Genesis

August 26, 2024

Ms. Celine Donohue, R.N.
Long Term Care Supervisor
Maine Department of Health and Human Services
Division of Licensing and Certification
11 State House Station
Augusta, ME 04333-0011

Dear Ms. Donohue,

In follow up to the August 8, 2024 Survey Results at Sandy River Center, please find attached our Plan of Correction for T222 for your review. Cited deficiency will be corrected by September 9, 2024.

Please let me know if you have any questions.

Sincerely,

Joanne M. Shaw, MSM, FACHCA
Administrator

Department of Health and Human Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	205069	A. BUILDING: _____ B. WING _____	08/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SANDY RIVER CENTER	119 LIVERMORE FALLS RD FARMINGTON, ME 04938

(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) COMPLETE DATE
T 001 SS=E	Initial Comments On 8/5/24 through 8/8/24, an on-site visit was conducted at Sandy River Center for the purpose of conducting an annual recertification survey and investigating complaints #ME00048310, ME00048033, ME00047725, ME00045419, ME00045129, ME00044719, ME00044717, ME00043933, ME00043688, ME00043437, ME00043358, ME00042995, and ME00042790. It was determined that Sandy River Center wasv not in substantial compliance with 42 CFR 483, Subpart B-Requirements for Long Term Care Facilities.	T 001	Sandy River provides this plan of correction without admitting or denying the validity or existence of the alleged deficiencies. The plan of correction is prepared and executed as evidence of the facility's continued compliance with state and federal regulations.	
T 222 SS=E	9.A.4. Minimum Staffing Rules The nursing staff-to-resident ratio is the number of nursing staff to the number of occupied beds. Nursing assistants in training shall not be counted in the ratios. The minimum nursing staff-to-resident ratio shall not be less than the following: a. On the day shift, one direct-care provider for every 5 residents; b. On the evening shift, one direct-care provider for every 10 residents; and c. On the night shift, one direct-care provider for every 15 residents The definition of direct care providers and direct care is found in Chapter 1 of these Regulations.	T 222	The facility will continue to schedule direct care staff to meet the care needs of the residents. This includes meeting the State of Maine staffing ratio minimums. (Day Shift 1staff:5 residents, Evening Shift 1staff:10 residents. Night Shift 1 staff: 15 residents). The days that staff call out sick, on-call nursing management staff will be available to cover direct care staff shifts to meet the needs of the facility while meeting the staff-to-resident ratios outlined for State of Maine minimum staffing requirements. The facility will also utilize non nursing managerial staff to assist in tasks, that are within their scope of practice, to adjunct the needs of residents.	9/9/24

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T 222	Continued From page 1 This Regulation is not met as evidenced by: Based on review of staffing schedules, resident census, and interviews, the facility failed to assure staffing minimums were met on all units in accordance with the "State of Maine Regulations Governing the Licensing and Functioning of Skilled Nursing Facilities and Nursing Facilities," Chapter 9.A.4.A., for certain dates between 7/21/24 through 8/7/24, 17 of 18 days reviewed for staffing. Findings: -On 7/21/23 the facility census was 74, which would require 15 direct care staff on duty during the day shift. The nursing schedule indicated there were 11 direct care staff on duty during the day shift. -On 7/23/24 the facility census was 75, which would require 15 direct care staff on duty during the day shift. The nursing schedule indicated there were 14 direct care staff on duty during the day shift. -On 7/22/24 the facility census was 74, which would require 15 direct care staff on duty during the day shift The nursing schedule indicated there were 14 direct care staff on duty during the day shift. -On 7/24/24 the facility had a census of 76, which required 16 direct care staff to be on duty during the day shift. The nursing schedule indicated there were 10 direct care staff on duty during the day shift. -On 7/25/24 the facility census was 78, which would require 16 direct care staff on duty during the day shift. The nursing schedule indicated there were 14 direct care staff on duty during the day shift.	T 222	The facility secures sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population. The minimum nursing staff-to-resident ratio shall not be less than the following: On the day shift, one direct-care provider for every 5 residents, on the evening shift, one direct-care provider for every 10 residents, and on the night shift, one direct-care provider for every 15 residents. Facility staff responsible for the scheduling of direct care staff will be re-educated to this process.	

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T 222	Continued From page 2 -On 7/26/24 the facility census was 80, which would require 16 direct care staff on duty during the day shift. The nursing schedule indicated the facility had 12 direct care staff on duty during the day shift. -On 7/27/24 and 7/28/24, the facility census was 78, which would require 16 direct care staff during the day shift. The nursing schedule indicated there were 10 direct care staff on duty during the day shift. -On 7/29/24 the facility census was 77, which would require 16 direct care staff during the day shift. The nursing schedule indicated there were 10 direct care staff on duty during the day shift. -On 7/30/24 the facility census was 76, which would require 16 direct care staff during the day shift. The nursing schedule indicated there were 12 direct care staff during the day shift. -On 7/31/24 the facility census was 75, which would require 15 direct care staff during the day shift. The nursing schedule indicated there were 11 direct care staff during the day shift. -On 8/1/24 the facility census was 76, which would require 16 direct care staff during the day shift. The nursing schedule indicated there were 14 direct care staff during the day shift. -On 8/2/24 the facility census was 77, which would require 16 direct care staff during the day shift. The nursing schedule indicated there were 13 direct care staff during the day shift. -On 8/3/24 and 8/7/24, the facility census was 75, which would require 15 direct care staff during the day shift. The nursing schedule indicated there were 12 direct care staff during the day shift. -On 8/4/24 the facility census was 74, which would require 15 direct care staff during the day shift. The nursing schedule indicated there were 11 direct care staff during the day shift. -On 8/6/24 the facility census was 74, which would require 15 direct care staff during the days	T 222	DON/Designee will audit staffing sheets daily to validate sufficient direct care staff are scheduled to meet the needs of the residents and the State of Maine minimum nursing staff -to-resident ratios. Results of these audits will be brought to the monthly QAPI Committee for further review and recommendations.	

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T 222	Continued From page 3 shift. The nursing schedule indicated there were 13 direct care staff during the day shift. During a review of staffing sheets on 8/07/24 at 1:48 p.m., the Director of Nursing confirmed the above findings and indicated the staffing sheets are accurate.	T 222		

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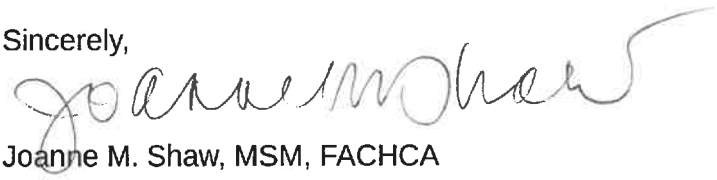

Joanne M. Shaw, MSM, FACHCA
Administrator