

STATEMENT OF ISOLATED DEFICIENCIES WHICH CAUSE NO HARM WITH ONLY A POTENTIAL FOR MINIMAL HARM FOR SNFs AND NFs	PROVIDER # 345242	MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETE: 5/20/2015
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NAME OF PROVIDER OR SUPPLIER THE FOUNTAINS AT THE ALBEMARLE	STREET ADDRESS, CITY, STATE, ZIP CODE 200 TRADE STREET TARBORO, NC
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ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES
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F 431	<p>483.60(b), (d), (e) DRUG RECORDS, LABEL/STORE DRUGS & BIOLOGICALS</p> <p>The facility must employ or obtain the services of a licensed pharmacist who establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled.</p> <p>Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.</p> <p>In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.</p> <p>The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews, the facility failed to maintain one of two medication carts in a clean and sanitary condition.</p> <p>The findings include:</p> <p>Observations of the medication carts were made on 05/20/2015 at 8:55AM. The west hall medication cart had two drawers that were observed having loose tablets on the bottom of the drawers. A third drawer was observed with dried liquid medication on the bottom of the drawer.</p> <p>An interview with nurse #2 on 5/20/2015 at 9:56AM was conducted. The nurse stated she had not noticed the loose pills or dried liquid medication on the bottom of the drawers. The nurse stated any spilled liquid medication should be wiped up immediately and loose pills should be discarded.</p> <p>An interview with the Director of Nursing on 05/20/2015 at 10:11 AM was conducted. The DON stated her expectation of the nursing staff was to keep the medication carts clean. She stated spilled liquids should be cleaned immediately and medications noted to be loose in the drawers should be destroyed.</p>
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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

The above isolated deficiencies pose no actual harm to the residents