

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION Biennial Survey		DATE COMPLETED 10/31/2025
NAME OF FACILITY: WOODLANDS ASSISTED LIVING OF WATERVILLE ADMINISTRATOR: RENEE HANSCOM LICENSE NUMBER: PND1075 CENSUS: 56 TOTAL CAPACITY: 58		ADDRESS: 147 W RIVER RD WATERVILLE, ME 04901-5070
WOODLANDS ASSISTED LIVING OF WATERVILLE, is not in compliance with part of 10-144 C.M.R. Chapter 113, Assisted Housing Program Licensing Rule; Residential Care Facilities.		
The following requirements were not met:		
RULE	SUMMARY STATEMENT OF DEFICIENCIES	

**Section 5. Medications And Treatments**

**N. Medication/treatment administration records (MAR).** Individual medication/treatment administration records must be maintained for each resident for medications administered by the facility including all treatments and medications ordered by the duly authorized licensed practitioner. *[Class III]*

1. Each MAR must include:
  - c. Whenever a medication or treatment is started, given, refused or discontinued, including those ordered to be administered PRN, the medication or treatment must be documented on the medication/treatment administration record. It must be initialed by the administering individual. A medication or treatment must not be discontinued without evidence of a stop order signed and dated by the duly authorized licensed practitioner;

This has not been met as evidenced by:

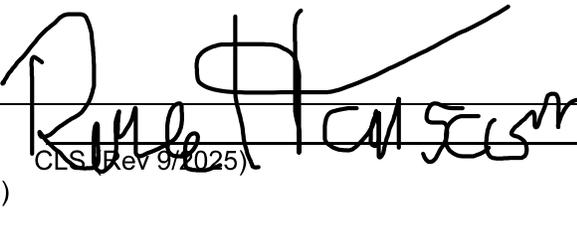
Based on record review and interview, the facility failed to ensure a Medication Administration Record (MAR) contained documentation of whether a medication was administered or refused for 1 of 6 resident records reviewed (Resident #4).

Finding:

Resident #4's MARs from 8/1/2025 through 10/30/2025 were reviewed. The October 2025 MAR had one (1) unexplained blank for one (1) medication (Morphine Sulfate oral tablet 15 mgs) scheduled daily at 2200.

This finding was confirmed with the Administrator at the exit interview on 10/30/2025.

5(N)(1)(c)

 Date:

	<p>AGENCY PLAN OF CORRECTION:          To ensure compliance with documentation of medication administration, refusal, or discontinuation, CRMA's will be provided with additional training on ensuring completion of documentation for medications that are missed. This training will be completed by December 15th. Program Coordinators will ensure documentation and incident reports are being completed for Medication errors. The Executive Director will be notified of issues and will trend medication errors, including omissions with documentation.</p>
<p>DATE COMPLETED          11/6/2025</p>	<p>TITLE OF PERSON RESPONSIBLE:          Executive Director</p>

<p>5 (N)(3)</p>	<p><b>Section 5. Medications And Treatments</b></p> <p><b>N. Medication/treatment administration records (MAR).</b> Individual medication/treatment administration records must be maintained for each resident for medications administered by the facility including all treatments and medications ordered by the duly authorized licensed practitioner. <i>[Class III]</i></p> <p>3. Medication errors and reactions must be recorded in an incident report in the resident's record. Medication errors include errors of omission, as well as errors of commission. Errors in documentation or charting are errors of omission. <i>[Class II]</i></p> <p>This has not been met as evidenced by:</p> <p>Based on record review and interview, the facility failed to record a medication error of omission incident report for an unexplained blank entry on a resident's Medication Administration Record (MAR) for 1 of 6 resident records reviewed (Resident #4).</p> <p>Finding:</p> <p>On 10/30/2025, a review of Resident #4's October 2025 MAR and facility incident reports was completed. One (1) unexplained blank entry was identified on the MAR with no corresponding medication error of omission incident report documented in the resident's record.</p> <p>This finding was confirmed with the Administrator at the time of the survey and at the exit interview on 10/30/2025.</p>
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	<p>AGENCY PLAN OF CORRECTION:</p> <p>CRMA's will be provided with additional training on ensuring completion of Incident reports for medications that are missed. This training will be completed by December 15th. Program Coordinators will ensure incident reports are being completed for Medication errors.</p>
<p>DATE COMPLETED 11/06/2025</p>	<p>TITLE OF PERSON RESPONSIBLE: Renee Hanscom, Executive Director</p>