

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 12/31/2024
Name of Facility: THE HERON HOUSE Administrator: NICHOLE LESSARD LEVEL IV RESIDENTIAL CARE FACILITY Census: 21 Total Capacity: 24 License Number: RCD39488		Address: 92 US ROUTE 1 CUMBERLAND FORESIDE, ME 04110-1315
Summary Statement of Deficiencies	Plan of Correction	Completion Date

THE HERON HOUSE, a Level IV Residential Care facility, is not in compliance with Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level IV Residential Care Facilities and Infection Prevention and Control, Part of 10-144, Chapter 113.

The following requirements have not been met:

Section 2. Infection Prevention and Control

- A. Infection Prevention and Control (IPC). The facility must establish, implement, and maintain an Infection Prevention and Control Plan (IPCP) to control the transmission of infectious diseases amongst residents, staff, visitors, and other individuals providing services under a contractual arrangement.
 - A.2 The facility must develop a written IPCP. The development process must include:
 - a. A risk assessment and overall program review. The risk assessment and program review must include:
 - i. Identification of resources necessary to care for residents during day-to-day operations and emergencies;
 - ii. Identification of any policies/protocols that need to be developed; and

 Summary Statement of Deficiencies	Plan of Correction	Completion Date
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- iii. Review of current Maine Center for Disease Control and Prevention (MeCDC) standards and federal Center for Disease Control (CDC) guidelines. The facility should keep a log noting specifically what guidelines were utilized, and identification of any changes needed to meet those standards.
- b. The facility must review and update the plan and all related policies/protocols annually, and whenever there is any change or plan for change that would require a substantial modification to any part of the current IPCP.
- c. The plan must be updated as needed to reflect current Maine Center for Disease Control and Prevention (MeCDC) standards and federal Center for Disease Control (CDC) guidelines. The facility should keep a log noting specifically what guidelines were utilized, and identification of any changes needed to meet those standards.

This has not been met as evidenced by:

Based on record review and interviews, the facility failed to develop a written IPCP that includes all required information.

Findings:

The Surveyor requested to review IPCP on 12/3/2024. This request was made to the Director of Operations and Administrator.

The Administrator or Director of Operations were not able to provide a written IPCP to the Surveyor for review. Administrator reported

 Summary Statement of Deficiencies	Plan of Correction	Completion Date
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staff use a computer application that provides information on infection control.

This finding was reviewed with the Administrator at the exit meeting on 12/3/2024 at approximately 1:50 p.m.

15 SANITATION/DIETARY SERVICES

15.3 Food storage. All food shall be stored using safe and sanitary methods. *[Class III]*

15.3.2 Food or containers of food shall not be stored under, or exposed to, unprotected sewer lines or water lines, except for automatic fire protection sprinkler heads that may be required by law.

This has not been met as evidenced by:

Based on observation and staff interview, the facility failed to ensure food items were not stored under unprotected sewer or waterlines.

Findings:

On 12/31/2024 surveyor observed the dry food storage area in the facility basement.

Top shelves of two racks that stored dry food goods were observed to be stored under water lines with no protection.

15.3.3 Shelving in storage areas, refrigerators and freezers shall be in good condition with cleanable surfaces.

This has not been met as evidenced by:

 Summary Statement of Deficiencies	Plan of Correction	Completion Date
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Based on observation and staff interview, the facility failed to ensure some shelves in the dry food storage area basement had cleanable surfaces.

Findings:

On 12/31/2024 surveyor observed the dry food storage area in the basement.

A rack that stored dry food items was observed to have unfinished wood surfaces, creating an uncleanable surface.

15.13 Second-grade products prohibited. Second-grade products such as unlabeled canned goods, home canned goods, improperly sealed or unsealed containers or packages, outdated food and similar foods are prohibited from use.
[Class I/II]

This has not been met as evidenced by:

Based on observation and staff interview, the facility failed to ensure outdated food items were prohibited from use.

Findings:

On 12/31/2024 surveyor observed food items stored in the basement refrigerator.

A leftover container of Marinara sauce was dated: Preparation date 12/24, use by 12/27.

A leftover container of pasta was dated: 12/26 -12/29.

16 SANITATION/PHYSICAL PLANT REQUIREMENTS

 Summary Statement of Deficiencies	Plan of Correction	Completion Date
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16.6 General condition of the facility and surrounding premises.

16.6.1 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 staff interview, the facility failed to ensure there was evidence of routine maintenance in some areas.

Findings:

On 12/31/2024 a facility tour was conducted with the following observations.

1. A call bell was tested at large shower in the “bathing suite”. Call bell would light up on panel but did not sound. It was later confirmed that an additional shower call bell in “bathing suite” would also light up on panel but not sound. Staff confirmed system was supposed to sound at panel.
2. Rear stairs and railing on “East” were observed to have two (2) spongy boards and wobbly handrails.
3. Ice Machine in basement was observed to have a small amount of residue buildup on interior walls.

16.10 Water temperatures. Water temperatures in resident areas shall not exceed one hundred twenty degrees (120°) Fahrenheit. Hot water shall be supplied in adequate quantities. *[Class III]*



Summary Statement of Deficiencies	Plan of Correction	Completion Date
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This has not been met as evidenced by:

Based on observation and staff interview, the facility failed to ensure hot water temperatures in resident areas did not exceed 120 degrees Fahrenheit (F).

Findings:

On 12/31/2024 at approximately 10:00 a.m. the hot water temperature was measured in "East" shower room.

Hot water temperature measured 123 F.

Facility had a plan to ensure resident safety before surveyor exit on 12/31/2024 at approximately 12:30 p.m.

All 12/31/2024 findings were confirmed with Director of Operations at the time of observation and reviewed with Director of Operations at exit interview on 12/31/2024 at approximately 12:30 p.m.