

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION End of Provisional Survey		Date Completed: 9/28/23
Name of Facility: HEARTWOOD COTTAGE Administrator: ROBIN E. BOGGS LEVEL I RESIDENTIAL CARE FACILITY Census: 2 Total Capacity: 2 License Number: RCA39039		Address: 61 BARROWS DR TOPSHAM, ME 04086-1327
Summary Statement of Deficiencies	Plan of Correction	Completion Date

Heartwood Cottage, a Level I Residential Care Facility, is not in substantial compliance with Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level I Residential Care Facilities, Part of 10-144, Chapter 113. The following was not met:

16 Sanitation and Safety

16.1 Maintenance. The facility must be kept clean and shall be maintained in a condition ensuring the health and safety of residents. All refuse collected in common areas or from resident’s rooms shall be stored in cleanable, rodent-proof, covered containers, pending removal. *[Class III]*

16.1.1 The facility and surrounding premises shall show evidence of routine maintenance and housekeeping and repair of wear and tear shall be made in a timely fashion.

This was not met as evidenced by:

Based on observation and interview, the facility did not show evidence of routine maintenance, repair of wear and tear completed in the interior and exterior of the facility.

Findings:

On 9/28/23 a tour of the interior and exterior of the facility was conducted. The following areas of the facility were observed to not be maintained:

DEPARTMENT OF HUMAN SERVICES Summary Statement of Deficiencies	Plan of Correction	Completion Date
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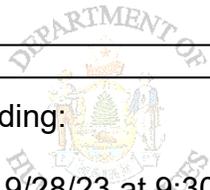
1. Interior hallway leading to resident bedrooms had gashes in the drywall along the lower area of the wall.
2. Wall tiles and wallpaper was absent/torn from the wall in the kitchen near the refrigerator.
3. Two sections of plaster were missing from the bathroom ceiling.
4. The exterior siding of the house appeared to be rotting from water damage along the middle of the house, around windows, and at the base of the exterior wall on the back deck. Areas of exposed wood behind the siding appeared to be rotting. Dark undefined blemishes were observed on the front siding of the house.
5. An exterior window frame was broken with exposed and damaged wood at the rear of the house.
6. An approximate nine (9) foot wide section lower half of the roof at the rear of the house was covered with leaves, moss, branches and two metal poles that appeared to be the source of the build-up of debris.

These findings were discussed and confirmed at the time of survey and reviewed at the exit interview with the Team Leader on 9/28/23.

16.6 Heat. Resident areas of the facility shall be maintained at a temperature of, at least, seventy degrees (70°) Fahrenheit or higher as necessary to ensure the comfort of the residents. Thermometers shall be placed in all resident areas. This does not apply to bedrooms where residents control the temperature. *[Class III]*

This was not met as evidenced by:

Based on observation and interview, the facility failed to ensure a temperature of at least seventy degrees (70°) Fahrenheit was maintained in resident areas of the facility.

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Finding:

On 9/28/23 at 9:30 a.m. the living room monitor heater was set to 58 degrees Fahrenheit and the rooms temperature reading was 61 degrees Fahrenheit. The resident bedroom and bathroom heat controls were set to off. Residents rely on staff to set the heat at all temperature control settings in the facility.

This finding were discussed and confirmed at the time of survey and reviewed at the exit interview with the Team Leader on 9/28/23.