

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15A001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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A 000	<p>Initial Comments</p> <p>Initial Comments: TYPE OF SURVEY: Complaint</p> <p>COMPLAINT #: NJ00157845, NJ00157861, NJ00146372</p> <p>CENSUS: 49</p> <p>SAMPLE SIZE: 9</p> <p>The facility is not in 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.</p>	A 000		
A 745	<p>8:36-7.2(f) Resident Assessments and Care Plans</p> <p>(f) The initial health care assessment shall be documented by the registered nurse and shall be updated as required, in accordance with the rules of this chapter and professional standards of practice.</p> <p>This REQUIREMENT is not met as evidenced by: NJ00157845, NJ00157861, NJ00146372</p> <p>Based on interview and record review, it was</p>	A 745		

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

TITLE

(X6) DATE

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A 745	<p>Continued From page 1</p> <p>determined that the facility failed to ensure that the Registered Nurse (RN) completed an assessment status post a change in condition that required emergency treatment for 1 of 9 residents. Resident #6. This deficient practice was evident by the following:</p> <p>On 9/19/22 at 12:00 p.m., the surveyor reviewed Resident #6's medical record (MR) which revealed that the resident moved into the facility on [redacted] with diagnoses which included NJ Ex Order 26.4(b)(1) [redacted] NJ Ex Order 26.4(b)(1) [redacted]. During MR review, the surveyor identified an "Emergency After Visit Summary" dated [redacted] which identified that Resident #6 was examined for [redacted] and diagnosed with [redacted]. The MR failed to contain documented evidence of a nursing assessment for NJ Ex Order 26.4(b)(1) [redacted] with [redacted] nor upon return from the Emergency Room visit.</p> <p>On 9/19/22 at 1:50 p.m., the surveyor interviewed the Resident Care Aide (RCA) who explained that Resident #6 NJ Ex Order 26.4(b)(1) [redacted] which caused [redacted] NJ Ex Order 26.4(b)(1) [redacted], unsure of date.</p> <p>On 9/19/20 at 2:30 p.m., the surveyor requested Resident #6's electronic MR documentation and assessments from the Resident Service Coordinator (RSC) and the Executive Director (ED). Upon review, the surveyor observed that Resident #6's last nursing "Clinical Evaluation" assessment was dated for [redacted] NJ Ex Order 26.4 [redacted].</p> <p>On 9/20/22 at 1:30 p.m., the surveyor interviewed the RSC who explained that she was aware of Resident #6's [redacted] NJ Ex [redacted] on [redacted] NJ Ex Order 26.4 [redacted] but did not document an assessment in the MR. Further, the RSC explained that assessments were usually</p>	A 745		

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A 745	<p>Continued From page 2</p> <p>performed when there was a change of condition but she was new to the position as of [REDACTED] and was still getting familiar with policy and procedure.</p> <p>On 9/20/22 at 1:45 p.m., the surveyor reviewed the facility policy and procedure titled "CLINICAL EVALUATIONS" which required that " ...Residents are clinically evaluated upon move-in, 30 [thirty] days, 6 [six] months and with changes of condition per state regulations ...."</p> <p>The facility failed to ensure that an assessment was performed or documented in Resident #6's MR following [REDACTED] on [REDACTED] that required emergency treatment for a change in condition.</p>	A 745		
A 749	<p>8:36-7.3(a) Resident Assessments and Care Plans</p> <p>(a) The resident general service plan shall be reviewed and, if necessary, revised semi-annually, and more frequently as needed based upon the resident's response to the care provided and any changes in the resident's physical or cognitive status.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #'s NJ00157845, NJ00157861, NJ00146372</p> <p>Based on interview and record review, it was determined that the facility failed to develop, implement, and revise the resident's General</p>	A 749		

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A 749	<p>Continued From page 3</p> <p>Service Plans (GSP) to ensure the safety of residents who were status <sup>NJ Ex Order 26.4(b)</sup> and at risk <sup>NJ Ex Order 26.4(b)(1)</sup> for 3 of 9 residents reviewed, Residents #2, #4, and #6. This deficient practice was evidenced by the following:</p> <p>1. On 9/19/22 at 10:20 a.m., the surveyor reviewed Resident #2's medical record (MR) which revealed that Resident #2 moved into the facility on <sup>NJ Ex Order 26.4(b)</sup> with diagnoses which included <b>NJ Ex Order 26.4(b)(1)</b>, <sup>NJ Ex Order 26.4(b)(1)</sup> <sup>NJ Ex Order 26.4(b)(1)</sup>, and <b>NJ Ex Order 26.4(b)(1)</b>. According to the GSP dated 1/6/22, Resident #2 was <sup>NJ Ex Order 26.4(b)(1)</sup> and <sup>NJ Ex Order 26.4(b)(1)</sup> but required <sup>NJ Ex Order 26.4(b)(1)</sup> and <sup>NJ Ex Order 26.4(b)(1)</sup>. Further review of the GSP identified that Resident #2 was <sup>NJ Ex Order 26.4(b)</sup> and interventions were last revised on <sup>NJ Ex Order 26.4(b)(1)</sup>.</p> <p>The surveyor than reviewed Resident #2's Progress Notes (PN) which revealed that on <sup>NJ Ex Order 26.4(b)</sup> the Licensed Practical Nurse (LPN) documented at 7:49 p.m., that Resident #2 was <b>NJ Ex Order 26.4(b)(1)</b>. Also, the LPN documented on <sup>NJ Ex Order 26.4(b)</sup> at 2:58 p.m., that Resident #2 <sup>NJ Ex Order 26.4(b)(1)</sup> and <sup>NJ Ex Order 26.4(b)(1)</sup>. Further review of the MR identified that Resident #2 was seen on <sup>NJ Ex Order 26.4(b)</sup> by the Medical Doctor (MD) which revealed that Resident #2 was referred to <sup>NJ Ex Order 26.4(b)(1)</sup> for <sup>NJ Ex Order 26.4(b)</sup> and <sup>NJ Ex Order 26.4(b)</sup>. The GSP dated <sup>NJ Ex Order 26.4(b)</sup> reflected no updated or revised <sup>NJ Ex Order 26.4(b)(1)</sup> interventions <sup>NJ Ex Order 26.4(b)(1)</sup> and exceeded the 6 month reevaluation period.</p> <p>2. On 9/19/22 at 11:20 a.m., the surveyor reviewed Resident #4's MR which revealed that Resident #4 moved into the facility on <sup>NJ Ex Order 26.4(b)</sup> with diagnoses which included <sup>NJ Ex Order 26.4(b)(1)</sup> <sup>NJ Ex Order 26.4(b)(1)</sup> and <sup>NJ Ex Order 26.4(b)(1)</sup>.</p>	A 749		

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A 749	<p>Continued From page 4</p> <p><b>NJ Ex Order 26.4(b)(1)</b>), and <b>NJ Ex Order 26.4(b)(1)</b>. According to the "Clinical Evaluation" dated <b>NJ Ex Order 26.4(b)(1)</b>, Resident #4 was <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b>. The GSP dated <b>NJ Ex Order 26.4(b)(1)</b> revealed that Resident #4 was at <b>NJ Ex Order 26.4(b)(1)</b> related to diagnosis of <b>NJ Ex Order 26.4(b)(1)</b>. In addition, the GSP indicated under "Safety," Resident #4's <b>NJ Ex Order 26.4(b)(1)</b> interventions had last been revised <b>NJ Ex Order 26.4(b)(1)</b>.</p> <p>The surveyor reviewed Resident #4's PN's and identified that the LPN documented on <b>NJ Ex Order 26.4(b)(1)</b> at 4:01 p.m. that Resident #4 was <b>NJ Ex Order 26.4(b)(1)</b> from previous shift." Further, the LPN documented on <b>NJ Ex Order 26.4(b)(1)</b> at 6:26 p.m. that "report [was] rec'd [received] resident <b>NJ Ex Order 26.4(b)(1)</b> updated since <b>NJ Ex Order 26.4(b)(1)</b> despite the resident having <b>NJ Ex Order 26.4(b)(1)</b> in <b>NJ Ex Order 26.4(b)(1)</b>. Also, the GSP is to be revised every 6 months and/or with a change in condition.</p> <p>3. On 9/19/20 at 12:00 p.m., the surveyor reviewed the MR of Resident #6 which revealed that Resident #6 moved into the facility on <b>NJ Ex Order 26.4(b)(1)</b> with diagnoses which included <b>NJ Ex Order 26.4(b)(1)</b>. According to the "Clinical Evaluation" dated <b>NJ Ex Order 26.4(b)(1)</b>, Resident #6 was <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b>. The MD report dated <b>NJ Ex Order 26.4(b)(1)</b> revealed that Resident #6 was seen for "recurrent <b>NJ Ex Order 26.4(b)(1)</b> [and had] <b>NJ Ex Order 26.4(b)(1)</b> in the past 24 hours." Also, the Emergency Room (ER) "AFTER VISIT SUMMARY" dated <b>NJ Ex Order 26.4(b)(1)</b> indicated that Resident #6 was seen for <b>NJ Ex Order 26.4(b)(1)</b> and was diagnosed with a <b>NJ Ex Order 26.4(b)(1)</b>. In addition, Resident #6 was seen at the ER on <b>NJ Ex Order 26.4(b)(1)</b> and was diagnosed with <b>NJ Ex Order 26.4(b)(1)</b> according to the "AFTER VISIT SUMMARY."</p>	A 749		

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A 749	<p>Continued From page 5</p> <p>The surveyor reviewed Resident #6's PN's and identified on [redacted] the LPN documented that Resident #6 "had an [redacted] NJ Ex Order 26.4(b)(1)" with [redacted] as well as [redacted] NJ Ex Order 26.4(b)(1). " Also, the LPN documented on [redacted] at 8:48 p.m., that Resident #6 was [redacted] NJ Ex Order 26.4(b)(1) " On [redacted] at 5:29 p.m., the LPN documented that Resident #6 [redacted] and [redacted] NJ Ex Order 26.4(b)(1). " Additionally, the surveyor reviewed the GSP dated [redacted] and identified that the GSP addressed [redacted] and [redacted] NJ Ex Order 26.4(b)(1) needs but there was no development of [redacted] NJ Ex Order 26.4(b)(1) goals or interventions in place for Resident #6 who had sustained [redacted] NJ Ex Order 26.4(b)(1) with [redacted] NJ Ex Order 26.4(b)(1)</p> <p>On 9/20/22 at 1:45 p.m., the surveyor interviewed the Resident Service Coordinator (RSC) who explained that she just became the RSC on [redacted] NJ Ex Order 26.4(b)(1). The RSC also explained that GSP's were normally initiated on move-in to the facility and updated annually and with changes in condition.</p> <p>On 9/20/22 at 2:00 p.m., the surveyor reviewed the facility policy and procedure titled "FALLS PREVENTION" and listed under "PROCESS: ...In the event that a resident is at risk for falls, interventions are incorporated into the resident's Service Plan ...There are multiple contributing factors when examining the reason, a resident falls ...interventions should be geared toward the interaction of all those contributing factors ..."</p> <p>The facility failed to develop, implement, and revise GSP's for Resident #2, Resident #4, and Resident #6 status [redacted] NJ Ex Order 26.4(b)(1) in order to maintain safety and decrease the risk for [redacted] NJ Ex Order 26.4(b)(1). The facility policy was not in accordance with regulations which requires reevaluation semi</p>	A 749		
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A 749	Continued From page 6 annually and not annually.	A 749		
A 963	<p>8:36-11.5(f) Pharmaceutical Services</p> <p>(f) Medications shall be accurately administered and documented by properly authorized individuals, in accordance with prescribed orders.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #'s NJ00157845, NJ00157861, NJ00146372</p> <p>Based on interview and record review, it was determined that the facility failed to ensure that medication was accurately documented as administered in accordance with prescriber's orders for 8 of 9 residents, Residents #1, #2, #3, #4, #6, #7, #8, and #9. This deficient practice was evidenced by the following:</p> <p>On 9/19/22 at 7:35 a.m., the surveyor conducted a medication pass with the Licensed Practical Nurse (LPN #1). The surveyor reviewed the Medication Administration Record (MAR) where staff were required to document that a medication was administered in accordance with prescriber's orders. The surveyor observed blanks where staff failed to document the administration of medications with no explanation as to why the medication was not given.</p> <p>On 9/19/22 at 9:50 a.m., during resident medical record (MR) and MAR review, the surveyor</p>	A 963		



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A 963	<p>Continued From page 8</p> <p><b>NJ Ex Order 26.4(b)(1)</b> which identified three medications and one <b>NJ Ex Order 26.4(b)(1)</b> that were not documented as administered to Resident #2 on the following dates and times:</p> <p>a) On <b>NJ Ex Order 26.4(b)(1)</b> ) 7:00 p.m.</p> <p>b) On <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> ) 3:00 p.m.</p> <p>c) On <b>NJ Ex Order 26.4(b)(1)</b> ) 3:00 p.m.</p> <p>d) On <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> ) 3:00 p.m.</p> <p>3. On 9/19/22 at 10:50 a.m., the surveyor reviewed Resident #3's MAR dated <b>NJ Ex Order 26.4(b)(1)</b> which identified that there were <b>NJ Ex Order 26.4(b)(1)</b> medications not documented as administered to Resident #3 on the following dates and times:</p> <p>a) On <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 p.m., and on <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 a.m.</p> <p>b) On <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 a.m., on and 8:00 p.m., off</p> <p>c) On <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 p.m., and <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 p.m.</p> <p>d) On <b>NJ Ex Order 26.4(b)(1)</b> ) 4:00 p.m., and <b>NJ Ex Order 26.4(b)(1)</b> ) 4:00 p.m.</p> <p>e) On <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> ) 7:00 a.m. to 7:00 p.m., doses unsigned. Also, on <b>NJ Ex Order 26.4(b)(1)</b>, <b>NJ Ex Order 26.4(b)(1)</b>, and <b>NJ Ex Order 26.4(b)(1)</b> ) 7:00 p.m., to 7:00 a.m.</p> <p>4. On 9/19/22 at 11:00 a.m., the surveyor reviewed Resident #6's MAR dated for <b>NJ Ex Order 26.4(b)(1)</b> which identified that there were <b>NJ Ex Order 26.4(b)(1)</b> medications not documented as administered to Resident #6</p>	A 963		

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A 963	<p>Continued From page 9</p> <p>on the following dates and times:</p> <p>a) On <sup>NJ Ex Order 26.4f</sup> and <b>NJ Ex Order 26.4(b)(1)</b> ) 8:00 p.m.</p> <p>b) On <b>NJ Ex Order 26.4(b)(1)</b> one 8:00 a.m.</p> <p>c) On <b>NJ Ex Order 26.4(b)(1)</b> 8:00 a.m.</p> <p>5. On 9/19/22 at 11:30 a.m., the surveyor reviewed Resident #7's MAR which identified that there were <sup>NJ Ex O</sup> medications not signed to indicate administration to Resident #7 on the following dates and times:</p> <p>a) On <sup>NJ Ex Order 26.4f</sup> and <b>NJ Ex Order 26.4(b)(1)</b> ) 5:00 p.m.</p> <p>6. On 9/19/22 at 11:50 a.m., the surveyor reviewed Resident #8's MAR dated <sup>NJ Ex Order 26</sup> which identified <sup>NJ Ex Order 26</sup> medications that were not documented as administered to Resident #8 on the following dates and times:</p> <p>a) On <b>NJ Ex Order 26.4(b)(1)</b> ) 5:00 p.m., and <sup>NJ Ex Order 26.4(b)(1)</sup> 5:00 p.m. Also, on <b>NJ Ex Order 26.4(b)(1)</b> was unsigned for the 5:00 p.m., dose.</p> <p>b) On <b>NJ Ex Order 26.4(b)(1)</b> 5:00 p.m.</p> <p>7. On 9/19/22 at 12:15 p.m., the surveyor reviewed Resident #9's MAR dated <sup>NJ Ex Order 26</sup> which identified that there were <sup>NJ Ex Order 26</sup> medications not documented as administered to Resident #8 on the following dates and times:</p> <p>a) On <sup>NJ Ex Order 26.4f</sup> and <b>NJ Ex Order 26.4(b)(1)</b></p>	A 963		
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A 963	<p>Continued From page 10</p> <p>NJ Ex Order 26.4(b)(1) ) 9:00 a.m. Also, on NJ Ex Order 26.4(b)(1) ) 9:00 p.m.</p> <p>b) On NJ Ex Order 26.4(b)(1) ) 9:00 a.m., and 9:00 p.m., NJ Ex Order 26.4(b)(1) ) 9:00 a.m., and 5:00 p.m., NJ Ex Order 26.4(b)(1) ) 9:00 p.m., NJ Ex Order 26.4(b)(1) ) 9:00 p.m., NJ Ex Order 26.4(b)(1) ) 9:00 a.m., 1:00 p.m., and 5:00 pm., NJ Ex Order 26.4(b)(1) ) 9:00 a.m., and 5:00 p.m., NJ Ex Order 26.4(b)(1) ) 9:00 a.m., NJ Ex Order 26.4(b)(1) ) 9:00 a.m., NJ Ex Order 26.4(b)(1) ) 9:00 p.m., and NJ Ex Order 26.4(b)(1) ) 9:00 p.m., and NJ Ex Order 26.4(b)(1) ) 9:00 p.m., doses were not documented as given on NJ Ex Order 26.4(b)(1) ) and NJ Ex Order 26.4(b)(1) )</p> <p>On 9/19/22 at 1:30 p.m., the surveyor interviewed LPN #1 regarding the missing initials on the residents' MARs who explained that if a resident refused medication or medication was not administered would initial, and then circle the initial, and document the reason why the medication was not administered on the back of the MAR. Additionally, LPN #1 explained that usually there were two staff who performed medication administration and sometimes there was one staff member who performed medication administration and may have missed documenting the administration of medications.</p> <p>8. On 9/20/22 at 11:00 a.m., the surveyor reviewed Resident #4's MAR dated NJ Ex Order 26.4(b)(1) ) which identified NJ Ex Order 26.4(b)(1) ) medications not documented as administered to Resident #4 on the following dates and times:</p> <p>a) On NJ Ex Order 26.4(b)(1) ) tablet</p>	A 963		
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New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15A001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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A 963	<p>Continued From page 11</p> <p>(NJ Ex Order 26.4(b)(1)) 8:00 p.m., (NJ Ex Order 26.4(b)(1)) 8:00 p.m., (NJ Ex Order 26.4(b)(1)) 8:00 p.m., and (NJ Ex Order 26.4(b)(1)) 8:00 p.m. b) On (NJ Ex Order 26.4(b)(1)) 4:00 p.m.</p> <p>On 9/20/22 at 11:15 a.m., the surveyor interviewed LPN #2 who also explained that if a resident refused medication or if a medication was not administered the medication was initialed, circled, and the reason why the medication was not given was to be documented on the back of the MAR. Additionally, LPN #2 explained that sometimes residents refused medication and staff may not initial right away in an attempt to re-introduce the medication and may forget to complete the documentation.</p> <p>On 9/20/22 at 12:00 p.m., the surveyor reviewed the facility policy and procedure titled "MEDICATION ADMINISTRATION: MEDICATION PASS" and listed under " ...8. Administer Medication ...Document initials on MAR for each medication administered ...Resident Refusal ...Circle initials on MAR and document refusal on back side of MAR ...."</p> <p>On 9/29/22 post survey at 1:30 p.m., the surveyor interviewed LPN #3 regarding the unsigned initials on the MAR who explained that she administered the medications but may have been distracted and forgotten to initial the MAR.</p> <p>The facility failed to ensure that staff accurately documented the administration of medication to indicate that medication had been administered in accordance with prescriber's orders for Resident #1, Resident #2, Resident #3, Resident #4, Resident #6, Resident #7, Resident #8, and</p>	A 963		
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New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15A001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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A 963	Continued From page 12  Resident #9 in accordance with the facility policy.	A 963		
A1011	<p>8:36-11.7(k) Pharmaceutical Services</p> <p>(k) Controlled dangerous substances shall be stored, and records shall be maintained, in accordance with the Controlled Dangerous Substances Acts, N.J.S.A. 24:21-1 et seq. and all other Federal and State laws and regulations concerning the procurement, storage, dispensation, administration, and disposition of same.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #'s NJ00157861, NJ00157845, NJ00146372</p> <p>Based on interview and record review, it was determined that the facility failed to ensure staff consistently documented the shift to shift counts to ensure accountability of the inventory on 4 of 4 sampled medication carts.</p> <p>This deficient practice was evidenced by the following:</p> <p>On 9/20/22 at 11:00 a.m., following a narcotic count with the Licensed Practical Nurse (LPN #1), the surveyor reviewed the and NJ Ex Order 26.4(b)(1) Shift-To-Shift Count Sheet" maintenance record for Medication Cart #1 (MC #1). Upon review, the surveyor observed that there was no "Off-Going Nurse" signature for . Further review identified that there were twenty-five missing on-coming and off-going signature blanks from through for</p>	A1011		

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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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A1011	<p>Continued From page 13</p> <p>MC #1.</p> <p>The surveyor then asked LPN #1 to explain the procedure for <b>NJ Ex Order 26.4(b)(1)</b> counts. LPN #1 informed the surveyor that on-coming staff performed counts with off-going staff and signed the shift-to-shift maintenance record to indicate the count of <b>NJ Ex Order 26.4(b)(1)</b> was correct.</p> <p>On 9/20/22 at 11:45 a.m., the surveyor interviewed LPN #2 who also explained that the <b>NJ Ex Order 26.4(b)(1)</b> count was performed at the beginning and end of every shift and documented by the on-coming and off-going staff member. The surveyor than asked LPN #2 about the missing signatures on the <b>NJ Ex Order 26.4(b)(1)</b> maintenance record who explained that staff may have forgotten to sign or left the shift without signing that a count was performed.</p> <p>On 9/20/22 at 11:55 a.m., the surveyor requested from the Resident Service Coordinator (RSC) <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> Shift-To-Shift Count Sheet" maintenance records for the months of <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> for all medication carts in the facility for review. The surveyor identified the following during review of the <b>NJ Ex Order 26.4(b)(1)</b> maintenance records:</p> <ol style="list-style-type: none"> <li>1. MC #1 <b>NJ Ex Order 26.4(b)(1)</b> maintenance record for the month of <b>NJ Ex Order 26.4(b)(1)</b> revealed twenty-three missing on-coming and off-going signature blanks from <b>NJ Ex Order 26.4(b)(1)</b> through <b>NJ Ex Order 26.4(b)(1)</b>.</li> <li>2. MC #2 <b>NJ Ex Order 26.4(b)(1)</b> maintenance record for the months of <b>NJ Ex Order 26.4(b)(1)</b> and <b>NJ Ex Order 26.4(b)(1)</b> revealed eighteen missing on-coming and off-going signature blanks from <b>NJ Ex Order 26.4(b)(1)</b> through <b>NJ Ex Order 26.4(b)(1)</b>.</li> </ol>	A1011		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15A001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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(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
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A1011	<p>Continued From page 14</p> <p>3. MC #3 [redacted] NJ Ex Order 26.4(b)(1) maintenance record for the months of [redacted] NJ Ex Order 26.4(b)(1) and [redacted] NJ Ex Order 26.4(b)(1) revealed twenty-seven missing on-coming and off-going signature blanks from [redacted] NJ Ex Order 26.4(b)(1) through [redacted] NJ Ex Order 26.4(b)(1).</p> <p>4. MC #4 [redacted] NJ Ex Order 26.4(b)(1) maintenance record for the months of [redacted] NJ Ex Order 26.4(b)(1) and [redacted] NJ Ex Order 26.4(b)(1) revealed thirty-two missing on-coming and off-going signature blanks from [redacted] NJ Ex Order 26.4(b)(1) through [redacted] NJ Ex Order 26.4(b)(1).</p> <p>On 9/20/22 at 12:30 p.m., the surveyor reviewed the facility policy and procedure titled, "MEDICATION ADMINISTRATION: MASTER CONTROLLED SUBSTANCE LOG" and listed on page two required the "Off-going and on-coming responsible persons will conduct a shift-to shift count to verify controlled substance count ...The two responsible persons sign the 8 or 12-hour Controlled Substance Shift-to Shift ...Count Sheet acknowledging that the actual count of controlled substances matches the quantity documented ...."</p> <p>On 9/20/22 at 1:45 p.m., the surveyor interviewed the RSC who explained that she [redacted] NJ Ex Order 26.4(b)(1) position as of [redacted] NJ Ex Order 26.4(b)(1) and was not aware of the missing signatures on the [redacted] NJ Ex Order 26.4(b)(1) count sheets. Also, the RSC informed the surveyor that she was still in the process of reviewing facility documents and records.</p> <p>The facility failed to ensure that staff were consistently documenting their signatures to confirm that shift-to-shift [redacted] NJ Ex Order 26.4(b)(1) counts were performed and [redacted] NJ Ex Order 26.4(b)(1) inventory was accurate in order to maintain accountability of the [redacted] NJ Ex Order 26.4(b)(1) for 4 of 4 medication carts.</p>	A1011		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15A001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ARDEN COURTS (CHERRY HILL)</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2700 CHAPEL AVENUE CHERRY HILL, NJ 08002</b>
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A1073	<p>8:36-15.6(b) Resident Records</p> <p>(b) All assessments and treatments by health care and service providers shall be entered according to the standards of professional practice. Documentation and/or notes from all health care and service providers shall be entered according to the standards of professional practice.</p> <p>This REQUIREMENT is not met as evidenced by: NJ00157845, NJ00157861, NJ00146372</p> <p>Based on observation, interview, and record review, it was determined that facility staff failed to document a [redacted] which required emergency treatment for a change of medical condition in the resident's medical record for 1 of 9 residents, Resident #6. This deficient practice was evidenced by the following:</p> <p>On 9/19/22 at 11:45 a.m., during tour of the facility, the surveyor observed [redacted] and [redacted] on Resident #6's [redacted] as Resident #6 was observed [redacted] of the residential unit. The surveyor verbally acknowledged Resident #6 but the resident [redacted].</p> <p>On 9/19/22 at 12:00 p.m., the surveyor reviewed Resident #6's medical record (MR) which revealed that Resident #6 moved into the facility on [redacted] with diagnoses which included [redacted] NJ Ex Order 26.4(b)(1) [redacted]. According to the "Clinical</p>	A1073		

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A1073	<p>Continued From page 16</p> <p>Evaluation" dated [redacted] NJ Ex Order 26.4, Resident #6 was [redacted] NJ Ex Order 26.4 and [redacted] NJ Ex Order 26.4(b)(1). During review of the MR, the surveyor reviewed an "Emergency After Visit Summary" dated [redacted] NJ Ex Order 26.4 which identified Resident #6 had been examined due to [redacted] NJ Ex Order 26.4 with [redacted] NJ Ex Order 26.4 and was diagnosed with [redacted] NJ Ex Order 26.4(b)(1) [and] [redacted] NJ Ex Order 26.4(b)(1)." The surveyor reviewed the resident's medical record but did not identify any documentation that pertained to Resident #6's Emergency visit on [redacted] NJ Ex Order 26.4. The surveyor than requested Resident #6's electronic "Progress Notes" (PN) from [redacted] NJ Ex Order 26.4 through [redacted] NJ Ex Order 26.4 for review from the Health Service Coordinator (HSC) and the Executive Director (ED).</p> <p>On 9/19/22 at 2:55 p.m., the survey reviewed Resident #6's PN's and observed that there was no PN's documented after [redacted] NJ Ex Order 26.4.</p> <p>On 9/19/22 at 3:25 p.m., the ED and the HSC were unable to explain why there was no documentation in Resident #6's individual MR for [redacted] NJ Ex Order 26.4(b)(1) and change of condition that required emergency treatment on [redacted] NJ Ex Order 26.4.</p> <p>On 9/20/22 at 10:00 a.m., the surveyor reviewed the facility policy and procedure titled "CHANGE OF CONDITION" which required: "PROCEDURE: ...2. A change of condition in a resident is documented on the 24-hour Report per procedure. An explanation/description of the change is recorded in the resident's Individual Service Notes... in resident record...."</p> <p>The facility failed to document a [redacted] NJ Ex Order 26.4(b)(1) that required emergency medical treatment on [redacted] NJ Ex Order 26.4 in Resident #6's medical record.</p>	A1073		
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Deficiency	1	2	3	4	Time frame
A745	<p>Resident #6's chart was reviewed by RSC and ED on 10/14/2022 to ensure that all initial health care assessments and all other necessary assessments are in place.</p> <p>RSC to in-service RSSs on policy and procedures for completing an assessment on initial admission, 30 days, 60 days, 6 months, and yearly on 10/14/2022.</p>	All residents upon admission have the potential to be affected.	New admission, quarterly and change of condition health care assessments will be completed within 24 hours of move-in by RSC or RSS. Clinical Evaluation tool will be signed by RSC or ED or designee within 24 hours of admission to ensure compliance. All assessments will be reviewed semi annually	Initial Health care assessment shall be completed within 24 hours of admission. RSC and ED or designee will review charts for assessment after each admission and clinical evaluation within 24 hours of move-in to ensure completion	<p>Completion by 10/14/2022</p> <p><i>accepted 11/2/22 ka</i></p>
A749	<p>RN reviewed all charts and Care Plans for resident #2,#4,#6. Updates regarding <span style="background-color: black; color: black;">NJ Ex Order</span> precautions put in place on 10/14/2022.</p>	All residents have the potential to be affected by this deficiency.	ED or designee will complete move-in service plans within 48 hours of admission and sign the General Service plan tracker. ED or RSC or designee will	ED and RSC or designee will audit the service plans monthly by using the General Service Plan Tracker monthly until 4/3/2023.	<p>Completed by 11/4/2022</p> <p><i>accepted 11/2/22 ka</i></p>



			monitor, update and review all Service plans that are scheduled for 30 day, significant change, every 6 months and as needed weekly for 30 days, monthly for 90 days.		
A963	<p>Residents #1,#2,#3,#4, #6,#7,#8,#9 who were <small>NJ Ex Order 26.4(b)(1)</small> by this deficiency <small>NJ Ex Order 26.4(b)(1)</small> in the community. Unable to retroactively correct deficient practice.</p> <p>RSC in-serviced RSS on policy and procedure for initialing MAR during medication administration on 10/14/2022.</p>	All residents have the potential to be affected by this deficiency.	<p>RSC or designee will continue to in-service all nursing staff on medication administration and documentation pertaining to medication administration documentation by 11/4/22.</p> <p>On-coming LPN or medication tech will review each Medication Administration Book daily with off-going LPN or medication</p>	RSC or ED or designee will review the MAR Books, the Shift change MAR Review and continue to in service quarterly.	Completion date of 11/4/2022

*accepted  
11/2/22  
ML*



			tech. for omission of initials and will sign the Shift Change MAR.		
A1073	Resident #6 chart and progress notes reviewed and updated by RSC and ED or designated staff following NJ Ex Order 26.4(b)(1) care provided by emergency services. All staff in-serviced on policy and procedures of documentation following an incident or incident requiring emergency services.	All residents have the potential to be affected.	RSC or RSS will document in resident's electronic or paper record regarding each incident and will document after incident for 72 hours and continue documentation as needed for follow up. RSS(LPN) will place each incident on the Alert Charting form. Ongoing in servicing for documentation regarding falls will be completed by 11/4/2022.	RSC or ED or designee with review the Alert Charting form daily for 30 days then Going forward all progress notes will be reviewed by RSC or ED or designee for each resident with change in condition that require emergency services and for each incident weekly for 60 days to monitor for compliance. Continued documentation for incidents will be placed on the Alert charting form and will be reviewed by RSC, ED, or designee daily	Completion date of 10/14/2022. Continue to monitor until 4/3/2023

*Accepted  
11/2/22  
RN*



				for 30 days then weekly for 60 days.	
A1011	All staff in-service on policy and procedure for initialing MAR as well as completion of <small>NJ Ex Order 26.4(b)(1)</small> documentation as per state regulations and company best practice. In-service completed on 10/13/22	All residents have the potential to be affected by this deficiency	RSC or designee will continue in-service all nursing staff on medication administration by 11/4/22  On-coming LPN daily with off-going LPN or medication tech. for omission of initials and Control Substance Shift to Shift Medication Cart Keys Exchange Count Sheet (8hour shift) form.	RSC or ED or designee Will review the Shift change MAR Review and the Controlled Substance shift to shift and Medication Cart keys Exchange Count sheet (8-hour shift) daily for 30 days, then weekly for 30 days the monthly for 90 days. Staff will continue to be inserviced quartely	Completion date of 11/4/2022

*Accepted  
11/2/22  
KAR*