

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

PRINTED: 07/22/2024
FORM APPROVED
OMB NO. 0938-0391

RECEIVED
JUL 23 2024

BY:

07/16/2024

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

205068

(X2) MULTIPLE CONSTRUCTION

A. BUILDING 01

B. WING

(X3) DATE SURVEY
COMPLETED

NAME OF PROVIDER OR SUPPLIER

SPRINGBROOK CENTER

STREET ADDRESS, CITY, STATE, ZIP CODE

300 SPRING ST

WESTBROOK, ME 04092

(X4) ID
PREFIX
TAG

SUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL
REGULATORY OR LSC IDENTIFYING INFORMATION)

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PROVIDER'S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE
CROSS-REFERENCED TO THE APPROPRIATE
DEFICIENCY)

(X5)
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E 000 Initial Comments

Federal Recertification Survey
Survey Date: 7/16/24

Springbrook Center, a long-term care facility, is in
substantial compliance with 42 Code of Federal
Regulations Part 483.73 Requirement for Long
Term Care Facilities for Emergency
Preparedness.

K 000 INITIAL COMMENTS

Federal Recertification Survey:
Survey Date: 7/16/24

Springbrook Center, a Long Term Care Facility,
was surveyed to the National Fire Protection
Association 101 Life Safety Code 2012 Edition as
reference on 42 CFR 483.90 (a-d) physical
environment and is not in substantial compliance.

K 211
SS=D Means of Egress - General
CFR(s): NFPA 101

Means of Egress - General
Aisles, passageways, corridors, exit discharges,
exit locations, and accesses are in accordance
with Chapter 7, and the means of egress is
continuously maintained free of all obstructions to
full use in case of emergency, unless modified by
18/19.2.2 through 18/19.2.11.
18.2.1, 19.2.1, 7.1.10.1

This REQUIREMENT is not met as evidenced
by:

Based on observation and interview during the
facility tour, the long-term care facility failed to
maintain the exit discharges to continuously
maintained free of all obstacles or impediments.
No furnishings, decorations, or other objects shall
obstruct exits or their access thereto, egress

E 000

K 000

K 211 The equipment found in the Sacc
Irish Hill, Lincoln, King, and Valle
corridors was relocated to an area
out of the means of egress

The Administrator or designee will
review all corridors and relocate
additionally identified equipment
found to be obstructing the egress.

The Administrator or designee will
provide education to staff on
maintaining unobstructed means of
egress.

The Administrator or designee will
audit corridors/means of egress
monthly for three months or until
resolved to ensure it is unobstructed
and report findings at the monthly
QAPI meeting

8/5/24

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

TITLE

(X6) DATE

ADMINISTRATOR

7/23/24

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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NAME OF PROVIDER OR SUPPLIER SPRINGBROOK CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 300 SPRING ST WESTBROOK, ME 04092			
(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
K 211	Continued From page 1 therefrom, or visibility thereof. Ref: NFPA 101, Life Safety Code, 2012 Edition, Sections 7.1.10.1-2, 7.1.6.4, and 19.2.3.4. Findings: On July 16, 2024, between 9:00 AM and 12:00 PM, a surveyor, with the Administrator and Maintenance Supervisor present, observed the following: 1. Sacc wing has 32 gallon soiled linen container, trash can and automatic blood pressure machine plugged in stored in corridor. 2. Irish Hill wing has 32 gallon soiled linen container and a trash can stored in corridor. 3. Lincoln Wing has 32 gallon soiled linen container and a trash can stored in corridor. 4. King House wing has 32 gallon soiled linen container, trash can and automatic blood pressure machine plugged in stored in corridor. 5. Vallee Square wing has 32 gallon soiled linen container and a trash can stored in corridor. The surveyor confirmed these findings with the Administrator and Maintenance Supervisor at the time of the observation.		K 211			
K 363 SS=D	Corridor - Doors CFR(s): NFPA 101 Corridor - Doors Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas resist the passage of smoke and are made of 1 3/4 inch solid-bonded core wood or other material capable of resisting fire for at least 20 minutes. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. Corridor doors and doors		K 363	The resident room doors for Saccarappa 5 and Lincoln 2 were repaired to positively latch. The Administrator or designee will review all resident room doors to ensure they positively latch. The Administrator or designee will provide education to the Maintenance staff on maintain positive latch on resident room doors The Administrator or designee will audit resident room doors monthly for three months or until resolved to ensure they positively latch and report findings at the monthly QAPI meeting		8/5/24

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K 363 Continued From page 2

to rooms containing flammable or combustible materials have positive latching hardware. Roller latches are prohibited by CMS regulation. These requirements do not apply to auxiliary spaces that do not contain flammable or combustible material. Clearance between bottom of door and floor covering is not exceeding 1 inch. Powered doors complying with 7.2.1.9 are permissible if provided with a device capable of keeping the door closed when a force of 5 lbf is applied. There is no impediment to the closing of the doors. Hold open devices that release when the door is pushed or pulled are permitted. Nonrated protective plates of unlimited height are permitted. Dutch doors meeting 19.3.6.3.6 are permitted. Door frames shall be labeled and made of steel or other materials in compliance with 8.3, unless the smoke compartment is sprinklered. Fixed fire window assemblies are allowed per 8.3. In sprinklered compartments there are no restrictions in area or fire resistance of glass or frames in window assemblies.

19.3.6.3, 42 CFR Parts 403, 418, 460, 482, 483, and 485
Show in REMARKS details of doors such as fire protection ratings, automatics closing devices, etc.
This REQUIREMENT is not met as evidenced by:
Based on observation and interview, the long term care facility failed to maintain two corridor door from positively latching per NFPA 101, Life Safety Code, 2012 Edition, Section 19.3.6.3.

Findings:
On July 16th, 2024 between 09:00 AM and 12:00 PM, a surveyor, with the Maintenance Manager and Administrator present, observed the

K 363

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K 363	Continued From page 3 following: 1. Resident room 5 in the Saccarappa wing did not latch. The latching mechanism did not line up with the striker plate on the door frame. 2. Resident room 2 in the Lincoln wing did not latch. The latching mechanism did not line up with the striker plate on the door frame. The surveyor confirmed these findings with the Maintenance Supervisor and Administrator at the time of the observation.	K 363			
K 918 SS=D	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a	K 918	The weekly generator inspection was completed on 7/19/24 and includes a voltage conductance test, see attached. The Administrator or designee will provide education to the Maintenance staff on documenting voltage conductance test during the weekly generator inspections. The Administrator or designee will audit generator inspection reports monthly for three months or until resolved to ensure the voltage conductance test is documented and report findings at the monthly QAPI meeting.	8/5/24	

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K 918

Continued From page 4

program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked, readily identifiable, and separate from normal power circuits. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations.

6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70)

This REQUIREMENT is not met as evidenced by:

Based on observation, interview, and weekly generator inspection documentation review during the facility tour, the long-term care facility failed to maintain the Essential Electric System Generator batteries per NFPA 110, Standard for Emergency and Standby Power Systems, 2010 edition, section 8.3.7., and NFPA 99, Healthcare Facilities Code, 2012 edition, section 6.4.4.1.1.3.

Finding:

On July 16th, 2024, between 9:00 AM and 12:00 PM, a surveyor, with the Maintenance Director and Administrator present, observed the following:

1. The weekly generator inspection reports do not show a voltage conductance test for sealed batteries or an electrolyte specific gravity reading for unsealed automotive batteries.

The surveyor confirmed this finding with the Maintenance Supervisor and Administrator at the time of the observation.

K 918

Logbook Documentation

Springbrook Nursing Care - ME - Westbrook, ME 04092-3914

Task Name: Visual inspection or exercise generator (with no load), perform routine checks, create entry in logbook.

Marked done on-time by Kris Anderson on 7/19/2024.



Serial #	Building	Location	Make & Model	Description
272969	Main Building	Outside	100ROZJ81	Emergency Power Generators

Date Completed	7/19/2024
Start Time	2:31 PM
End Time	3:01 PM
Hour Meter Reading (Start)	1724.8 hours
Hour Meter Reading (End)	1725.4 hours
Main Tank Fuel Level	74%
Day Tank Fuel Level	na
Water Temperature	170 F
Radiator Water Level	full
Battery Water Level	na
Lubricating Oil Level	full
Battery-Powered Lighting On-Site?	Yes
Prestart Checklist Completed (see task instructions)	Yes

For Vented (Wet Cell) Batteries Only - Specific Gravity Test

Wet Cell - Battery One

Cell One	Cell Two	Cell Three	Cell Four	Cell Five	Cell Six
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Wet Cell - Battery Two

Cell One	Cell Two	Cell Three	Cell Four	Cell Five	Cell Six
----------	----------	------------	-----------	-----------	----------

For Maintenance Free (Sealed) Batteries - Conductance Test

a Conductance Meter must be used

Sealed Battery One

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Date	Time	Voltage	Status	Cold Cranking Amps	Outdoor Temp if Battery is Outside
7/19/2024	2:15 PM	13	Pass	1000	87
Sealed Battery Two					
Date	Time	Voltage	Status	Cold Cranking Amps	Outdoor Temp if Battery is Outside
			Pass		
Comments					

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Serial #	Building	Location	Make & Model	Description
SGM32FHPB	Main Building	Outside offices	125REOZJG	Emergency Power Generator

Date Completed 7/19/2024
 Start Time 2:31 PM
 End Time 3:01 PM
 Hour Meter Reading (Start) 442.6 hours
 Hour Meter Reading (End) 443.2 hours
 Main Tank Fuel Level 74%
 Day Tank Fuel Level na
 Water Temperature 170 F
 Radiator Water Level full
 Battery Water Level na
 Lubricating Oil Level full
 Battery-Powered Lighting On-Site? No
 Prestart Checklist Completed (see task instructions) Yes

For Vented (Wet Cell) Batteries Only - Specific Gravity Test

Wet Cell - Battery One

Cell One	Cell Two	Cell Three	Cell Four	Cell Five	Cell Six
----------	----------	------------	-----------	-----------	----------

Wet Cell - Battery Two

Cell One	Cell Two	Cell Three	Cell Four	Cell Five	Cell Six
----------	----------	------------	-----------	-----------	----------

For Maintenance Free (Sealed) Batteries - Conductance Test

a Conductance Meter must be used

Sealed Battery One

Date	Time	Voltage	Status	Cold Cranking Amps	Outdoor Temp if Battery is Outside
------	------	---------	--------	--------------------	------------------------------------

7/19/2024	2:20 PM	13	Pass	1000	
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Sealed Battery Two

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Date	Time	Voltage	Status	Cold Cranking Amps	Outdoor Temp if Battery is Outside
			Pass		
Comments					

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