



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

STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION <b>Biennial Survey</b>	Date Completed: 6/11/2024
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Name of Facility: Atlantic Shores Administrator: Jeffrey Strout Level III – Residential Care Facility. Census: 6 Total Capacity: 6 License Number: RCC38876	Address: 100 Marshville Rd. Harrington, ME 04643-3121
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<b>Summary Statement of Deficiencies</b>	<b>Plan of Correction</b>	<b>Completion Date</b>
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<p>Atlantic Shores, a Level III Residential Care Facility, is in substantial compliance with the Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level III Residential Care Facilities and Infection Prevention and Control Part of 10-144, Chapter 113.</p>	<p>Click or tap here to enter text.</p>	<p>Click or tap here to enter text.</p>
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