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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION   | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>315485  | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                        | (X3) DATE SURVEY COMPLETED<br><br>10/18/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Careone at Wall  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br>2621 Highway 138<br>Wall, NJ 07719 |  |
| For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency. |   |   |  |
| (X4) ID PREFIX TAG   | SUMMARY STATEMENT OF DEFICIENCIES<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)   |   |  |
| <p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>                     | <p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>44833</p> <p>Based on observation, interview, and pertinent facility documents, it was determined that the facility failed to ensure narcotic medications were secured under double lock. This deficient practice was identified in 1 of 2 medication storage rooms observed (Cove nursing unit), and was evidenced by the following:</p> <p>On 10/15/24 at 11:11 AM, the surveyor, in the presence of the Unit Manager/Licensed Practical Nurse (UM/LPN) observed the Cove nursing unit's medication storage room. Upon entering, the surveyor opened the unlocked medication refrigerator (med fridge), and inside was the unlocked narcotic medication lock box. The narcotic medication lock box contained 57 dronabinol 5 milligram capsules (a controlled medication used to treat weight loss). At that time, UM/LPN confirmed that the controlled medications should be stored under two secured locks.</p> <p>On 10/15/24 at 12:18 PM, the surveyor interviewed the Director of Nursing (DON), who stated narcotic medications should be stored under two secured locks to prevent drug diversion. The DON confirmed that the dronabinol in the Cove nursing unit medication storage room should have been stored with two secure locks.</p> <p>On 10/17/24 at 12:34 PM, the surveyor, in the presence of the DON and the survey team, interviewed the Licensed Nursing Home Administrator (LNHA) who confirmed that the narcotic medication stored in the Cove nursing unit's med fridge were not considered stored under double lock.</p> <p>A review of the facility's Controlled Substance Storage policy with effective date of February 2019, Schedule II-V medications and other medications subject to abuse or diversion are stored in a permanently affixed, double locked compartment separate from all other medication or per state regulation. The access system to controlled medication is not the same as the system giving access to other medications (the key that opens the compartment is different from the key that opens the medication cart.) If a key system is used, the medication nurse on duty maintains possession of the key to controlled substance storage areas . Controlled-substances that require refrigeration are stored within a locked box within the refrigerator, this box must be attached to the inside of the refrigerator in such manner that prevents its removal from the medication room .</p> <p>NJAC 8:39-29.7(c)</p> |   |  |

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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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>                    | <p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>45208</p> <p>Based on observation, interview, and review of pertinent facility documents, it was determined that the facility failed to a.) store potentially hazardous foods in a manner to prevent food borne illness and b.) maintain kitchen equipment in a clean and sanitary manner. This deficient practice has the potential to affect all residents, and the evidence was as follows:</p> <p>On 10/11/24 at 10:11 AM, the surveyor in the presence of the Director of Culinary Management (DCM), toured the kitchen and observed the following:</p> <ol style="list-style-type: none"> <li>1. In the walk-in freezer, a box of chocolate chip premade dough cookies, a box of beef patties, and a box of vegetable burgers. The boxes were open, there were no dates when to use by, and the the bags inside the boxes were unsealed and the products were covered in ice crystals. The DCM could not speak to when the boxes were opened.</li> <li>2. In the kitchen, the ice machine had black sediment on the output flap in the interior of the machine. The DCM wiped the flap with a white paper towel revealing it had a wipeable black colored sediment. When the surveyor asked the DCM what it was, the DCM responded it was black mold, and it needed to be cleaned immediately.</li> </ol> <p>On 10/11/24 at 10:20 AM, the surveyor interviewed the DCM, who stated that the freezer items should have been labeled with an opened date, and if only part of the bag was used, the bag should be resealed and labeled. The DCM stated that labeling ensured that it was used in a timely fashion to prevent waste, and sealing it prevented contamination, ice crystals, and food borne illness.</p> <p>On 10/17/24 at 12:34 PM, the Licensed Nursing Home Administrator (LNHA), in the presence of the Director of Nursing (DON) and survey team acknowledged the concerns. The LNHA provided no additional information.</p> <p>A review of the facility provided Refrigerators and Freezers policy dated revised November 2022, included this facility will ensure safe refrigerator and freezer maintenance, temperatures, and sanitation, and will observe food expiration guidelines .6. Information regarding acceptable storage periods for perishable foods are kept in the supervisor's office. A condensed version is posted by each refrigerator and freezer for reference. 7. All food is appropriately dated to ensure proper rotation by expiration dates. received dates (dates of delivery) are marked on cases and on individual items removed from cases for storage. Use by dates are completed with expiration dates on all prepared food in refrigerators. Expiration dates on unopened food are observed and use by dates are indicated on food that are open .9. Supervisors are responsible for ensuring food items in pantry, refrigerators and freezers are not past use by or expiration dates .</p> <p>(continued on next page)</p> |   |  |

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| F 0812<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many                           | A review of the facility provided Ice Machines and Ice Storage Chests dated revised January 2012, included ice machines and ice storage/distribution containers will be used and maintained to assure a safe and sanitary supply of ice .ice making machines, ice storage chests/containers, and ice can all become contaminated by [ .] c. colonization by microorganisms .to help prevent contamination of ice machines, ice storage chest/containers or ice, staff shall follow these precautions [ .] f. clean and sanitize the tray and the scoop daily .<br><br>NJAC 8:39-17.2(G) |   |  |