:

Greetings:

As a graduate student enrolled online at Champlain College for a Masters in Healthcare Management, Lawyer and RN I would like to contact your Medicaid Health IT Coordinator.

I was recently in contact with a representative for the Assistant Secretary of Planning and Evaluation who advised it might be useful for me to review the State of Vermont documents for Health IT and Medicaid Planning.

I am at a disadvantage to know how to contact your Medicaid Health IT Coordinator. I am anxious to find out why the Vermont Veterans' home does not have HIT or HIE.

I am a Vermonter who wants to assist in advancing healthcare in my state. I appreciate your fine work in this area and proud to have you as our Governor.

Please advise.

Very truly yours,

Susan L. Morale, Esq., RN
</MSG>
</APP>

Close

Appleby, Leigh

From: Appleby, Leigh
Sent: Tuesday, April 24, 2012 1:31 PM
To: Roessle, Drusilla; Wesley, Carolyn; Wiltshire, Serge; Casey, Carson; Murray-Clasen, Madeline
Subject: FW: Vets Home Family Concern

From: Jackson, Melissa
Sent: Tuesday, April 24, 2012 1:29 PM
To: Appleby, Leigh
Cc: Reardon, Jim; [REDACTED]
Subject: Vets Home Family Concern

Leigh,

I wanted to let you know that the Governor may be receiving a phone call or letter from Kathy Layne. She is a family member of one of the Veterans at the Vets home. She has had numerous concerns that I have been working to address. Her current concern is she feels we do not have enough staffing. I have met with her on a few occasions in an attempt to address her concerns. She has cancelled three meetings with me in the recent past. I spoke with her today and she informed me that she was not happy with the staffing and would be contacting Governor Shumlin and would be encouraging other family members to do the same. The Vets home staffing ratios are above what is required by state regulation. I do have an issue with excessive call outs and FMLA use. I have been working to address this issue. If you should need additional information please do not hesitate to contact me.

Thank you,

Melissa Jackson, BSW, LNHA
Vermont Veterans Home
325 North St
Bennington, VT
05201

[REDACTED]
<http://vvh.vermont.gov>

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People Summary for Ms. Susan L. Morale (384224)

Primary Addresses:

Primary Home Type	Number/E-Mail	Description	Primary
Home Phone			Yes
E-Mail			Yes

Other Information:

Household: Member of a 2 member household consisting of: Mr. Harley L. Morale, Ms. Susan L. Morale
Household Name: The Morale Family
Household Salutation: Mr. Morale and Family
Formal Salutation: Ms. Morale
Informal Salutation: Susan
Birthdate: 1/1/1955
Affiliations: EMAIL OPTIN - Email Optin to Newsletter Subscription, VOTER_2011 - VOTER_2011
Added to the database: 11/4/2011
Last updated: 6/4/2012 9:11:29 AM by IMA: IMA Added New Home Phone

Pending Mail:

Completed Mail:

#	Mail ID	Date In	Method In	Assigned To	Issues	Method Out	Letter Name	Date Out	Batch
1	5035490	1/10/2013	NONE	Leigh Appleby		imail	2013 Inaugural SO'S Newsletter v.1	1/10/2013	
2	5035316	1/7/2013	NONE	Leigh Appleby		imail	Inauguration invite v.3	1/7/2013	
3	5034330	12/26/2012	NONE	Leigh Appleby		imail	Inauguration invite v.1	12/26/2012	
4	5026046	7/2/2012	NONE	Leigh Appleby		imail	June 2012 Newsletter v.1	7/2/2012	
5	5023744	6/5/2012	imail	Carolyn Wesley	Health Care	phone		6/13/2012	
Comments:		Called and referred her to DVHA.							

Open Workflow:

Closed Workflow:

Calendar Info:

Board Info:

People Summary for Mr. William J. Bandy (117174)

Primary Addresses:

Primary Home: [REDACTED]

Other Information:

Household: Head of a 1 member household
 Household Name: The Bandy Family
 Household Salutation: Mr. Bandy and Family
 Formal Salutation: Mr. Bandy
 Informal Salutation: William
 Birthdate: 1/1/1944
 Affiliations: VOTER_2011- VOTER_2011
 Added to the database: 11/4/2011
 Last updated: 11/14/2011 9:39:54 AM by QC: Background Address Checker update performed.

Pending Mail:

Completed Mail:

#	Mail ID	Date in	Method In	Assigned To	Issues	Method Out	Letter Name	Date Out	Batch
1	5030366	9/14/2012	phone	Carolyn Wesley	Veterans	usmail	Customized Bennington Veteran's Home v.1	9/28/2012	VETERANS HOME
	Comments: William Bandy of Moretown called today very concerned about the news the Veteran's home might lose it's federal funding. Mr. Bandy is a veteran himself and very upset about the situation. I explained that we were working closely to help make sure the home would meet federal requirements but he requested a letter outlining what exactly was being done. [REDACTED]								
2	5015422	2/22/2012	phone	Carolyn Wesley	Education and UVM	usmail	Customized Default Format v.1	3/1/2012	
	Comments: 2nd call (1st didn't get logged in IQ that's on me). Requesting a letter from the Governor explaining why he disproportionately funds UVM above the other state colleges. Will be writing a letter to the editor.								


Open Workflow:

Closed Workflow:

Calendar Info:

Board Info:

September 28, 2012

Mr. William J. Bandy


Dear William,

Thank you for contacting my office regarding the Veteran's Home in Bennington.

I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding.

While CMS had been concerned about several issues at the Veteran's Home, they were impressed by the intensity of purpose with which staff, management, board, and the state sought to address and correct those issues. The board and administration took several decisive and positive steps, and brought in highly respected consultants in the field of nursing home care to make recommendations to staff and management. These decisions have already changed the delivery of services at the Home, and will help ensure the quality of life that Vermont veterans deserve long into the future.

I am grateful that the Vermont Veteran's Home will continue to provide critical services to Vermont veterans and the community of Bennington. My administration will work hard to ensure its continued success. Thank you again for your input on this issue and please don't hesitate to contact my office if I can ever be of assistance.

Sincerely,

Peter Shumlin
Governor

PS/cw

Dear John,

Thank you for contacting me regarding the Veteran's Home in Bennington.

I am happy to let you know that, thanks to the hard work of the dedicated staff, administration and board at the Veterans Home, our Congressional delegation, and my administration, the Centers for Medicare and Medicaid Services (CMS) have concluded that we've made the changes necessary to continue serving Vermont veterans in Bennington with full federal funding.

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I am grateful that the Vermont Veteran's Home will continue to provide critical services to Vermont veterans and the community of Bennington. My administration will work hard to ensure its continued success. Thank you again for your input on this issue and please don't hesitate to contact my office if I can ever be of assistance.

109 State Street, Pavilion
Montpelier, Vermont 05609
802-828-3333

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