STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL084010	A. BUILDING: _____ B. WING _____	01/23/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING ARBOR OF ALBEMARLE	315 PARK RIDGE ROAD ALBEMARLE, NC 28001

(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
D 000	Initial Comments The Adult Care Licensure Section conducted an annual and follow up survey from 01/21/25 to 01/23/25.	D 000		
D 371	10A NCAC 13F .1004(n) Medication Administration 10A NCAC 13F .1004 Medication Administration (n) The facility shall assure that medications are administered in accordance with infection control measures that help to prevent the development and transmission of disease or infection, prevent cross-contamination and provide a safe and sanitary environment for staff and residents. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews the facility failed to ensure implementation of infection control measures for one of four residents observed during the medication pass. The findings are: Review of the facility's management policy and procedures revealed: -All destruction of schedule II, III, and IV substances must be done by two team members certified to pass medications. -Proper documentation was to be completed and signed by both team members witnessing the destruction. -The following guidelines and procedures when preparing medication prevents medication variances. -These are the guidelines for pouring and preparing medications for administration to the resident.	D 371		

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D 371	Continued From page 1	D 371		

-Always make sure the medication order is complete.
-If a pill falls to the floor, it's considered contaminated.
-Dispose of it in the drug Buster and document this.
-Never use contaminated medication.
-Follow procedures for destruction when pouring from a multidose container.
-Never touch pills with your hands.
-Pouring and preparing medications procedures:
-Clean the work area.
-Wash your hands.
-Compare physician medication order and administration records to ensure accuracy.
-Administer medication and document administration on the eMAR.

Observation of the 8:00am medication pass on 01/21/25 from 8:22am to 8:36am revealed:
-At 8:29am, the medication aide (MA) prepared a resident's medication.
-The MA had prepared all of the regular medications in the plastic medication cup.
-The MA attempted to pop the resident's-controlled substance 2 tablets from the bubble pack.
-When one tablet did not release from the bubble pack, the MA used her bare fingers to remove the tablet and placed it into the plastic medication cup with the rest of the medications for the resident.
-The MA administered the resident's medication at 8:31am.
-The MA returned to the medication cart and sanitized her hands with alcohol-based hand sanitizer.

Interview with a MA on 01/23/25 at 1:05pm revealed:
-She had infection control training upon hire and

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D 371	Continued From page 2	D 371		

then the MAs had a yearly update for infection control.
-Medications should never be touched by the MA's bare hands because it would be contamination of the medication, also the MA may be allergic to that medication or the medication could be absorbed through the MA's skin.
-The medication once contaminated by the MA's hands should be discarded per the policy of the facility and the "wasted" medication would have to be witnessed by the MA and another person (usually the 2nd MA working) since it was a controlled substance.
-The dropped medication was considered contaminated and should have been destroyed and not placed back in the residents' medication bottles.

Interview with the Administrator on 01/23/25 at 1:25pm revealed:
-She was not a medication aide but as the Executive Director she expected the MAs to follow the policies and procedures of the facility.
-All facility staff received infection control training annually.
-The facility staff's last annual training on infection control measures was done around September or October 2024.
-The MA should not touch the residents' medications with their bare hands due to contamination and the potential for the MA being allergic to the medication or the medication could be absorbed by the MA's skin.
-The MA should have destroyed the medication that was contaminated by following the facility's policies and procedures.

Attempted telephone interview with the MA on 01/23/25 at 11:00am was unsuccessful.