



MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES LICENSING AND CERTIFICATION ASSISTED HOUSING

STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 5/22/2023
Name of Facility: SHARED LIVING GROUP HOME Administrator: PAMELA JEAN ERSKINE PNMI LEVEL III RESIDENTIAL CARE FACILITY Census: 6 Total Capacity: 6 License Number: PNC979	Address: 468 CORINNA RD SAINT ALBANS, ME 04971-7008	
Summary Statement of Deficiencies	Plan of Correction	Completion Date

<p>Shared Living Group Home, a Level III PNMI Residential Care Facility, is not in compliance with Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level III, Part of 10-144, Chapter 113. The following requirements were not met:</p> <p>3 LICENSING</p> <p>3.25.2 Signing a contract. Each provider and each resident, or someone authorized to act on the resident's behalf, shall sign a standard contract issued by the department, attached as Appendix A, at the time of any modification of an existing contract and with all new admissions. The resident and/or resident's legal representative shall be given an original of the signed contract and the provider shall keep a duplicate in the resident's file. No one other than the resident shall incur any responsibility for the resident's obligations by signing the contract for admission of the resident. Financial responsibility for the resident's expenses can only be assumed according to Section 3.25.3.7.</p> <p>Based on record review and interview, 1 of 2 records did not contain a standard contract.</p> <p>Finding:</p>	<p align="center">Click or tap here to enter text.</p>
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<p>On 5/22/2023 a review of Resident #1's record was completed. Resident #1's record did not contain a standard contract signed by the provider and the Resident's legal representative.</p> <p>This finding was confirmed by the Team Leader at the time of the survey and at the exit interview on 5/22/2023.</p> <p>7.3 Medication storage.</p> <p>7.3.3 Medications/treatments administered by the assisted living program for external use only shall be kept separate from any medications to be taken internally. [Class III]</p> <p>This has not been met as evidenced by:</p> <p>Based on observation and interview, the facility failed to ensure that medications for external use only were kept separate from medications to be taken internally.</p> <p>Finding:</p> <p>On 5/22/2023 a review of the facilities house stock medication storage bins were completed. Internal medications and external use medications were stored in the same bin and were not stored separately.</p> <p>This finding was confirmed with the Team Leader at the time of the survey and at the exit interview on 5/22/2023.</p> <p>7.9 Destroying medications. For medications administered by the residential care facility, all discontinued medications, expired medications or medications prescribed for a deceased</p>		



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<p>resident, 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 resident. 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 resident'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 sixty (60) calendar days of expiration or discontinuation of a medication or following the death of the resident.</p> <p>This has not been met as evidenced by:</p> <p>Based on observation and interview the facility failed to destroy expired medications within 60 calendar days.</p> <p>Finding:</p> <p>On 5/22/2023 an inspection of the facility's discontinued and expired medication bin was completed. The bin contained medications that had not been destroyed within 60 days of expiration or discontinue.</p> <p>This finding was confirmed with the Team Leader at the time of the survey and at the exit interview on 5/22/2023.</p>		