

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 12/15/2022  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>315314</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/05/2022</b>
NAME OF PROVIDER OR SUPPLIER  <b>ANCHOR CARE AND REHABILITATION CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>3325 HIGHWAY 35</b> <b>HAZLET, NJ 07730</b>		
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F 000	INITIAL COMMENTS  COMPLAINT#: NJ150368  CENSUS: 146  SAMPLE SIZE: 7  THE FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE REQUIREMENTS OF 42 CFR PART 483, SUBPART B, FOR LONG TERM CARE FACILITIES BASED ON THIS COMPLAINT VISIT.	F 000			
F 610 SS=D	Investigate/Prevent/Correct Alleged Violation CFR(s): 483.12(c)(2)-(4)  §483.12(c) In response to allegations of abuse, neglect, exploitation, or mistreatment, the facility must:  §483.12(c)(2) Have evidence that all alleged violations are thoroughly investigated.  §483.12(c)(3) Prevent further potential abuse, neglect, exploitation, or mistreatment while the investigation is in progress.  §483.12(c)(4) Report the results of all investigations to the administrator or his or her designated representative and to other officials in accordance with State law, including to the State Survey Agency, within 5 working days of the incident, and if the alleged violation is verified appropriate corrective action must be taken. This REQUIREMENT is not met as evidenced by: COMPLAINT: #NJ150368  Based on interviews and review of other facility	F 610	1)The Resident at issue was discharged last year. The Department of Health, by virtue of having received a complaint and	11/16/22	

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

TITLE

(X6) DATE

Electronically Signed

11/16/2022

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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F 610	<p>Continued From page 1</p> <p>documents on 8/10/2022 and 10/5/2022, it was determined that the Facility failed to complete and to provide an investigation of an allegation of misappropriation of a Resident's (Resident #2) assets without his/her knowledge through a Durable Power of Attorney (DPOA) assigned by the Facility and to prevent psychosocial harm when a resident returned home without any assets of his/her own. The Facility also failed to follow its policies titled "Resident Abuse" and "Resident Rights." This deficient practice was identified for [REDACTED] residents (Resident #2) and was evidenced by the following:</p> <p>During a telephone interview on 8/10/2022 at 11:14 a.m., Resident #2 stated the Facility tried to sell her house and sold some of her personal items without her knowledge. Resident #2 explained the following: "I was there [at the Facility] for short-term rehab [rehabilitation]. The Admissions Director (AD) would try to talk me into being a permanent resident; she would bug me every day, saying I can go on Medicaid. I have supplemental insurance; they [the Facility] canceled it, put my house up for sale, (and) sold my car. I didn't know my power of attorney (POA), the President of the Consultant Company (CC). I never met the man. I didn't go home until October 2021. It was outrageous what was done to me. I was drugged on four medications, taking them in combination and causing hallucinations. They [Facility] took my Social Security, Savings, and Checking Account. I'm wiped out. As of June, I was in the hospital, and the POA refused to let me leave and would not let my [REDACTED] visit."</p> <p>Resident #2 continued to say the Facility took "\$10,500 from checking [account] and \$700 from savings [account]. In [REDACTED] they took my Social</p>	F 610	<p>surveyed concerning the same, is aware of the issue and reporting further would be redundant. No actual harm was cited. The matter is in litigation and counsel has investigated the relevant facts and circumstances surrounding the allegation.</p> <p>2) The Administrator/Social Worker reviewed the last 6 months of reports/grievances and determined that there were no other concerns or allegations of misappropriations of money noted. The facility respectfully acknowledges all residents have the potential to be affected.</p> <p>3) The facility Policy on Abuse, Mistreatment and Neglect were reviewed by the Administrator and Regional Director and found to be in compliance. The facility policy on Resident Rights was reviewed by the Administrator and Regional Director and found to be in compliance. The Regional Director re-in serviced the Administrator, Director of Social Work and Admission Director on the requirements of initiating an immediate investigation for all allegations of abuse /misappropriation and the reporting requirements of abuse or misappropriation appropriate time frame.</p> <p>4) An audit tool was created for the NHA/DON or designee to audit all grievances, compliance hotline calls, incident reports for any allegations of misappropriations weekly x 4 weeks, then monthly x 3 months, and then Quarterly x2. Results of the audit will be reviewed at Monthly/Quarterly Quality Assurance Meeting, for further resolution if needed.</p>		

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F 610	<p>Continued From page 2</p> <p>Security... I was sent to the hospital from the Facility due to tremors. They stole my money. I was refused visitation by family members. They didn't tell me. The AD said I needed permission from the POA and told [my] [REDACTED] that I didn't want to see her. When I first transferred to (the) Facility, I signed paperwork from (the) hospital. I have a normal signature. The POA is a scribbled line." Resident #2 continued to say that "the Admissions Director put a lot of my stuff on her Facebook page for sale, and then she took it down after they sold. I had a \$4,000 sectional couch, a \$3,000 bedroom set, 20 photo albums, a birth certificate, beautiful furniture, and clothes. I didn't have any personal items." The Resident further stated when he/she went to the hospital, he/she only had his/her "college ring, jacket, purse, and the clothes" he/she was wearing.</p> <p>According to Resident #2, he/she has no money, lamps, or tables. "I had 5 TVs [televisions]. I had to buy a TV, table, coffee table, lamp, silverware &amp; utensils. My microwave and toaster were gone, so I had to buy them. A whole lot more needs to be replaced. I'm stuck sleeping on a couch since the end of October. They [Facility] took cash out of my house and windowsill filled with coins and a \$2,500 rolled desk with a stack of \$2 bills and silver certificates totaling \$600-\$700 for that alone; huge polar spring water bottle, solid glass, filled with \$10,000 in pennies. It had to be rolled to move it." Resident #2 explained, "I came to the facility in the middle or end of [REDACTED], and I didn't find out that they went to my house until [REDACTED], when I went to the hospital that my house was up for sale with a dumpster out [in] front of my house with a sign take what you need ...years of stuff are gone ...they even took my car ... the POA offered \$10,000 which doesn't cover it</p>	F 610	All negative findings will be brought to the attention of the Administrator immediately.		

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F 610	<p>Continued From page 3 ..."</p> <p>A review of Resident #2's closed Medical Record (MR) was as follows:</p> <p>According to the "Resident Face Sheet (RFS)," Resident #2 was originally admitted on [REDACTED], readmitted on [REDACTED], and discharged on [REDACTED] with diagnoses which included but were not limited to [REDACTED].</p> <p>According to the Minimum Data Set (MDS), an assessment tool dated [REDACTED], Resident #2 had a Brief Interview for Mental Status (BIMS) score of [REDACTED], which indicated the Resident was [REDACTED]. The MDS also revealed Resident #2 needed extensive assistance with most Activities of Daily Living (ADLs).</p> <p>A review of Resident #2's "Admission Agreement (AA)" dated [REDACTED] revealed "Resident #2's printed name on the form and Under "Resident (individual or by legal representative)," the signature of Resident #2. Further review revealed on the last page a form for Medicare with Resident #2's printed name in the body of the letter, stating by "signing below, as of [REDACTED], Resident #2 will have traditional Medicare." The form was dated [REDACTED] and revealed Resident #2's signature at the bottom and the Facility's Consultants Company (CC) listed at the top of the page.</p> <p>A review of a "Facility Consultant Company (CC) Services Agreement (FCCSA)" / (Billing Office)</p>	F 610			

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F 610	<p>Continued From page 4</p> <p>with an effective date of [REDACTED], revealed the names and signatures of the President and CEO (Chief Executive Officer) and the Owner/Operator, dated [REDACTED].</p> <p>A review of the General Durable Power of Attorney (GDPOA) form for Resident #2 revealed his/her printed name on the first page. The last page revealed the following: "dated on the day [REDACTED] day of [REDACTED]," revealed signatures of Resident #2, with the Admissions Director and the Admissions Coordinator as witnesses and a notary stamp and an individual signature at the bottom.</p> <p>During an interview on 8/10/2022 at 12:02 p.m., when the surveyor asked about the BIMS score, the Social Worker Director (SWD) stated if a resident has a "BIMS [REDACTED] I'm not concerned if the resident has a POA, but I still educate them on it, and it's up to the resident to make the decision." The SWD further stated the POA should be someone who knows you very well, explain the situation, and someone the resident trusts. The Facility does not recommend an outside company for a POA. I would never recommend a company. The SWD stated Resident #2's name was familiar, but she did not recall or ever had contact with him/her."</p> <p>During an interview on 8/10/2022 at 3:20 p.m., the Administrator stated, "I know it's a lawsuit. I don't know the ins and outs." He continued, "(Resident #2) was questionable if he/she was short term or long term. I wasn't sure who was involved." The Administrator indicated the Admissions and the Business Office were involved in the lawsuit. According to the Administrator, Resident #2, at some time, no date</p>	F 610			

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F 610	<p>Continued From page 5</p> <p>known, signed paperwork and got help to allow the business office to get the Medicaid application. At some time in [REDACTED], he/she went to the hospital and refused to come back. We hired a billing company (CC), an outside company. At that point, he/she went home and rescinded the application. When you have too much money, you have to spend the money down; there is a five years look back. He further stated, "Admissions, the Business Office, and CC were working with Resident #2. Whoever is the POA on the paperwork lists the property." In the same interview, the surveyor asked the Administrator about Resident #2's POA, and he replied, "correct, according to the SW, he/she did not have a POA." He continued to say there is a \$6,000 fee involved for the Medicaid application, a lot is involved, sign this person to become the POA, or the Resident helps with the Medicaid process. I'll have to find the paperwork the Resident signed for Medicaid."</p> <p>During an interview on 10/5/2022 at 10:16 a.m., the Admissions Director (AD) stated, "I can only answer general questions. When the surveyor asked her about the Medicaid process, she stated a resident could be eligible for Medicaid upon admission and be Medicaid eligible pending from the hospital. Usually, our billing company is involved if a resident has a question regarding personal assets. The billing company is CC." In the same interview, the surveyor asked the AD why a person would sign a DPOA. She replied, "I would need my attorney present to answer." She continued, "The patient [Resident] themselves would have to opt-in for a DPOA. Anyone in the building [Facility] could suggest a DPOA to the Resident...We prefer the family do a DPOA with the patient [Resident] and me. When the surveyor</p>	F 610			

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F 610	Continued From page 6 asked her if the Facility uses a particular company, the AD continued to say, "No, we don't use a particular company for POAs. The surveyor asked her if the Resident needed to be alert. She replied, "Yes, the Resident has to be alert and oriented. The billing company is the POAs for the residents in the Facility. The CC is a consulting and billing company that processes Medicaid applications. When the surveyor asked the AD how the company became a resident's POA, she replied, "I have to have my lawyer present." The AD continued, "the President of the billing company is Resident #2's POA. When the surveyor asked her if the billing company was Resident #2's POA, who decided to sell the assets, the AD refused to answer. When the surveyor asked her to explain the POA, the AD stated, "General power of attorney is when a person can no longer make medical, financial, or durable decisions. POA is for future protection." The AD explained that a "Resident has to be alert to sign a POA. They [residents] have to know what they are signing. I would love to say who named the POA in this case, but I can't." When the surveyor showed the AD the DPOA form and asked if she was present when Resident #2 signed the document, she replied, "Yes, I was present, and the AC." The surveyor asked her the location where the DPOA was signed. She replied all I can say is Resident #2 signed the DPOA, and I witnessed it, but I cannot say the location or if the billing company was present, and I have no idea about the notary. She explained once the DPOA is signed, we give it to the POA and a copy to Social Services. She further stated that the notary was not present when the Resident signed the DPOA. She also stated I had just signed as a witness. The AD stated that the POA was not here when the DPOA was signed. "I don't know if	F 610			

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F 610	<p>Continued From page 7</p> <p>a POA can be both a POA and a notary. Honestly, I wouldn't know if a notary would be present when I signed the form ... I do what I'm told."</p> <p>At the time of the survey, the President of CC, the POA for Resident #2, was unavailable for an interview.</p> <p>During the survey, no other documents were presented to the survey team indicating the Facility investigated the allegation made by Resident #2.</p> <p>A review of a facility policy titled "Resident Abuse" date reviewed January 2022 revealed Under "Philosophy" included: "The Facility believes that every Resident has the right to be free from any form of abuse whether it be; verbal, physical, sexual, mental, corporal punishment or involuntary seclusion. Each Resident has the right to be free from mistreatment, neglect and misappropriation of property." Under "Interpretive Guide Definitions (F223), (F224)" included "...mental Abuse includes, but is not limited to, humiliation, harassment, threats of punishment or deprivation" "Misappropriation of resident property" means the deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a resident's belongings or money without the Resident's consent." Under "Investigation" included: "1. Employee is immediately reassigned. If abuse is suspected, the employee is suspended pending the outcome of the full investigation. 2. The Director of Nursing or designee will conduct a full investigation regarding the incident immediately upon report ...4. An incident report is initiated ...7. Interview of all Resident [s] and all witnesses conducted and statements documented. 8. If it is determined that</p>	F 610			



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F 610	<p>Continued From page 8</p> <p>the allegation is substantiated, the employee is terminated and reports are sent to any necessary licensing agencies. 9. The Charge nurse, Director of Nursing or Social Services shall inform family (next of kin) and/or sponsor of the outcome of the investigation. A written investigation should include the Resident's name, age, person registering the complaint, the nature of the complaint, and the staff member involved. List all staff and residents interviewed with their statement. The person preparing the report must include their name and title ..."</p> <p>A review of a facility's policy titled "Resident Rights" date reviewed January 2022 revealed Under "Policy" included: "It is the policy of this Facility to ensure that the Resident can exercise his or her rights as a resident of this Facility, as a citizen or Resident of the United States. The Facility will ensure that the Resident can exercise his/her rights without interference, coercion, discrimination, or reprisal from the facility 483.10(b). All residents have rights guaranteed to them under Federal and State laws and regulations to exercise of those rights." Under "Purpose": "To be in compliance with CMS (Centers for Medicaid &amp; Medicare Services) guidelines 483.10. All activities and interactions with residents by any staff, temporary agency staff or volunteers must focus on assisting the Resident in maintaining and enhancing his or her self-esteem and self-worth and incorporating the Resident's, goals, preferences, and choices." Under "General Information": "...Residents are treated with respect, dignity and equal access to services regardless of payment source ..."</p> <p>January 2022 revealed Under "Policy" included: "It is the policy of this Facility to ensure that the Resident can exercise his or her rights as a</p>	F 610			

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