

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

PRINTED: 12/07/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 205068	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 11/28/2023
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
F 000	INITIAL COMMENTS On 11/28/23, an unannounced on-site visit was conducted at Springbrook Center for the purpose of an investigation of complaints #ME00045604. It was determined that Springbrook Center was not substantial compliance with 42 CFR 483, Sub-part B-Requirements for Long Term Care Facilities	F 000	Revised Plan of Correction		
F 584 SS=E	Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7) §483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. The facility must provide- §483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. (i) This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. (ii) The facility shall exercise reasonable care for the protection of the resident's property from loss or theft. §483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior; §483.10(i)(3) Clean bed and bath linens that are in good condition; §483.10(i)(4) Private closet space in each	F 584	The floors in the Physical Therapy room, Wayside, Lincoln, Sacc, Irish Hill, King, Mayflower, and Vallee were cleaned. The upper and lower kitchen cabinets in the Physical Therapy room, Wayside, Lincoln, Sacc, Irish Hill, King, Mayflower, and Vallee were cleaned. The washbasin and bedpans in Sacc room 4 and 5 shared bathroom were discarded. The Housekeeping Manager or designee will review areas of the Center including: resident rooms, bathrooms, shower rooms, and common areas for cleanliness. The DON or designee will review storage of washbasins and bedpans and discard any additional identified items not stored according to policy. The Housekeeping Manager or designee will educate housekeeping staff on policy ENV201 Cleaning: Resident/Patient Areas. The Food Service Director (FSD) or designee will educate dietary staff on HCSG policy 028 Environment. The DON or designee will educate nursing staff on policy IC201: Cleaning and Disinfecting.	1/4/24	

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

TITLE

(X6) DATE

[Signature]

ADMINISTRATOR

12/13/23

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 584	Continued From page 1 resident room, as specified in §483.90 (e)(2)(iv); §483.10(i)(5) Adequate and comfortable lighting levels in all areas; §483.10(i)(6) Comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 to 81°F; and §483.10(i)(7) For the maintenance of comfortable sound levels. This REQUIREMENT is not met as evidenced by: Based on observations and interview, the facility failed to adequately provide housekeeping and maintenance services necessary to maintain the building in good repair and in a sanitary condition for 7 of 7 Units. (Wayside Unit, Saccharappa Unit, Irish Hill Unit, Lincoln Unit, Valley Square Unit, Mayflower Unit & King Unit). Findings: On 11/28/23, between 9:45 a.m. and 11:30 a.m., the surveyor did an environmental tour with the Administrator and the following was observed with the Administrator and the Director of Nursing (DNS): - The Physical Therapy room had excessive dirt and debris on the floor. The kitchenette cabinet below the sink was cluttered with several empty soda cans overflowing in a bag. Wayside Unit: -The kitchenette had excessive dirt and debris on the floor and inside the upper and lower cabinets and 2 dead roaches and 1 dead roach in an	F 584	The Housekeeping Manager or designee will audit unit floors for excessive dirt and debris weekly for four weeks then monthly for three months or until resolved and report findings at the monthly QAPI meeting. The FSD or designee will audit kitchenette cabinets for cleanliness weekly or four weeks then monthly for three months or until resolved and report findings at the monthly QAPI meeting. The Maintenance Director or designee will audit unit kitchenettes for the presence of pests weekly for four weeks then monthly for three months or until resolved and report findings at the monthly QAPI meeting. The DON or designee will audit storage of washbasins and bedpans weekly for four weeks then monthly for three months or until resolved and report findings at the monthly QAPI meeting. To ensure deficient housekeeping practices do not recur the additional following measures will be taken: the Administrator or designee will review the housekeeping schedule weekly for four weeks then monthly for three months or until resolved to ensure sufficient staff are scheduled to meet the needs of the Center;		

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F 584	Continued From page 2 Ehrlich trap under the sink. A live roach along with dirt and debris was found under the refrigerator. -The unit floor had excessive dirt buildup on the floors along the walls. Saccarappa Unit: -The kitchenette had excessive dirt and debris on the floors and inside the upper and lower cabinets. -Room 4 and 5, shared bathroom, had a pink wash basin and two bedpans, unlabeled, unbagged on the floor beside the toilet available for use. A dark yellow material on the bottom of the bedpans was observed. -The linen closet had excessive dirt and debris on the floor and 5 clean depends. -The unit floor had excessive dirt buildup on the floors along the walls. Irish Hill Unit: -The kitchenette had excessive dirt and debris on the floor and inside the upper and lower cabinets. -The unit floor had excessive dirt buildup on the floors along the walls. Lincoln Unit: -The kitchenette had excessive dirt and debris on the floor and in the upper and lower cabinets. -An empty plastic container soiled with food was observed in the cupboard above the sink. -The unit floor had excessive dirt buildup on the floors along the walls. Valley Square Unit: -The kitchenette had excessive dirt and debris on the floors and inside the upper and lower cabinet. -The unit floor had excessive dirt buildup on the floors along the walls.	F 584	when there is not sufficient housekeeping staff at the Center the Administrator or designee will alert the District Manager to deploy additional staff to the Center; the Housekeeping Manager or designee will complete six quality control inspections of resident rooms daily for four weeks then weekly for three months or until resolved to ensure compliance with policy ENV201; the Housekeeping Manager or designee will implement a monthly project calendar for deep clean projects including long term care resident rooms, showers rooms, and common areas; lastly, the District Manager or designee will conduct site visits to the Center weekly for four weeks then monthly for three months or until resolved to ensure compliance with Plan of Correction.		

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F 584	Continued From page 3 Mayflower Unit: -The kitchenette had excessive dirt and debris on the floors and inside the upper and lower cabinets. -The unit floor had excessive dirt buildup on the floors along the walls. King Unit: -The kitchenette had excessive dirt and debris on the floors and inside the upper and lower cabinets. -The unit floor had excessive dirt buildup on the floors along the walls. On 11/28/23 at 11:45 a.m., the above findings were confirmed with the Administrator.	F 584			