

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  205127	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/20/2024
NAME OF PROVIDER OR SUPPLIER  Maine Veterans Home - Scarborough		STREET ADDRESS, CITY, STATE, ZIP CODE 290 US Rt 1 Scarborough, ME 04074	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0557</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to be treated with respect and dignity and to retain and use personal possessions.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 51331</p> <p>Based on record review, observation, and interviews, the facility failed to ensure that a resident was treated with dignity and respect for 1 of 26 residents reviewed. (Resident #44)</p> <p>Finding:</p> <p>Review of Quarterly Minimum Data Set (MDS), dated [DATE], revealed Resident #44 has a Brief Interview for Mental Status (BIMS) 15 of 15 indicating he/she is cognitively intact.</p> <p>On 11/18/24 at 9:57 a.m. observation of Registered Nurse (RN) #1 giving Resident #44 medications via Percutaneous Endoscopic Gastrostomy (PEG) Tube. Privacy was not provided as the bedroom door was open, the surveyor observed residents and staff passing the room at this time.</p> <p>On 11/19/24 at 1:45 p.m., during an interview Resident #44 states he/she prefers to have privacy when receiving medication administration or feedings through his/her PEG Tube.</p> <p>On 11/19/24 at 2:00 p.m. the above information was discussed with the Director of Nursing.</p>

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 44049</p> <p>Based on observations and interviews, the facility failed to adequately maintain maintenance services necessary to maintain the facility in good repair and sanitary condition for three of three units.</p> <p>Findings:</p> <p>On 11/0/24 at approximately 10:00a.m. during the environmental rounding with the Facility Manager and the Administrator the following concerns were found:</p> <p>Unit A</p> <p>Dirty ceiling tile outside room A9/10</p> <p>Dirty ceiling tile outside room A11/12</p> <p>Stained ceiling tile outside room A13/14</p> <p>Stained ceiling tile outside room A28</p> <p>Dirty ceiling tile outside room A33/34</p> <p>Unit B</p> <p>Dirty ceiling tile outside room B5/6</p> <p>Bathroom for rooms B12, B10 and B9 where the tile meets the floor is dirty</p> <p>Bathroom for rooms B16 and B15 dirty floor</p> <p>Bathroom for rooms B22, B21, B20 and B19 is dirty, where tile meets the floor is dirty, tile behind toilet is falling off.</p> <p>Stained ceiling tile B19</p> <p>Bathroom for rooms B25, B24 and B23 is dirty where the tile meets the floor.</p> <p>Bathroom B28 - sink is broken with broken pieces sitting on top of the wall cabinet</p> <p>Bathroom for rooms B31, B32, B30 and B29 has a strong urine smell and dirty floor</p> <p>Bathroom for rooms B36, B35, B34 and B33 - floor looks unclean.</p> <p>Spa room - along wall next to shower has chipped drywall. dirty floor</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Unit C</p> <p>Stained and dirty ceiling tile above Kitchen area</p> <p>Stained ceiling tile above windows in Kitchen</p> <p>Patched hole on wall near windows</p> <p>Excessive insects/debris in hanging lights in main hallway</p> <p>room [ROOM NUMBER]/2 patched paint holes on walls</p> <p>room [ROOM NUMBER] - several patched holes on wall near TV</p> <p>room [ROOM NUMBER] - Floor mat folded near bed with split end - (Facility has addressed the need and ordered new mats)</p> <p>Paint chipped off the wall outside 23/24</p> <p>Dirty ceiling tile in Main Hallway near Birdcage</p> <p>The above list was confirmed with the Administrator at approximately 10:30a.m</p>

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>37648</p> <p>Based on observations and interviews, the facility failed to adequately store, date and properly dispose of open biologicals according to manufacturer specifications in 2 of 2 medication carts observed on 1 of 3 units (Unit C).</p> <p>Findings</p> <p>1. On 11/18/24 at 12:17 p.m., observation of Unit C's medication cart for rooms 21-40 with the Registered Nurse (RN #1), the surveyor noted an opened bottle of Acidophilous with manufactures directions of refrigerate after opening and an undated Lantus/Glargine pen with manufactures directions of, use within 28 days after initial use. At this time, RN #1 confirmed the Acidophilous was not stored according to manufacturer's directions and the Insulin pen was not dated with an open date.</p> <p>2. On 11/18/24 at 12:21 p.m., observation of Unit C's medication cart for rooms 1-20 with the Licensed Practical Nurse (LPN #1), the surveyor noted an opened bottle of Acidophilous with manufactures directions of refrigerate after opening. At this time, LPN #1 confirmed the Acidophilous was not stored according to manufacturer's directions.</p>		