



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

STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 11/18/2024
Name of Facility: Sewall Street Home Administrator: Paula Stevens Level 3 Residential Care Facility. Census: 4 Total Capacity: 4 License Number: RCC39477	Address: 13 Sewall Street Island Falls, ME 04747	
Summary Statement of Deficiencies	Plan of Correction	Completion Date

Sewall Street Home, a Level III Residential Care Facility, is not 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.

The following requirements were not met:

14 Safety Standards

14.3 Drills or rehearsals

14.3.2 Facilities with 3 or more beds shall conduct drills or rehearsals of the emergency steps to be taken at irregular times of the day, at least 6 (six) times per year spaced throughout the year. Two of the six drills must be conducted while residents are asleep. [Class II]

This has not been met as evidenced by:

Based on record review and interview, the facility failed to conduct evacuation drills or rehearsals of the emergency steps to be taken at least 6 times per year with two of these drills conducted while residents were asleep.

Findings:



Summary Statement of Deficiencies	Plan of Correction	Completion Date
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On 11/18/2024, a review of the facilities evacuation drill logs was completed. The following drills or rehearsals were conducted since the last licensing biennial survey on 11/23/2022 (* indicates asleep drill):

1. 12/11/2022 at 11:50am
2. 04/26/2023 at 10:40am
3. 02/17/2024 at 12:45pm
4. 04/26/2024 at 5:30am*
5. 07/03/2024 at 11:05am
6. 10/22/2024 at 5:30am*

This finding was reviewed and confirmed with the Administrator and House Manager at the exit interview.