

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 6/15/2023
Name of Facility: HOUGHTON HOUSE Administrator: KAREN WISWELL LEVEL III RESIDENTIAL CARE FACILITY Census: 0 Total Capacity: 5 License Number: RCC38695		Address: 3 E HOUGHTON ST MADISON, ME 04950-1304
Summary Statement of Deficiencies	Plan of Correction	Completion Date

Houghton 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:

17 SANITATION AND SAFETY

17.1 Cleanliness. 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]*

17.1.1 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 has not been met as evidenced by:

Based on observation and interview, the facility failed to ensure routine maintenance, housekeeping, and repair of wear and tear to the facility.

Findings:

On 6/15/2023, an inspection of the facility and surrounding premises was completed. The following items were determined to need repair, housekeeping, and evidence of routine maintenance:

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1. Refrigerator in residents' kitchen has a broken seal and a rusted grate
2. Broken swing on side deck
3. Window in the eat-in kitchen is cracked
4. First Bedroom on Right Side – paint was peeling, stained, and missing.
5. First Bedroom on Right Side - holes in wall/sheetrock
6. Second Bedroom on Right Side – paint was peeling, stained, and missing.
7. Second Bedroom on Right Side – holes in wall/sheetrock
8. First Bedroom on Left Side – stained ceiling tiles

These findings were confirmed with the Program Manager during the inspection and at the exit conference on 6/15/2023.