

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 07033	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/30/2021
NAME OF PROVIDER OR SUPPLIER NUTLEY ADULT DAY CARE CENTER INC		STREET ADDRESS, CITY, STATE, ZIP CODE 357-361 HARRISON STREET NUTLEY, NJ 07110		
(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
M 000	Initial Comments Type of Survey: Initial inspection of a recently renovated Adult Medical Day Care building. This inspection will be for 25 Adult Medical Day Care Participant slots. The facility was not in substantial compliance with all of the standards in the New Jersey Administrative Code, Chapter 8:43F, Standards for Licensure of Adult Day Health Services. 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 the provisions of New Jersey Administrative Code, Title 8, Chapter 43E, Enforcement of Licensure Regulations.	M 000		
M 597	8:43F-14.1(a) Physical Plan Requirements Construction standards for freestanding facilities for new buildings and alterations, renovations, and additions to existing buildings for freestanding adult health services facilities shall comply with N.J.A.C. 5:23-3.2 of the New Jersey Uniform Construction Code; the New Jersey Uniform Fire Code, N.J.A.C. 5:70; and with N.J.A.C. 5:23-7, the Barrier-Free Subcode of the New Jersey Uniform Construction Code. This REQUIREMENT is not met as evidenced by: Based on observations on 11/30/2021, in the presence of facility management, it was	M 597		

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

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(X6) DATE

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M 597	Continued From page 1 determined the facility failed to provide: 1) Two (2) Ground Fault Circuit Interrupter (GFCI) electrical outlets that function properly 2) Properly fire seal penetrations around fire sprinkler pipes. 3) A hazard free environment 4) 1 of 11 battery back-up emergency lights failed to function properly when tested, as required by the New Jersey Uniform Construction Code 5:23. This deficient practice was evidenced by the following: During the survey entrance at 9:31 a.m., the surveyor asked the facility Administrator (Admin.) to provide: 1. the Department of Community Affairs (DCA) approved architectural plans for review and 2. whether the facility utilized an emergency generator and if it required battery back up for emergency lights and illuminated exit signs. The Admin., "No generator, we have battery back up." During the tour of the facility with the Admin. starting at 10:16 a.m., the surveyor observed the following fire and safety hazards: 1. During the building tour, the surveyor observed every window in the facility had a fire sprinkler pipe extending downward from the drop ceiling with gaps around the pipes ranging from 1/4 of an inch up to 3/8 of an inch. These penetrations would prevent the rooms' down pendant fire sprinkler from functioning properly in the event of a fire. Safety Hazard. 2. At 10:45 AM,, an inspection in the Quiet room, the surveyor identified an unlocked electrical panel. Inspection inside the electrical panel identified a 3/4 inch by 2-1/4 inch opening	M 597		

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M 597	Continued From page 2 (breaker slot #16) in the panel leading to the live electricity. Participant safety hazard. 3. At 10:50 AM, in the Pharmacy, the surveyor observed one (1) GFCI outlet located within 4 feet of a sink and 22 inches to the left of the hand washing sink. The surveyor used a GFCI tester to de-energize the GFCI outlet. When tested, the GFCI outlet had not been de-energized as required. Participant safety hazard. 4. At 11:05 AM, in the Physical Therapy participant bathroom, the surveyor observed one (1) GFCI outlet 24 inches to the right of the hand washing sink. The surveyor used a GFCI tester to de-energize the GFCI outlet. When tested, the GFCI outlet had not been de-energized as required. Participant safety hazard. 5. At 11:05 AM, during a test of the battery back up emergency light inside the Physical Therapy participant bathroom did not function properly. Fire safety hazard.	M 597		



Nutley Adult Daycare Center INC.

PLAN OF CORRECTION DATED 12/06/21

PICTURE # 1 (QUIET ROOM)



PICTURE # 2 (Clean Linen Closet)



357 -361 Harrison St, Nutley, New Jersey, 07110. Phone # 973-798-8867

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Nutley Adult Daycare Center INC.

PICTURE # 3 (ACTIVITY ROOM)



PICTURE # 4 (ELECTRICAL CLOSET)



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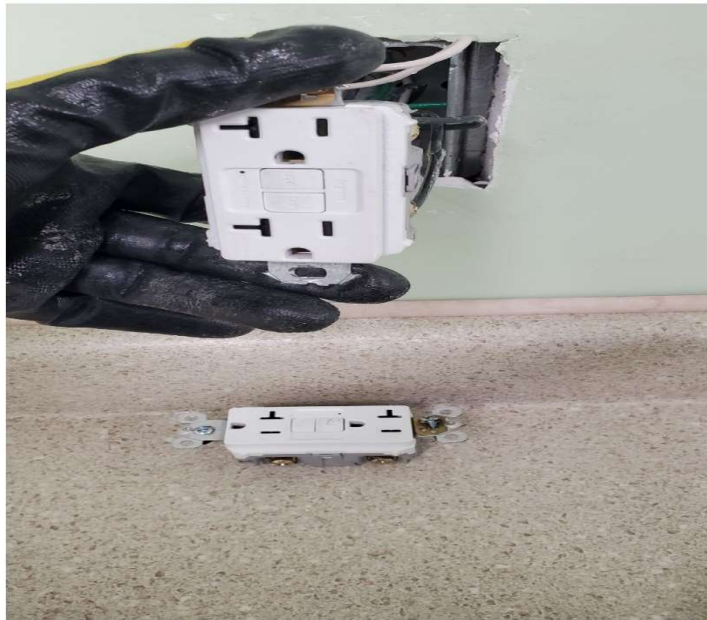


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PICTURE # 5 (ELECTRICAL CIRCUIT BREAKER BOX)



PICTURE # 6 (GFCI IN PHYSICAL THERAPY)



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PICTURE # 7 (GFCI IN PHARMACY)



PICTURE # 8 (EMERGENCY LIGHT IN PHYSICAL THERAPY RESTROOM)



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