



MAINE VETERANS' HOMES

caring for those who served

An independent nonprofit organization serving Maine's veterans and families

November 5, 2024

Dear Ms. Leslie,

As result of the statement of deficiencies (SOD) received October 31,2024 via email, please see the attached plan of correction.

Stemming from an annual site visit conducted from 10/21-10/23/24 we were determined not in compliance with 42 CFR Part 483, Subpart B, requirement of Long Term Care Facilities, specifically:

F 578: Request/Refuse/Dscntnue Trmnt;Formlte Adv Dir: No residents were harmed by this finding. Immediately following the finding it was confirmed that advanced directive information was provided to the identified residents. An audit of all residents was completed to ensure that all other residents were provided advanced directive information at time of admission. Facility staff were re-educated that admitting residents receive information on advanced directives within the admission packet and a physician order needs to be obtained in alignment with the identified wishes. The Director of Nursing or designee will conduct random audits for 3 months. Results will be reviewed by the facilities QAPI committee. Correction date: 12/6/24

F582: Medicaid/Medicare Coverage/ Liability Notice: No residents were harmed by this finding though one was affected. Immediately following the finding the staff member involved with the late issue of the SNFABN was reeducated on the requirement of issuing a SNFABN at least 2 days prior to the last covered day. Facility staff responsible for providing SNFABNs were re-educated on the timeliness required. The Administrator or designee will conduct random audits for 3 months. Results will be reviewed by the facility's QAPI committee. Correction date: 12/6/24

F656: Develop/ Implement Comprehensive Care Plans: No residents were harmed by this finding though one resident had the potential to be affected. The resident identified in the finding had their care plan immediately reviewed for accuracy. An audit was performed to assure other residents' plan of care accurately reflected their current behavior monitoring plan. Staff with the responsibility of updating care plans were reeducated on the importance of accuracy of the resident's comprehensive care plan. The director of nursing or designee will complete random audits of resident care plans to ensure compliance. Audits will be performed for 3 months with the results reviewed by the facility's QAPI committee. Correction date: 12/6/24

F880 Infection Prevention: No residents were harmed by these findings although multiple residents had the potential to be affected. The staff member identified during the observed medication administration was immediately reeducated on proper infection control techniques including; hand hygiene and glove usage. The facility's infection control policy was reviewed with the Nurse Manager of Liberty Island, specifically requirements for posting information at the resident's door. An audit was performed to ensure that any other residents requiring signage for contact precautions were appropriately posted. Staff with medication passing responsibilities and charge nurses were reeducated on proper infection

AUGUSTA
310 CONY ROAD
AUGUSTA, ME 04330
1-888-684-4664

BANGOR
44 HOGAN ROAD
BANGOR, ME 04401
1-888-684-4665

CARIBOU
163 VAN BUREN ROAD
CARIBOU, ME 04736
1-888-684-4667

MACHIAS
32 VETERANS WAY
MACHIAS, ME 04654
1-877-866-4669

SCARBOROUGH
290 US ROUTE 1
SCARBOROUGH, ME 04074
1-888-684-4666

SOUTH PARIS
477 HIGH STREET
SOUTH PARIS, ME 04281
1-888-684-4668

CENTRAL OFFICE
460 CIVIC CENTER DRIVE
AUGUSTA, ME 04330
1-8000-278-9494



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control techniques and posting signage when contact precautions are in use. Housekeeping staff were reeducated on checking the hand sanitizers in resident rooms to refill. The Director of Nursing or designee will perform random audits for 3 months to ensure compliance. The results will be reviewed at the facility's QAPI committee meeting. Completion Date: 12/6/24

Disclaimer: Maine Veteran's Homes submits this Plan of Correction ("POC") in accordance with specific regulatory requirements. It shall not be construed as an admission of any alleged deficiency cited. The Provider submits this POC with the intention that it be inadmissible by any third party in any civil or criminal action against the Provider or any employee, agent, officer, director, or shareholder of the Provider. The Provider hereby reserves the right to challenge the findings of this survey if at any time the Provider determines that the disputed findings: (1) are relied upon to adversely influence or serve as a basis, in any way, for the selection and/or imposition of future remedies, or for any increase in future remedies, whether such remedies are imposed by the Centers for Medicare and Medicare Services, the State of Maine or any other entity; or (2) serve, in any way, to facilitate or promote action by any third party against any subsequent remedial measures as that concept is employed in Rule 407 of the Federal Rules of Evidence and should be inadmissible in any proceeding on that basis.

Jacob C. Anderson, Administrator

Date

AUGUSTA	BANGOR	CARIBOU	MACHIAS	SCARBOROUGH	SOUTH PARIS	CENTRAL OFFICE
310 CONY ROAD AUGUSTA, ME 04330 1-888-684-4664	44 HOGAN ROAD BANGOR, ME 04401 1-888-684-4665	163 VAN BUREN ROAD CARIBOU, ME 04736 1-888-684-4667	32 VETERANS WAY MACHIAS, ME 04654 1-877-866-4669	290 US ROUTE 1 SCARBOROUGH, ME 04074 1-888-684-4666	477 HIGH STREET SOUTH PARIS, ME 04281 1-888-684-4668	460 CIVIC CENTER DRIVE AUGUSTA, ME 04330 1-8000-278-9494