STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	225215	A. Building B. Wing	08/27/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Southshore Health Care Center	115 North Avenue Rockland, MA 02370

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)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests. (continued on next page)

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Based on document review and interviews, the facility failed to ensure that it maintained an effective pest control program that provided an environment that was free of pests and rodents for the 79 residents residing at the facility. Findings include: During a tour of the kitchen on 8/21/2025 at 7:56 A.M., the surveyor observed the main kitchen dry food storage area and made the following observations: -On the left side of the room there were multiple shelves of canned goods with a large amount of mouse droppings on top of the cans. During an interview on 8/21/25 at 8:20 A.M., the Food Service Director (FSD) inspected the dry storage area with the surveyor and said the cans of food with rust along the ends and mouse droppings were the emergency food supply. He said they have had a mouse problem for a while. During an interview with observation on 8/21/25 at 9:00 A.M., Resident #88 said there were mice in their room. The surveyor observed a grocery store paper bag with a loaf of bread, an open box of snacks and an unopen box of snacks, none of the items were in plastic containers and were all accessible to mice. On the windowsill in the room were seven packages of shortbread cookies. During an interview on 8/21/25 at 1:00 P.M., Resident #10 said there were mice and rats in the facility, and he/she can see them and hear them run across the room. During an interview on 8/21/25 at 1:10 P.M., Resident #51 said there are mice in the resident rooms, and the residents complain about it at the Resident Council meeting. During the Resident Council meeting on 6/19/25, five residents on the [NAME] Wing said that they have seen mice all over their rooms including on the top of their beds. The resolution was listed as: pest control vendor as (sic) been notified. During the Resident Council meeting on 7/17/25, multiple residents on both the East and [NAME] units complained that they are still seeing mice in and out of their rooms. The resolution to the issue was blank. A second resolution indicated that mouse traps were purchased and spread throughout the facility. The facility indicated they will continue to monitor the traps. During the Resident Council meeting on 8/15/25, East Wing: one resident reports he/she has seen ants and mice throughout his/her room (resolution: we have put down additional traps. I will inform the pest vendor when they come in next week). During the Resident Council meeting with the surveyor on 8/25/25 at 1:30 P.M., Resident #17 provided a written note with a concern regarding a mouse traveling from the outside into the heating duct and it then travels from room to room keeping the Resident awake half of the night. The Resident indicated that the mouse is starting to climb on things in the rooms and reported patching a hole in the tiles of the bathroom. In addition to the mouse, the Resident reported seeing ants everywhere and a cockroach or two. During a review of the Pest Control Service logs on 8/27/25, the documents indicated that the previous pest control service had not provided pest control services to the facility since 4/12/25. Further review of the Pest Control Service logs indicated that from 4/12/25 through 8/11/25 the facility was without professional pest control services. On 8/12/25, a new Pest Control Service began servicing the facility. Extensive services were documented at that time including, but not limited to:-glue boards in the drop ceiling as activity was reported by staff. The new Pest Control services' plan was to return in 2 weeks for the start of the Biweekly Pest Program. During an interview on 08/27/25 at 1:15 P.M., the Maintenance Director said that the facility did not have a professional Pest Control Service from 4/12/25 until 8/12/25, when the new Pest Control Service took over at the facility. The Maintenance Director was not aware of the reason for the previous Pest Control Service ending its relationship with the facility or the delay in obtaining a new Pest Control vendor. During an interview on 08/27/25 at 1:30 P.M., the Administrator said that he has been the administrator at the facility since 7/2/25. He said he was aware of the pest problem as reported by staff and residents and said he brought in the current Pest Control Service on 8/12/25. He could not say why the previous administration at the facility terminated their relationship with the previous Pest Control Service, or the reason for the facility failure to ensure pest control services were provided from 4/12/25 to 8/11/25. The Administrator said that he understood that the facility is required to maintain an environment for residents that is free from pests and rodents.