

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION <b>Biennial Survey</b>		Date Completed: 4/22/2024
Name of Facility: HAMLIN ROAD Administrator: MARK OKENY LEVEL I RESIDENTIAL CARE FACILITY Census: 2 Total Capacity: 2 License Number: RCA38999		Address: 14 HAMLIN RD FALMOUTH, ME 04105-2206
<b>Summary Statement of Deficiencies</b>	<b>Plan of Correction</b>	<b>Completion Date</b>

Hamlin Road, a Level I Residential Care Facility, is not in substantial compliance with Part of 10-144, Chapter 113, Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level I Residential Care Facility.

The following requirements were not met:

**3.31 Administrative and resident records.**

**3.31.2 Location of records.** All resident records, resident finances, admission/discharge records and census logs shall be readily accessible to the Department even in the event of a change of ownership or administration, unless this is done pursuant to a court order or to Section 5.12 of these regulations. Other administrative records, including personnel records, shall be made available with reasonable notice by the Department. All records shall be maintained in a format that is readily accessible and available to all appropriate staff.

*This has not been met as evidenced by:*

Based on record review and interview, two of two residents did not have records maintained in a format that was readily accessible and available to all appropriate staff. (Resident #1 and Resident #2)

Findings:

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Resident #1 and Resident #2's records were reviewed during onsite survey on 4/22/2024. The House Manager provided binders for each resident with their documentation for Surveyor to review. Surveyor did not find all required documentation to be in the binders. The House Manager was interviewed and stated the Program Manager was bringing additional resident files.

The Program Manager arrived at the facility with additional binders. Surveyor reviewed the additional binders, and Resident #1 and Resident #2's binder contained current release of information forms that staff at the facility would need for their work. The Program Manager stated they were in the process of reorganizing their record keeping.

This finding was reviewed at the exit meeting with the Director, Program Manager, and House Manager at approximately 11:30 a.m.

## 7 MEDICATIONS AND TREATMENTS

**7.1 Use of safe and acceptable procedures.** The administrator shall ensure that all persons administering medications and treatments (except residents who self-administer) use safe and acceptable methods and procedures for ordering, receiving, storing, administering, documentation, packaging, discontinuing, returning for credit and/or destroying of medications and biologicals. All employees must practice proper hand washing and aseptic techniques. A hand-washing sink shall be available for staff administering medications. *[Classes I/II/III]*

*This has not been met as evidenced by:*

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Based on record review and interview, for one of two residents the administrator did not ensure safe and acceptable methods and procedures were used for administering and documentation of medications. (Resident #2)

Findings:

Surveyor reviewed Resident #2's medication administration record (MAR) dated April 2024 and requested copy of Resident #2's signed orders from the House Manager, Program Manager, and Director during onsite survey. They were unable to produce signed orders during onsite survey from 9:30 a.m. until 11:30 a.m. House Manager confirmed staff were administering medications to Resident #2.

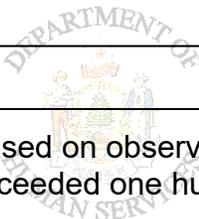
Surveyor gave additional time for the Program Manager to produce a copy of the signed order by the end of the day on 4/22/2024. Surveyor did not receive the signed orders and sent an email the following day to Program Manager, House Manager, and Director requesting a copy of signed medication orders. An email from the Program Manager was received on 4/23/2024, however the orders were signed on 4/23/2024, the day after onsite survey.

This finding was reviewed during the exit meeting with the Director, Program Manager, and House Manager on 4/22/2024.

**16 SANITATION AND SAFETY**

**16.7 Hot water.** Water temperatures in resident areas shall not exceed one hundred twenty degrees (120°) Fahrenheit. Hot water shall be supplied in adequate quantities. [Class III]

*This has not been met as evidenced by:*



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Based on observation and interview, the hot water temperature exceeded one hundred twenty degrees Fahrenheit.

Findings:

On 4/22/2024 at approximately 9:44 a.m., Surveyor measured hot water temperature in the main bathroom. The water temperature was 136.2°F. Surveyor interviewed House Manager who stated they adjust the water by turning on the cold and hot water at the same time.

Surveyor reviewed this finding with Director, Program Manager, and House Manager during the exit meeting on 4/22/2024.