

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/02/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 205012		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 01/24/2024	
NAME OF PROVIDER OR SUPPLIER SUMMER COMMONS				STREET ADDRESS, CITY, STATE, ZIP CODE 21 JUNE STREET SANFORD, ME 04073			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 000	INITIAL COMMENTS			F 000			
F 727 SS=D	On 1/24/2024, an unannounced on-site visit was conducted at Summer Commons for the purpose of an investigation of complaints #ME00044315, #ME00045827, #ME00045105, and #ME00046110. It was determined that Summer Commons was not in substantial compliance with 42 CFR 483, Sub-part B-Requirements for Long Term Care Facilities RN 8 Hrs/7 days/Wk, Full Time DON CFR(s): 483.35(b)(1)-(3) §483.35(b) Registered nurse §483.35(b)(1) Except when waived under paragraph (e) or (f) of this section, the facility must use the services of a registered nurse for at least 8 consecutive hours a day, 7 days a week. §483.35(b)(2) Except when waived under paragraph (e) or (f) of this section, the facility must designate a registered nurse to serve as the director of nursing on a full time basis. §483.35(b)(3) The director of nursing may serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents. This REQUIREMENT is not met as evidenced by: Based on record review and interviews, the facility failed to use the services of a Registered Nurse (RN) for at least 8 consecutive hours a day, 7 days a week on 5 of 62 days (December 2023 and January 2024) reviewed for RN coverage. Finding: On 1/24/2024, during a review of Daily Staffing			F 727			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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.

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F 727	Continued From page 1 Postings and nursing working schedules from 12/1/2023 - 1/24/2024, they indicated that on 12/16/23 (Wednesday), 12/17/23 (Thursday), 12/23/23 (Wednesday), 1/12/24 (Friday), and 1/13/24 (Saturday) the facility did not have a Registered Nurse (RN) on duty for at least 8 consecutive hours. On 1/24/2024, at 10:45a.m., in an interview with the Director of Nursing, the surveyor confirmed the lack of RN coverage for a least 8 consecutive hours a day, 7 days a week on the dates identified in December of 2023 and January of 2024.			F 727			