STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	205120	A. BUILDING _____ B. WING _____	06/30/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WATERVILLE CENTER FOR HEALTH AND REHAB	7 HIGHWOOD ST WATERVILLE, ME 04901

(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 From 6/26/23 through 6/29/23, on-site visits were conducted at Waterville Center for Health and Rehabilitation for the purpose of completing a Special Focus Facility Long Term Care Survey Process for Federal Recertification and facility reported incidents, and complaints #ME00043946, #ME00043544, #ME00043411, #ME00042663 & #ME00042475. It was determined that Waterville Center for Health and Rehabilitation was not in compliance with 42 CFR Part 483, Subpart B, Requirements for Long Term Care Facilities.	F 000		
F 758 SS=D	Free from Unnec Psychotropic Meds/PRN Use CFR(s): 483.45(c)(3)(e)(1)-(5) §483.45(e) Psychotropic Drugs. §483.45(c)(3) A psychotropic drug is any drug that affects brain activities associated with mental processes and behavior. These drugs include, but are not limited to, drugs in the following categories: (i) Anti-psychotic; (ii) Anti-depressant; (iii) Anti-anxiety; and (iv) Hypnotic Based on a comprehensive assessment of a resident, the facility must ensure that--- §483.45(e)(1) Residents who have not used psychotropic drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record; §483.45(e)(2) Residents who use psychotropic drugs receive gradual dose reductions, and	F 758	Resident #70's AIMS assessment was completed. An audit will be performed for other residents with prescribed anti-psychotics and AIMS assessments will be completed as necessary. Staff will be re-educated on AIMS assessments. Director of Nursing or Designee will perform random AIMS assessments audits x 3 months, and the results of those audits will be shared with the QAPI team to ensure compliance moving forward.	8.15.23

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Amanda Nelson, MLA	Administrator	7/25/23

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 758	Continued From page 1 behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs; §483.45(e)(3) Residents do not receive psychotropic drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record; and §483.45(e)(4) PRN orders for psychotropic drugs are limited to 14 days. Except as provided in §483.45(e)(5), if the attending physician or prescribing practitioner believes that it is appropriate for the PRN order to be extended beyond 14 days, he or she should document their rationale in the resident's medical record and indicate the duration for the PRN order. §483.45(e)(5) PRN orders for anti-psychotic drugs are limited to 14 days and cannot be renewed unless the attending physician or prescribing practitioner evaluates the resident for the appropriateness of that medication. This REQUIREMENT is not met as evidenced by: Based on record reviews, review of the facility's Anti-psychotropic Medication Use Policy, and interview, the facility failed to complete an "Abnormal Involuntary Movement Scale (AIMS)" test for 1 of 5 residents reviewed for unnecessary medications (Resident # 70). Finding: A review of the facility's policy titled "Abnormal Involuntary Movement Scale (AIMS)," dated 7/1/2021, states The AIMS test is completed on admission, or with initiation of an anti-psychotic	F 758		

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F 758	Continued From page 2 medication. The AIMS test is to be completed at least every 180 days (every six months) and/or when requested by the physician. The AIMS test is administered to residents who take anti-psychotics on a regularly scheduled basis or more than ten times per month. A review of Resident #70's clinical record revealed that since the resident's admission on 2/18/23, he/she has been on the anti-psychotic medication Quetiapine 25 mg (milligrams) twice a day; every day for agitation and anxiety. There was no evidence in Resident #70's clinical record that an AIMS test had been completed. On 6/28/23 at approximately 1:00 p.m., in an interview with the surveyor, the Director of Nurses (DON) confirmed that an AIMS test had not been completed for Resident #70. Pursuant to the finding and in a subsequent interview, the DON followed up and completed the AIMS test for Resident #70.	F 758		