

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/06/2025
NAME OF PROVIDER OR SUPPLIER BROOKDALE SALISBURY		STREET ADDRESS, CITY, STATE, ZIP CODE 2201 STATESVILLE BOULEVARD SALISBURY, NC 28147		
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D 000	Initial Comments The Adult Care Licensure Section conducted a follow-up survey on 08/05/25 to 08/06/25.	D 000	The following is the Plan of Correction for Brookdale Salisbury Assisted Living regarding the Statement of Deficiencies dated 8/6/2025. The Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather it is submitted as a confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding nor have we identified mitigating factors. We remain committed to the delivery of quality healthcare services and will continue to make changes and improvements to satisfy that objective BOC to ensure all required certificates be placed in associate files.	8/6/2025 and on-going
D 125	10A NCAC 13F .0403(a) Qualifications Of Medication Staff 10A NCAC 13F .0403 Qualifications Of Medication Staff (a) Adult care home staff who administer medications, hereafter referred to as medication aides, and their direct supervisors shall complete training, clinical skills validation, and pass the written examination as set forth in G.S. 131D-4.5B. Persons authorized by state occupational licensure laws to administer medications are exempt from this requirement. Readopted Eff. July 1, 2021. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure 2 of 3 sampled medication aides (MA) (Staff A and Staff B) completed the 5-hour and 10-hour, or 15-hour MA training prior to administering medications. The findings are: 1. Review of Staff A's personnel record revealed: -Staff A was hired as a MA on 04/23/25. -Staff A completed the MA Clinical Skills Competency Validation checklist on 05/01/25. -Staff A passed the State written MA examination test on 11/13/15. -There was no documentation Staff A completed the 5-hour and 10-hour or 15-hour training course. Telephone interview with Staff A on 08/06/25 at	D 125		

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

Melissa Castle

TITLE

Executive Director

(X6) DATE

9/8/2025

STATE FORM

35C-111

If continuation sheet 1 of 8

" Reviewed and Acknowledged " 09/12/2025 CPP

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D 125	Continued From page 1 3:00pm revealed: -She had worked as an MA since 2015. -She had administered medications to residents at this facility. -She completed the 5-hour and 10-hour training course and passed the written MA examination test at her last place of employment. -She did not have documentation to show completion of the course. -She started the 5-hour and 10-hour training course online when she was hired in April but had not completed it. Interview with the Business Office Manager (BOM) on 08/06/25 at 2:30pm revealed: -She was not aware Staff A did not have a certificate of completion for the course. -She called the contracted pharmacy that provided the training and was informed Staff A completed the 5-hour and 10-hour training course but did not take the exam to receive a certificate of completion. -She thought Staff A was an MA prior to employment. -She had no documentation to verify Staff A completed the courses from their former employers. Interview with the Health and Wellness Director on 08/06/25 at 2:50pm revealed she was not aware Staff A did not have a certificate of completion for the 5-hour and 10-hour or 15-hour training. Interview with the Administrator on 08/06/25 at 3:35pm revealed he was not aware Staff B was passing medications prior to completing the 5-hour, 10-hour or 15-hour training. Refer to interview with the Business Office	D 125	BOC to ensure all required certificates be placed in associate files.	8/6/2025 and on-going

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D 125	Continued From page 2 Manager (BOM) on 08/06/25 at 2:30pm. Refer to interview with the Health and Wellness Director on 08/06/25 at 2:50pm. Refer to interview with the Administrator on 08/06/25 at 3:35pm. 2. Review of Staff B's personnel record revealed: -Staff B was hired as a medication aide (MA) on 04/02/24. -Staff B completed the MA Clinical Skills Competency Validation checklist on 05/06/24. -Staff B passed the State written MA examination test on 05/02/24. -There was no documentation Staff B completed the 5-hour and 10-hour or 15-hour training course. Interview with Staff B on 08/06/25 at 3:20pm revealed: -She had worked as an MA for approximately one year. -She had administered medications to residents at this facility. -She completed the 5-hour and 10-hour training course at her former job. -She did not provide documentation of the training when she was hired at this facility. -The BOM requested she completed the 5-hour and 10-hour training course online today. -She completed the course online and received a certificate today. -Prior to today, 08/06/25, she had not completed the training. Interview with the Business Office Manager (BOM) on 08/06/25 at 2:30pm revealed: -She was not aware Staff B did not have a certificate of completion for the course.	D 125	BOC to ensure all required certificates be placed in associate files.	8/6/2025 and on-going

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D 125	Continued From page 3 -She called the contracted pharmacy that provided the training and was informed Staff B completed the 5-hour and 10-hour training course but did not take the exam to receive a certificate of completion. -She thought Staff B was an MA prior to employment. -She had no documentation to verify Staff B completed the courses from their former employers. Interview with the Health and Wellness Director on 08/06/25 at 2:50pm revealed she was not aware Staff B did not have a certificate of completion for the 5-hour and 10-hour or 15-hour training. Interview with the Administrator on 08/06/25 at 3:35pm revealed he was not aware Staff B was passing medications prior to completing the 5-hour, 10-hour or 15-hour training. Refer to interview with the Business Office Manager (BOM) on 08/06/25 at 2:30pm. Refer to interview with the Health and Wellness Director on 08/06/25 at 2:50pm. Refer to interview with the Administrator on 08/06/25 at 3:35pm. Interview with the Business Office Manager (BOM) on 08/06/25 at 2:30pm revealed: -She was aware MA's were required to have the 5-hour and 10-hour or 15-hour training course completed prior to administering medications. -She was responsible for making sure MA's had the required training before they administered medications.	D 125	BOC to ensure all required certificates be placed in associate files.	8/6/2025 and on-going

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D 125	Continued From page 4 Interview with the Health and Wellness Director on 08/06/25 at 2:50pm revealed: -She was aware that was a requirement prior to passing medications. -The contracted pharmacy's Registered Nurse (RN) was responsible for ensuring MAs had the training prior to administering medication. Interview with the Administrator on 08/06/25 at 3:35pm revealed: -He was aware MA's were required to have the 5-hour and 10-hour or 15-hour training course completed prior to administering medications. -All courses should be logged into our training tracker upon completion. -It was the BOM's responsibility to verify MA's completed the recommended courses prior to passing meds. -If the MA's completed the 5-hour and 10-hour or 15-hour training course prior to employment, it should have been verified at the time of employment. -His expectation was for MA's to complete all required training prior to administering medications to residents.	D 125	BOC to ensure all required certificates be placed in associate files.	8/6/2025 and on-going
D 358	10A NCAC 13F .1004 (a) Medication Administration 10A NCAC 13F .1004 Medication Administration (a) An adult care home shall assure that the preparation and administration of medications, prescription and non-prescription, and treatments by staff are in accordance with: (1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and (2) rules in this Section and the facility's policies and procedures.	D 358	HWD conducted training for all MT's on PCC orders and tracking log. HWD and RCC will conduct cart audits and eMAR reviews to ensure medications match PCC Orders.	8/6/2025 and on-going

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D 358	Continued From page 5 This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure medications were administered as ordered for 1 of 5 residents (#3) related to a medication used to regulate calcium and phosphorus levels. The findings are: Review of Resident #3's current FL-2 dated 05/13/25 revealed: - Diagnoses included diabetes mellitus, myasthenia gravis, hypertensive heart disease, and long-term use of insulin. - There was an order for calcitriol 25 mcg one capsule two times daily. Review of Resident #3's signed physician's order dated 06/06/25 revealed an order for calcitriol .25 mcg one capsule two times daily. Review of Resident #3's July 2025 electronic medication administration record (eMAR) revealed: -There was an entry for calcitriol 25 mcg one capsule two times daily scheduled at 7:00am and 8:00pm. Calcitriol 25mcg was documented as administered as ordered on 07/01/25 - 07/04/25. -There was a discontinue dated documented for 07/05/25. Calcitriol was documented as not administered from 07/05/25 - 07/31/25. Review of Resident #3's August 2025 eMAR, 08/01/25-08/06/25 revealed calcitriol .25 mcg was not on the listed on the eMAR. Observation of Resident #3's medications on hand 08/05/25 at 2:00pm revealed:	D 358	HWD conducted training for all MT's on PCC orders and tracking log. HWD and RCC will conduct cart audits and eMAR reviews to ensure medications match PCC Orders.	8/6/2025 and on-going

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D 358	Continued From page 6 -There was a bubble pack card of calcitriol 25 mcg with 28 doses dispensed on 07/14/25. -There were 28 of the 28 dispensed doses remaining on the card. Interview with Resident #3 on 08/05/26 at 3:45pm revealed: -She was not aware of the names of her medications. -She did not know she was prescribed calcitriol. Telephone interview with the facility's contracted pharmacy on 08/06/26 at 10:45am revealed: -There was an order for calcitriol 25 mcg one capsule two times daily. - Calcitriol 25 mcg was last dispensed on 07/14/24 and the next dispense date would be 08/08/25. Interview with the Health and Wellness Director (HWD) on 08/06/25 at 11:00am revealed: -She thought calcitriol 25 mcg was discontinued in July by the previous facility Primary Care Provider (PCP). -She removed calcitriol 25 mcg from the eMAR. -She could not find the order to discontinue calcitriol 25 mcg. -She and the Resident Care Coordinator (RCC) were responsible for cart audits. -She was not sure when Resident # 3's cart audit was last done. Interview with the PCP on 08/06/25 at 1:40pm revealed: -She was not aware Resident # 3 had missed 28 doses of calcitriol 25mg. -She just started working at the facility yesterday on 08/05/25 and did not write the order. -She did not think there could be a negative outcome from Resident # 3 missing 28 doses of	D 358	HWD conducted training for all MT's on PCC orders and tracking log. HWD and RCC will conduct cart audits and eMAR reviews to ensure medications match PCC Orders.	8/6/2025 and on-going

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D 358	Continued From page 7 calcitriol. -If there was a signed order, the facility should have administered the medication as ordered. Interview with the Administrator on 08/06/25 at 3:30pm revealed: -He was not aware Resident # 3 had missed 28 doses of calcitriol 25mg. -There should be a signed order to discontinue the medications before they are removed from the eMAR. -His expectations were that medications should be administered as ordered.	D 358	HWD conducted training for all MT's on PCC orders and tracking log. HWD and RCC will conduct cart audits and eMAR reviews to ensure medications match PCC Orders.	8/6/2025 and on-going	