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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315229 | (X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING | (X3) DATE SURVEY COMPLETED 11/03/2025 |
| NAME OF PROVIDER OR SUPPLIER Phoenix Center for Rehabilitation and Pediatrics | | | STREET ADDRESS, CITY, STATE, ZIP CODE 1433 RINGWOOD AVE , HASKELL, New Jersey, 07420 | |
| (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) COMPLETION DATE |
| F0000 | INITIAL COMMENTS Complaint #: 2580072 and 2612240 Census: 91 Sample Size: 3 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. Deficiencies were cited for this survey. | F0000 | | 12/11/2025 |
| F0732 SS = D | Posted Nurse Staffing Information CFR(s): 483.35(i)(1)-(4) §483.35(i) Nurse Staffing Information. §483.35(i)(1) Data requirements. The facility must post the following information on a daily basis: (i) Facility name. (ii) The current date. (iii) The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: (A) Registered nurses. (B) Licensed practical nurses or licensed vocational nurses (as defined under State law). (C) Certified nurse aides. (iv) Resident census. §483.35(i)(2) Posting requirements. (i) The facility must post the nurse staffing data | F0732 | F-0732 Posted Nurse Staffing Information IMMEDIATE ACTION On 11/03/2025, the most updated schedule was posted on the wall immediately to ensure the accuracy of staff attendance in the building. IDENTIFY OTHERS: On 11/03/2025, all residents have the potential to be affected when staffing schedules are not posted, as unclear staff assignments may impact care delivery. INSERVICES: An in-service was initiated on 11/3/2025, with the US FOIA (b)(6) reinforcing the requirements, process/procedure/ importance of accurate completion. The schedule must be posted daily in the AM by the designated location on the wall by the supervisor's office. The staffing coordinator will ensure that the posted schedule is always the most up-to-date version, reflecting call-outs, shift swaps, and changes. QAPI: The Director of Nursing/designee will verify daily, Monday through Friday, that the updated schedule is | 11/04/2025 |

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 reverse for further 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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| F0732 SS = D | <p>Continued from page 1 specified in paragraph (i)(1) of this section on a daily basis at the beginning of each shift.</p> <p>(ii) Data must be posted as follows:</p> <p>(A) Clear and readable format.</p> <p>(B) In a prominent place readily accessible to residents, staff, and visitors.</p> <p>§483.35(i)(3) Public access to posted nurse staffing data. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.</p> <p>§483.35(i)(4) Facility data retention requirements. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater.</p> <p>This REQUIREMENT is NOT MET as evidenced by:</p> <p>Complaint #2580072</p> <p>Based on observation, interview, and review of pertinent facility documents, it was determined that the facility failed to ensure that the 24-hour staffing report was accurately posted within the facility for the residents and the visitors to view for 2 of 2 observations.</p> <p>This deficient practice was evidenced by the following:</p> <p>On 11/3/25 at 8:20 AM, the surveyor entered the facility and observed that the Nursing Home Resident Care Staffing Report (NHRCSR) that was posted on the receptionist desk was dated 11/2/25, day shift. The NHRCSR was not up to date.</p> <p>On 11/3/25 at 2:18 PM, both the surveyor and the [US FOIA (b)(6)], observed the posted NHRCSR was dated [REDACTED] for day shift. The [US FOIA (b)(6)] informed the surveyor that she was covering for the [US FOIA (b)(6)]. She stated that she was unsure if she can update the posted NHRCSR because it was the responsibility of the [US FOIA (b)(6)] to post updated NHRCSR.</p> <p>On 11/3/25 at 2:21 PM, the surveyor notified the</p> | F0732 | <p>Continued from page 1 posted on the schedule wall. Weekend supervisors will complete the same check and document compliance in the communication log. Audit results will be reviewed in monthly QA meetings for a period of 3 months or until sustained compliance is achieved.</p> <p>Completion date:11/04/2025</p> | |

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| F0732 SS = D | <p>Continued from page 2 US FOIA (b)(6) of the above findings and concerns with regard to NHRCSR posted dated 11/2/25.</p> <p>On that same date at 2:45 PM, the US FOIA (b)(6) informed the surveyors that the NHRCSR should be posted timely and updated for nursing staffing by whoever covering for the US FOIA (b)(6). She confirmed that the NHRCSR reflected the staff to resident ratio and should comply with the requirements.</p> <p>A review of the facility's "Posting of Nurse Staffing Information Policy" that was provided by the US FOIA (b)(6) with a revision date of 6/2025, revealed, on a daily basis the nursing facility will post nurse staffing data for the licensed and unlicensed staff directly responsible for resident care in the facility. Procedure: 1. Data requirements: the facility must post the following information on a daily basis: facility name, current date, the total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: registered nurse, licensed practical nurses or licensed vocational nurses, certified nurses aide, and resident census....</p> <p>N.J.A.C. 8:39-41.2 (a)(b)(c)</p> | F0732 | | |

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| F0000 | <p>INITIAL COMMENTS</p> <p>An offsite/desk review of the facility's Plan of Correction was conducted on 12/11/25 in relation to the 11/03/25 Complaint survey. The facility was found to be in compliance with 42 CFR Part 483, Requirements for Long Term Care Facilities.</p> | F0000 | | |

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