STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	80A004	A. BUILDING: _____ B. WING _____	C 08/22/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRANDYWINE LIVING @ MIDDLEBROOK CROSSING	2005 ROUTE 22 WEST BRIDGEWATER, NJ 08807

(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
A 000	Initial Comments Initial Comments: TYPE OF SURVEY: Complaint COMPLAINT #: NJ 00176171 CENSUS: 95 SAMPLE SIZE: 3 The facility is not in substantial compliance with all of the standards in the New Jersey Administrative Code 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs. The facility must submit a Plan of Correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.	A 000		
A 310	8:36-3.4(a)(1) Administration (a) The administrator or designee shall be responsible for, but not limited to, the following: 1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;	A 310		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 310	Continued From page 1	A 310		

This REQUIREMENT is not met as evidenced by:
Complaint #: NJ 00176171

Based on interview, record review, and pertinent facility documentation, it was determined that the facility Executive Director (ED) failed to implement and enforce the policies and procedure titled, "Prohibition of weapons firearms and ammunition," "Nursing Documentation/Service notes/Registered nurse role NJ/DE," "Service Plans", "Health Service Plans in NJ," "Resident Assessment-New Jersey," and "Hourly Checks, Frequent Checks, Q2 hour Checks" regarding a resident's [redacted] and [redacted] for 1 of 3 residents reviewed, Resident #2. This deficient practice was evidenced by the following:

On 8/13/24, the Department of Health (DOH) investigated a Reportable Event Report (RER) received from the facility on [redacted] which indicated that on [redacted], the facility had put plans [redacted] #2. According to the report, on [redacted] Resident #2's [redacted]

At 10:00 a.m., the surveyor reviewed Resident #2's electronic and paper medical record (MR) which revealed Resident #2 was admitted to the facility in [redacted] with [redacted] The record also indicated the resident was transferred out of the facility on [redacted].

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A 310	Continued From page 2 Continued review of Resident #2's MR revealed a document titled "Observations For [Resident #2] NJ ex order 26.4b1 which indicated that on NJ ex order 26.4b1 and NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1 NJ ex order 26.4b1. The surveyor noted an observation note written by a Licensed Practical Nurse (LPN) which indicated that on NJ ex order 26.4b1 during a telehealth visit, the LPN overheard Resident #2 report to the NJ Exec Order 26.4b1 Advance Nurse Practitioner that on NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1 Additionally, the observation note dated NJ ex order 26.4b1, indicated that following the telehealth visit Resident #2 was sent to the emergency room (ER) for further evaluation and was discharged later that night and placed on NJ Exec Order 26.4b1 upon return. At 11:31 a.m., the surveyor interviewed the LPN regarding Resident #2. The LPN stated that on NJ ex order 26.4b1, she searched Resident #2's room for NJ Exec Order 26.4b1 and removed the following NJ ex order 26.4b1 The LPN stated she did not observe any other NJ Exec Order 26.4b1 a safe in the resident's room at the time of the search and confirmed that NJ Exec Order 26.4b1 was initiated for Resident #2. Further review of Resident #2's MR revealed an observation note written by a Registered Nurse (RN) on NJ ex order 26.4b1 which documented that on NJ ex order 26.4b1, Resident #2 NJ ex order 26.4b1 statement to the RN and was sent to the ER for further evaluation. The RN documented that Resident #2 NJ ex order 26.4b1 The surveyor did not observe any documentation indicating that a room search was completed	A 310		

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A 310	Continued From page 3	A 310		

after the resident made another NJ ex order 26.4b1 statement, as previously done on NJ ex order 26.

Surveyor review of the document titled, "Observations For [Resident #2]" dated NJ ex order 26.4b1, indicated that on NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1

At 11:42 a.m., the surveyor interviewed the Environmental Service Director (ESD) regarding Resident #2's room search. The ESD stated on NJ ex order 26 he and another staff member went to Resident #2's NJ ex order 26.4b1 the resident's NJ ex order 26.4b1 The ESD stated that NJ ex order 26.4b1 Additionally, the ESD stated that he notified the ED and the NJ ex order 26.4b1 NJ ex order 26.4b1

During review of Resident #2's MR, the surveyor did not observe documented evidence that an RN assessment was conducted after the resident NJ ex order 26.4b1. Additionally, there was no documentation of the NJ Exec Order 26.4b1 from NJ ex order 26 through the night shift of NJ ex order 26.4b, and no Health Service Plan initiated to address Resident #2's NJ ex order 26.4b1.

At 12:03 p.m., the surveyor interviewed the ED, and inquired for reasons a search was not conducted after the resident had again expressed NJ ex order 26.4b1 on NJ ex order 26.4b, assessments not completed nor the HSP updated. The ED stated that she did not believe another NJ Exec Orde search was

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A 310	Continued From page 4	A 310		

needed as all the [NJ Exec Order 2] were removed from the resident's room when a [NJ ex order 26.4b1] was conducted on [NJ ex order 26] after the resident first expressed [NJ Exec Order 26.4b1]. The ED also stated that the Regional Director of Clinical Services was covering the facility from [NJ ex order 26] through [NJ ex order 26] and was responsible for completing the assessments and updating the care plans.

Surveyor review of the following facility policies and procedures revealed:
1. "Prohibition of weapons firearms and ammunition", with a effective date of 4/15, which indicated, " ... no weapons, firearms, or ammunition may be on the property of the community by any resident or staff member."

2. "Nursing Documentation/Service notes/Registered nurse role NJ/DE/, Service Plans, Health service Plans in NJ", with a revision date of 4/10, which indicated, " ... Service plans will be updated at least every 6 months or upon significant change of the resident. ... The registered nurse will be called at the onset of illness, injury, or change in condition of any resident to arrange for assessment of the resident's care needs or medical needs and needed nursing intervention or medical care in NJ and DE."

3. "Resident Assessment-New Jersey", which indicated, "... C. Health service plans will be updated on a quarterly basis at minimum or if significant changes in provider services is indicated ... D. Assessments will be completed in the time frames listed below: New Jersey Within 1 days of admission and if significant change in the resident's status done by RN...."

4. " ...44. Hourly Checks, Frequent Checks, Q2

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A 310	Continued From page 5 hour Checks" with a revision date of 5/2013, which indicated, "... PURPOSE: To provide a framework for staff to manage issues related to wandering and/or elopement and other special needs care as needed ... 4. Hourly check log to be utilized for all appropriate residents ... 5. Staff to initial Hourly Checks or frequent checks as directed after completion for accountability ...." At 4:01 p.m., the surveyor notified the ED, Director of Clinical Services, Assistant Director of Clinical Services, and Clinical Operations Specialist of the imminent danger. The ED provided the surveyor with an acceptable removal plan on 8/15/2024. The surveyor completed a revisit survey on 8/22/2024 and confirmed that the facility implemented the removal plan provided to the Department of Health on [redacted]. The removal plan included in services provided to staff from NJ ex order 26.4b1.	A 310		
A 751	8:36-7.3(b) Resident Assessments and Care Plans (b) The resident health service plan shall be reviewed, and if necessary, revised quarterly, and as needed, based upon the resident's response to the care provided and any changes in the resident's physical or cognitive status. This REQUIREMENT is not met as evidenced by: Complaint #: NJ 00176171	A 751		

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A 751	Continued From page 6 Based on interview and record review it was determined that the facility failed to ensure that a Health Service Plan (HSP) was updated with interventions in response to NJ Exec Order 26.4b1 related to NJ ex order 26.4b1 for 1 of 3 residents, Resident #2. This deficient practice was evidenced by the following: On 8/13/20204 at 10:00 a.m., the surveyor reviewed Resident #2's electronic and paper medical record (MR) which revealed Resident #2 NJ ex order 26.4b1 Surveyor review of the MR revealed a document titled, "Observations for [Resident #2]" (progress notes). The surveyor observed progress notes documented by a Licensed Practical Nurse (LPN) and a Registered Nurse (RN). Review of a written note by the LPN on NJ ex order 26, revealed that Resident #2 NJ ex order 26.4b1 to the NJ Exec Order 26.4b1 Advanced Nurse Practitioner (APN) that NJ ex order 26.4b1 Additionally, the surveyor noted a progress note dated NJ ex order 26.4b, written by the RN which revealed that Resident #2 NJ ex order 26.4b1 During surveyor review of Resident #2 's MR, the surveyor noted a document titled, "General & Health Service Plan", sub-titled "Current Ongoing Care Plan" with a report date of NJ ex order 26.4b. During review of the document the surveyor was unable to locate a HSP that addressed Resident #2's NJ ex order 26.4b1. At 12:03 p.m., the surveyor interviewed the Executive Director (ED) who stated that the Regional Director of Clinical Services covered the facility from NJ ex order 26.4b1 prior to the	A 751		

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A 751	Continued From page 7 ED's assuming the ED position. The ED stated that the Regional Director of Clinical Services was responsible for updating the health service plan. At 4:01 p.m., during interview and exit conference, the ED, Director of Clinical Services, Assistant Director of Clinical Services, and Clinical Operations Specialist, all confirmed Resident #2 should have had his/her HSP updated on [redacted] with interventions, when the resident [redacted] on [redacted] Although Resident #2 verbalized suicidal ideations, the facility did not develop and implement interventions and updated his/her HSP to address the resident's [redacted] issue and concern. Refer to 8:36-3.4(a)(1)	A 751		