

STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Complaint Investigation 2025-AHP-40031, 40060, & 40062		Date Completed: 1/28/2025
Name of Facility: BIRCHWOODS AT CANCO SENIOR LIVING Administrator: JESSICA POULIN ASSISTED LIVING PROGRAM Census: 80 Total Capacity: 80 License Number: ALP38676		Address: 86 HOLIDAY DR PORTLAND, ME 04103-4368
Summary Statement of Deficiencies	Plan of Correction	Completion Date

Birchwoods at Canco Senior Living, an Assisted Living Program, is not in compliance with Part of 10-144, Chapter 113, Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Assisted Living Program and Infection Prevention and Control.

The following requirements were not met:

7 MEDICATIONS AND TREATMENTS

7.9 Destroying medications. For medications administered by the assisted living program, all discontinued medications, expired medications or medications prescribed for a deceased consumer, except controlled substances and individual doses, shall be destroyed by the administrator or the administrator’s designee and witnessed by one (1) competent person who is not a consumer. The destruction shall be conducted so that no person can use, administer, sell or give away the medication. Individual unit doses may be returned to the pharmacist and a credit or rebate made to the person(s) who originally paid for the medication. Amounts destroyed or returned shall be recorded on the consumer’s record, with the signature of the administrator or the administrator’s designee and witness(es). Destruction or return to the pharmacy shall take place within thirty (30) calendar days of expiration or discontinuation of a medication or following the death of the consumer.

This has not been met as evidenced by:



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Based on observation, record review, and interview, the facility failed to dispose of medications within thirty calendar days following the death of the consumer. (Resident #4)

Findings:

Surveyors reviewed Resident #4's record. Resident #4 was prescribed Morphine prior to passing on 11/8/2024. The facility Schedule II bound book documented the last administration of this medication to Resident #4 occurred on 11/8/2024.

Surveyors observed the bottle of Morphine being stored in the safe on 1/28/2025 at approximately 12:30 p.m. Nurse #1 was interviewed at the time of the observation and confirmed this medicine had not been destroyed as required.

7.10 Schedule II controlled substances. All Schedule II controlled substances administered by the assisted living program, listed in the Comprehensive Drug Abuse Act of 1970, Public Law 91-513, Section 202 and as amended pursuant to Section 202 are subject to the following standards *[Class II]*

7.10.3 All Schedule II controlled substances on hand shall be counted at least weekly and records kept of the inventory in a bound book with numbered pages, from which no pages shall be removed. *[Class II]*

This has not been met as evidenced by:

Based on record review, observation, and interview, the facility failed to maintain a weekly inventory count in the bound book for Schedule

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II-controlled substances on hand at the facility for 2 residents.
(Resident #1 and Resident #4.)

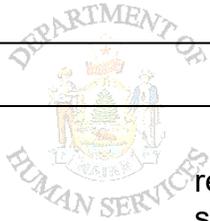
Findings:

1. On 1/28/2025 Resident #1’s Schedule II bound book documentation was reviewed. On page 27, Resident #1 had an entry for “Morphine 30 ml, give 0.25 ml PRN, every 1h as needed.” On 12/30/2024, Resident #1 received their last dose of Morphine with 29.25 ml remaining as documented in the bound book. After this date there is no evidence in the bound book that the medication was counted. On 1/28/2025 Nurse #1 could not provide evidence this medication had been disposed of and there were no weekly counts being conducted.

2. On 1/28/2025 Resident #4’s Schedule II bound book inventory was reviewed. On page 22, Resident #4 had an entry for “Morphine .25 PO every 6hrs.” The bound book individual count shows the medication was last given on 11/8/2024. The medication was counted on 11/8/2024 and not counted again. The medication was observed by Surveyors in the safe in the nurse’s office on 1/28/2025.

An interview with Nurse #1 on 1/28/2025 at approximately 12:25 p.m., confirmed Schedule II medications in the safe had not been counted weekly.

7.10.5 All excess and undesired Schedule II controlled substances in the possession of a licensed assisted living program that are no longer required for a consumer, shall be disposed of in the following manner. The Administrator or a licensed or



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registered nurse shall list all such unused substances, and keep the same in a securely locked area apart from all other drugs. Disposal shall be in the form of incineration or flushing into the sewage system only in the presence of an authorized representative of the Department, a licensed pharmacist, a member of the Commission on Pharmacy or an authorized representative of the Drug Enforcement Agency. At least one (1) of the persons must be a person who did not dispense the drug or who was the last person to inventory the drug. Documentation of such destruction shall be made on the consumer's record and in the inventory record required in Section 7.10.3, signed by the individual authorized to dispose of the drug. [Class II]

This has not been met as evidenced by:

Based on record review, observation, and interview, the facility failed to dispose of Schedule II controlled substances as required. (Resident #1)

Findings:

Resident #1 had been prescribed Morphine prior to passing away on 12/30/2024. The facility Schedule II bound book showed the last administration of this medicine was given on 12/30/2024. There was no documentation in the bound book to show this medication had been removed or disposed of after Resident #1 passed.

Surveyors interviewed Nurse #1 on 1/28/2025 at approximately 12:15 p.m. Nurse #1 reported staff are required to document in the bound book when the medication is removed from use. The



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medication is then kept in a safe in the nurse's office until it can be disposed of. Nurse #1 reported that when a medication is disposed of, there is a disposal log form with the initials of the two staff who witnessed the disposal. Nurse #1 stated their initials must be on that form as the authorized person to dispose of the medication.

Surveyors asked to see where the medication was being stored as Nurse #1 stated they were backlogged with disposing of medications. Nurse #1 opened the safe but was not able to find the Morphine medication.

Nurse #1 provided Surveyors with a copy of the disposal form for Resident #1 which included the Morphine medication but did not include two authorized persons signatures on the form.