

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

PRINTED: 11/07/2022  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>315494</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/07/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>ALARIS HEALTH AT THE CHATEAU</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>96 PARKWAY</b> <b>ROCHELLE PARK, NJ 07662</b>		
(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	
F 000	INITIAL COMMENTS  Complaint #: NJ145575, NJ141557, NJ144168, NJ143791, NJ145020, NJ144966 Census: 139 Sample Size: 10  The facility is not in compliance with the requirements of 42 CFR Part 483, Subpart B, for Long Term Care Facilities based on this complaint survey.	F 000			
F 623 SS=D	Notice Requirements Before Transfer/Discharge CFR(s): 483.15(c)(3)-(6)(8)  §483.15(c)(3) Notice before transfer. Before a facility transfers or discharges a resident, the facility must- (i) Notify the resident and the resident's representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman. (ii) Record the reasons for the transfer or discharge in the resident's medical record in accordance with paragraph (c)(2) of this section; and (iii) Include in the notice the items described in paragraph (c)(5) of this section.  §483.15(c)(4) Timing of the notice. (i) Except as specified in paragraphs (c)(4)(ii) and (c)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged. (ii) Notice must be made as soon as practicable before transfer or discharge when-	F 623		7/29/21	

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

TITLE

(X6) DATE

Electronically Signed

07/29/2021

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 623	<p>Continued From page 1</p> <p>(A) The safety of individuals in the facility would be endangered under paragraph (c)(1)(i)(C) of this section;</p> <p>(B) The health of individuals in the facility would be endangered, under paragraph (c)(1)(i)(D) of this section;</p> <p>(C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (c)(1)(i)(B) of this section;</p> <p>(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (c)(1)(i)(A) of this section; or</p> <p>(E) A resident has not resided in the facility for 30 days.</p> <p>§483.15(c)(5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must include the following:</p> <p>(i) The reason for transfer or discharge;</p> <p>(ii) The effective date of transfer or discharge;</p> <p>(iii) The location to which the resident is transferred or discharged;</p> <p>(iv) A statement of the resident's appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and assistance in completing the form and submitting the appeal hearing request;</p> <p>(v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;</p> <p>(vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities established under Part</p>	F 623			

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F 623	<p>Continued From page 2</p> <p>C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Pub. L. 106-402, codified at 42 U.S.C. 15001 et seq.); and (vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.</p> <p>§483.15(c)(6) Changes to the notice. If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available.</p> <p>§483.15(c)(8) Notice in advance of facility closure In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l). This REQUIREMENT is not met as evidenced by: Complaint Intake: NJ144168</p> <p>Based on interviews and record review, it was determined the facility failed to provide written notice of a facility-initiated discharge to the resident, resident representative, and the Ombudsman, for 1 (Resident # [REDACTED] of [REDACTED] residents reviewed for discharge services. The facility decided not to permit Resident [REDACTED] to return to the</p>	F 623	<p>Resident [REDACTED] no longer resides in the facility.</p> <p>Residents at risk for facility-initiated discharge or transfer have the potential to be affect by this allegedly deficient practice. There are currently no residents at-risk for facility-initiated discharge or transfer.</p>		

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F 623	<p>Continued From page 3</p> <p>facility after being transferred to the hospital and failed to send the discharge notices.</p> <p>Findings include:</p> <p>1. Resident [REDACTED] was admitted to the facility on [REDACTED] 18 with diagnoses of adjustment disorder, [REDACTED]. A review of the most recent quarterly Minimum Data Set (MDS) dated [REDACTED] revealed the resident was cognitively intact with a Brief Interview for Mental Status (BIMS) score of [REDACTED]. The resident had [REDACTED] directed towards others one to three [REDACTED] directed at others one to three days, and [REDACTED] symptoms not directed towards others one to three days.</p> <p>A review of medical records indicated Resident [REDACTED] began having behaviors that escalated throughout the resident's stay. By [REDACTED], the resident had [REDACTED] directed toward others one to three days a week. The resident had [REDACTED] and [REDACTED] behaviors directed at others and other behaviors not directed at others one to three times a week.</p> <p>The medical record revealed Resident [REDACTED] was transferred to a local acute care hospital several times for [REDACTED] evaluations by a crisis team and had returned to the facility. Nonpharmacologic and pharmacologic interventions had been implemented for the resident's behaviors, but the behaviors continued to escalate.</p> <p>On 03/22/2021 at 8:40 PM, the facility initiated a police call to have Resident [REDACTED] arrested due to assaulting a nurse. When the policemen arrived,</p>	F 623	<p>The policy and procedure of notifying a resident/representative and the LTCO regarding a facility-initiated transfer was reviewed by the Administrator. Administrative and social service staff was re-inserviced by the administrator of said policy and procedure.</p> <p>Any discharge notices that meet the same criteria will be audited by the administrator on a quarterly basis. Results of said audit will be brought to the quarterly quality assurance committee for review, suggestions and input.</p>		

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F 623	<p>Continued From page 4</p> <p>Resident [REDACTED] assaulted a policeman on the head with the footrest from the resident's wheelchair.</p> <p>A review of the notice of emergency transfer dated [REDACTED] revealed Resident [REDACTED] was transferred to a local acute hospital for a [REDACTED] evaluation after the resident assaulted a nurse and a police officer.</p> <p>On 07/07/2021 at 4:24 PM, the Administrator revealed Resident [REDACTED] was very strong and once the resident got upset, there was no way the facility staff could control the resident. The resident was arrested but due to [REDACTED], the police could not hold the resident. The resident was sent to a hospital for an evaluation, and the hospital did call and wanted to discharge the resident back to the facility. The Administrator revealed that in the past the resident had been readmitted, but the resident's behaviors had gotten so [REDACTED] and [REDACTED] they did not accept the resident back to the facility. The Administrator further revealed only an emergency transfer notice had been sent with the resident. When questioned if a discharge notice had been provided after they decided not to allow the resident to return, the Administrator was unaware a notice of discharge was required after the facility refused to readmit Resident [REDACTED] from the local hospital.</p> <p>The resident did not return to the facility. A review of records did not include documentation that a written notice of discharge had been provided to the ombudsman, the resident, and the resident representative after the facility decided not to allow the resident to return.</p> <p>New Jersey Administrative Code § 8:39-5.1(a)</p>	F 623			

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