

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

	STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Complaint Investigation # 2023-AHP-32776		Date Completed: 5/2/2023
	Name of Facility: ADDISON HOUSE Administrator: PAUL L. CHARTRAND LEVEL III RESIDENTIAL CARE FACILITY Census: 3 Total Capacity: 4 License Number: RCC17	Address: 2 RIVERVIEW LANE ADDISON, ME 04606	
Summary Statement of Deficiencies	Plan of Correction	Completion Date	

Addison House, a Level III Residential Care Facility, is not in substantial compliance with Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level III Residential Care Facilities, Part of 10-144, Chapter 113. The following requirements were not met:

3.4 Application and licensure.

3.4.3 Additional licensing requirements. Prior to the issuance of a license and prior to re-licensure, the facility shall:

3.4.3.3 Comply with all other applicable laws and regulations pertaining to licensing; and

This has not been met as evidenced by:

Based on observations and an interview, the facility failed to obtain an inspection of the residents' van that was due in 2/23.

Findings: On 4/27/23 surveyor observed the inspection sticker on the residents' van and found that the van's inspection was due in 2/23. The house manager verified at survey on 4/27/23, that the van was used to transport residents but had not been inspected in 3/23 or 4/23.