

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 1/30/2024
Name of Facility: GALLAGHER COTTAGE WAIVER Administrator: RACHEL FULLER LEVEL III RESIDENTIAL CARE FACILITY Census: 4 Total Capacity: 4 License Number: RCC2028		Address: 9 PRATT ROAD HINCKLEY, ME 04944
Summary Statement of Deficiencies	Plan of Correction	Completion Date

GALLAGHER COTTAGE WAIVER, a LEVEL III 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 III RESIDENTIAL CARE FACILITY. The following requirements were not met:

5 RESIDENT RIGHTS

5.12 Right to confidentiality. Residents’ records and information pertaining to their personal, medical and mental health status is confidential. Residents and their legal representatives shall have access to all records pertaining to the resident at reasonable times, in the presence of the provider or his/her representative, within one (1) business day of the request. Residents and their legal representatives are entitled to have copies made of their record within one (1) business day of the request. The licensee and employees shall have access to confidential information about each resident only to the extent needed to carry out the requirements of the licensing regulations or as authorized by any other applicable state or federal law. The written consent of the resident or his/her legal representative shall be required for release of information to any other persons except authorized representatives of the Department or the Long Term Care Ombudsman Program. The Department shall have access to these records for determining compliance with these regulations. Records shall not be removed from facility, except as may be

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necessary to carry out these regulations. Upon admission, each resident shall sign and date a written consent which lists individuals, groups, or categories of individuals with whom the program may share information (e.g., sons, daughters, family members or duly authorized licensed practitioners, etc.). A written consent to release of information shall be renewed and time dated every thirty (30) months, pursuant to 22 M.R.S.A. §1711-C (4). Consent may be withdrawn at any time. *[Class IV]*

This has not been met as evidenced by:

Based on record review and interview, a resident record did not contain a current written consent to release information.

Finding:

On 1/29/2024 a review of Resident #1's record was completed. Resident #1's record did not contain a current written consent to release information for Resident #1.

At the time of the survey, an interview was conducted with the Team Lead, who also could not locate a valid current written consent to release information for Resident #1.

This finding was confirmed by the Team Lead at the time of the survey and at the exit interview on 1/29/2024.

7 MEDICATIONS AND TREATMENTS

7.7 Expired and discontinued medications. For all medications administered by the residential care facility, medications shall be removed from use and properly destroyed after the expiration date and when discontinued, according to

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procedures contained in Section 7.9. They shall be taken out of service, and locked separately from other medications until reordered or destroyed. *[Class III]*

This has not been met as evidenced by:

Based on observations of the facility and an interview with staff, the facility failed to ensure that expired medications were removed from use and properly destroyed after the expiration date.

Findings:

On 1/29/2024 a review of the facilities house stock medication was completed. The following medications were stored with active medications:

- Ibuprofen (expired: 10/2023)
- Senna (expired: 6/2023)
- Triple Antibiotic Ointment (expired: 5/2022)

This finding was confirmed with the Team Lead at the time of the survey and at the exit interview on 1/29/2024.

7.12 Medication/treatment administration records (MAR) for medications administered by the residential care facility.

7.12.1 Individual medication/treatment administration records shall be maintained for each resident and shall include all treatments and medications ordered by the duly authorized licensed practitioner. The name of the medication, dosage, route and time to be given shall be recorded in the medication/treatment administration record. Documentation of treatments ordered and time to be done shall be maintained in

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the same manner. These rules apply only to treatments ordered by licensed health care professionals. [Class III]

This has not been met as evidenced by:

Based on record review, observations, and an interview, there were medications listed on a duly authorized licensed practitioner order that were not transcribed to a resident's MAR.

Finding:

On 1/29/2024 a review of Resident #1's January 2024 MAR was completed. Resident #1 had a duly authorized licensed practitioner order dated 10/6/2023 for Imodium AD 2mg, Docusate Sodium 100mg and Pepto-Bismol. These orders were not transcribed on Resident #1 January 2024 MAR and there was no stop order in the record.

On 1/29/2024 a review of Resident #2's January 2024 MAR was completed. Resident #2 had duly authorized licensed practitioner order, dated 9/28/2023 for Robitussin DM. This order was not transcribed on Resident #2's January 2024 MAR and there was no stop order in the record.

This finding was confirmed with the Team Lead at the time of the survey and at the exit interview on 1/29/2024.

17 SANITATION AND SAFETY

17.7 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 an interview, the facility failed to ensure water temperatures in resident areas did not exceed 120 degrees Fahrenheit.

Finding:

The hot water temperature was tested on 1/29/2024 at approximately 10 a.m. and exceeded 120 degrees Fahrenheit. The hot water temperature in bathroom #1 was 121.5 degrees Fahrenheit and the temperature in the kitchen was 122.3 degrees Fahrenheit.

On 1/29/2024 the Team Lead contacted maintenance and had the temperature lowered below 120 degrees Fahrenheit.

This finding was confirmed with the Team Lead at the time of the survey and at the exit interview on 1/29/2024.