

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15C000</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>08/20/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>IVYSTONE SENIOR LIVING</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>7999 ROUTE 130 NORTH</b> <b>PENNSAUKEN, NJ 08110</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) COMPLETE DATE
A 000	<p>Initial Comments</p> <p>Initial Comments: Type of Survey: Complaint</p> <p>Complaint #NJ00175815</p> <p>Census: 116 Licensed Bed Capacity: 111</p> <p>Sample Size: 6</p> <p>The facility is not in substantial 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 310	<p>8:36-3.4(a)(1) Administration</p> <p>(a) The administrator or designee shall be responsible for, but not limited to, the following:</p> <p>1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;</p>	A 310		

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

TITLE

(X6) DATE

09/05/24

New Jersey Department of Health

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A 310	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: NJ00175815</p> <p>Based on observation, interview, record review, and review of pertinent facility documents, it was determined that the Executive Director (ED) failed to ensure the implementation and enforcement of the facility's policies and procedures titled, 'Administrator's Responsibilities,' "Sanitation Requirements," and "Insect and Rodent Control," for 6 of 6 residents reviewed, Resident #'s 1, 2, 3, 4, 5 and 6, and 110 unsampled residents. This deficient practice was evidenced by the following:</p> <p>On 7/31/24 at 9:52 a.m., the surveyor interviewed the Director of Housekeeping (DH) regarding bed bugs, and the DH stated that the facility had bed bugs for a long time. The DH stated that she had recently observed bed bugs throughout the facility, and in Room <span style="background-color: black; color: white;">NJ 0x0</span></p> <p>At 10:17 a.m. and 1:18 p.m., the surveyor in the presence of the Director of Maintenance (DOM), observed gray and black discoloration along the walls inside the fire alarm room, which were "mold-like" in appearance.</p> <p>At 11:03 a.m., the surveyor interviewed Resident #6, who stated that there were roaches, flies, and mice in his/her room.</p> <p>At 11:08 a.m., the surveyor toured room <span style="background-color: black; color: white;">NJ 0x0</span> which was mentioned by the DH, and listed on both the, "Bed Bug Report" and the "Roaches</p>	A 310		

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A 310	<p>Continued From page 2</p> <p>and Other Pest Report". The reports indicated that room 105 was treated for bed bugs and roaches on 7/25/24. The surveyor toured the room in the presence of an unsampled resident and observed flies and roaches.</p> <p>At 11:11 a.m., the surveyor interviewed Resident #3, who stated that since he/she was admitted to the facility, there had been bed bugs in his/her room on and off. Resident #3 stated that the facility would exterminate the room, and the bed bugs would go away for three to four months, and then come back.</p> <p>The CSO provided the surveyor with the extermination invoices from January 2024 to June 2024, which revealed bed bugs, roaches, and mice had been an ongoing issue at the facility that had not been resolved.</p> <p>The surveyor reviewed the facility policy titled, "Sanitation Requirements," which documented, "The assisted living residence shall maintain a sanitary and safe environment for residents ... Housekeeping of public areas, pest control and maintenance will occur ... Effective and safe controls shall be used to minimize and eliminate the presence of rodents, flies, roaches, and other vermin in the residence."</p> <p>In addition, the surveyor reviewed the facility policy titled, "Insect and Rodent Control," which documented, "The residence shall be maintained free from insects and rodents at all times."</p> <p>The surveyor also reviewed the facility policy titled, "Administrator's Responsibilities," which documented, "The Administrator or Designee shall be responsible for, but not limited to the following: Ensuring the development,</p>	A 310		

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A 310	Continued From page 3  implementation, and enforcement of all policies and procedures, including resident rights ..."  Reference 8:36-4.1(a)(22) A-0401 and 8:36-17.7 A-1249	A 310		
A 401	8:36-4.1(a)(22) Resident Rights  (a) Each assisted living provider will post and distribute a statement of resident rights for all residents of assisted living residences, comprehensive personal care homes, and assisted living programs. Each resident is entitled to the following rights:  22. The right to live in safe and clean conditions in a facility that does not admit more residents than it can safely accommodate while providing services and care;  This REQUIREMENT is not met as evidenced by: Complaint #: NJ00175815  Based on observation, interview, record review, and review of pertinent facility documents, it was determined that the facility failed to provide a safe and clean environment that did not admit more residents than it could safely accommodate while providing services and care, for 6 of 6 sampled residents, Resident #'s 1, 2, 3, 4, 5, and 6, and 110 unsampled residents. The facility exceeded its licensed capacity of 111 beds. This deficient practice was evidenced by the following:  On 7/31/24 at 9:20 a.m., the surveyor observed	A 401		

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A 401	<p>Continued From page 4</p> <p>the facility's license, which indicated the facility was licensed to accommodate 111 residents.</p> <p>At 9:35 a.m., the Executive Director (ED) provided the surveyor with a printout of the facility's census, which indicated there were 115 residents in-house and one resident on a <b>NJ ex order 26.4b1</b>.</p> <p>At 11:37 a.m., the surveyor interviewed the ED from the adjacent assisted living program, who stated that the census for the facility was 115. The ED added that one resident was on a <b>NJ Exe</b> and there were actually 116 residents at the facility.</p> <p>At 12:03 p.m., the surveyor interviewed the ED to confirm the census, and the ED stated that there were 112 residents in-house. In addition, the surveyor inquired about the bed bug infestation at the facility, and the ED stated that the bed bugs were almost eradicated. The surveyor then inquired about Pest Control Services, and the ED stated since he started at the facility, <b>NJ Exec Order 26.4b1</b> prior to the survey date, the Director of Maintenance (DOM) had been the exterminator for the facility.</p> <p>At 9:52 a.m., the surveyor interviewed the Director of Housekeeping (DH) regarding bed bugs, and the DH stated that the facility had bed bugs for a long time. The DH stated that she had recently observed bed bugs throughout the facility, and in Room <b>NJ ex</b>. In addition, the DH stated that staff had complained about bed bug bites, and that the bed bug infestation spiked towards the end of June.</p> <p>At 9:59 a.m., the surveyor interviewed the DOM and inquired about pest control services and the</p>	A 401		

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A 401	<p>Continued From page 5</p> <p>DOM stated that the facility had pest control services for two years which ended in June of 2024. The DOM explained that he took over the bed bug treatments on 7/18/24. The surveyor then inquired about the DOM's professional experience as an exterminator, and the DOM stated that he did not have any professional experience but had done exterminations in his own home.</p> <p>At 10:30 a.m., the surveyor reviewed a "Bed Bug Report/Roaches and other Pest Report" provided by the DOM which indicated from 6/27/24 to 7/26/24, the DOM performed 17 bed bug treatments. In addition, surveyor review of the "Roaches and other pest report" from 7/15/24 to 7/30/24, which indicated the DOM performed 21 treatments for mice, and 5 treatments for roaches.</p> <p>At 10:46 a.m., the surveyor interviewed Resident #4, who was admitted to the facility in [redacted] NJ ex order 26.4b1 [redacted] with diagnoses of [redacted] NJ ex order 26.4b1 and [redacted] NJ ex order 26.4b1. Resident #4 stated that in [redacted] NJ ex order 26.4b1 [redacted] another resident was moved into his/her room. Resident #4 stated that not long after the move, he/she observed bed bugs in the room. Resident #4 then stated that he/she reported the bed bugs to staff, and that the room was exterminated. In addition, Resident #4 stated that there were a lot of roaches in his/her room, and that there was also a mouse until the resident caught it. Resident #4 stated that [redacted] NJ ex [redacted] informed staff of the roaches by logging it in a book at the front desk. Resident #4 stated that no extermination had been done for the roaches.</p> <p>At 10:50 a.m., the surveyor interviewed Resident #1, who was admitted to the facility in [redacted] NJ Exec Order 26.4b [redacted] with diagnoses of [redacted] NJ Exec Order 26.4b1 [redacted] and [redacted]</p>	A 401		

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A 401	<p>Continued From page 6</p> <p><b>NJ ex order 26.4b1</b>. Resident #1 stated that an Aide at the facility came into the resident's shared room to make Resident #2's bed (Resident #1's roommate). Resident #1 stated that the Aide found a bed bug on Resident #2's bed. Resident #1 then stated that he/she reported the finding, and that the room was treated. Resident #1 also stated that when Resident #2's mattress was flipped over for treatment, five additional bed bugs were observed. In addition, Resident #1 stated that he/she observed roaches in his/her bathroom at night.</p> <p>At 10:55 a.m., the surveyor interviewed an unsampled resident, who stated that he/she observed <b>NJ Exec Ord</b> on his/her roommate's bed sheets a month ago. The unsampled resident stated that his/her roommate <b>NJ Exec Order 26.4b1</b> the bed bugs and then <b>NJ Exec Order 26.4b1</b> on the bed sheets. In addition, the unsampled resident stated that he/she reported the bed bugs, and that the room was treated. Further, the unsampled resident stated that there were roaches in his/her room, and that he/she saw roaches last night on his/her nightstand. The unsampled resident stated that he/she could not have food in the room without the roaches getting to it.</p> <p>At 11:03 a.m., the surveyor interviewed Resident #6, who stated that there were roaches, flies, and mice in his/her room. Resident #6 stated that he/she reported the rodents in his/her room a <b>NJ Exec</b>, and again on <b>NJ ex order 26.4b1</b>, and nothing had been done.</p> <p>At 11:08 a.m., the surveyor toured Room <b>NJ or</b>, which was mentioned by the DH, and listed on both the "Bed Bug Report" and the "Roaches and Other Pest Report." The reports indicated that Room <b>NJ or</b> was treated for bed bugs and roaches</p>	A 401		

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A 401	<p>Continued From page 7</p> <p>on 7/25/24. The surveyor attempted to interview an unsampled resident in Room [REDACTED], however, the interview was not completed due to a [REDACTED]. The surveyor toured the room and observed flies and roaches.</p> <p>At 11:11 a.m., the surveyor interviewed Resident #3, who was admitted to the facility in [REDACTED] with a diagnosis of [REDACTED]. Resident #3 stated that since admission to the facility, there had been bed bugs in his/her room on and off. Resident #3 stated that the facility would exterminate the room, and the bed bugs would go away for three to four months, and then come back. Resident #3 added that he/she kept his/her belongings [REDACTED] due to the bed bug infestation.</p> <p>At 12:00 p.m., the surveyor interviewed the Director of Nursing (DON) to inquire about bed bugs at the facility, and the DON stated that five to six months ago she had two residents complain of bed bug bites. The surveyor then inquired what was done for the residents, and the DON stated that fumigations were done, and the residents were monitored for bites.</p> <p>At 1:01 p.m. and 1:21 p.m., the surveyor interviewed the Chief Savings Officer (CSO) regarding pest control services. The CSO stated that an exterminator was last at the facility on 7/12/24, and that the DOM only did "preventative exterminations."</p> <p>At 1:07 p.m., the CSO provided the surveyor with invoices from the exterminator dated January 2024 to June 2024, which revealed bed bugs, roaches, and mice had been an ongoing issue at the facility that had not been resolved.</p>	A 401		



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A 401	<p>Continued From page 8</p> <p>At 1:50 p.m. and 2:22 p.m., the surveyor informed the CSO and the ED of the imminent danger to residents related to the facility going over licensed capacity without proper authorization or approval from the Department of Health. The CSO stated that the five additional residents were from the adjacent building, the Assisted Living Program (ALP) building. The CSO stated that the residents were moved from the ALP building while renovations were done.</p> <p>The surveyor reviewed the facility policy titled, "Sanitation Requirements," which indicated, "The assisted living residence shall maintain a sanitary and safe environment for residents ... Housekeeping of public areas, pest control and maintenance will occur ... Effective and safe controls shall be used to minimize and eliminate the presence of rodents, flies, roaches, and other vermin in the residence."</p> <p>In addition, the surveyor reviewed the facility policy titled, "Insect and Rodent Control," which indicated, "The residence shall be maintained free from insects and rodents at all times."</p> <p>The facility failed to ensure residents were free from rodents and failed to enforce their right to live in a clean and safe environment that does not admit more residents than it can safely accommodate.</p> <p>On 8/20/24, a re-visit was conducted at the facility to confirm implementation of the removal plan submitted by the ED to the Department of Health on 8/1/24. The surveyor toured the facility, conducted interviews, and reviewed pertinent facility documents. The Removal Plan submitted documented that the facility would transfer back five residents from the facility to the adjacent ALP</p>	A 401		

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A 401	Continued From page 9  building on <span style="background-color: black; color: red;">NJ ex order 26</span> . The surveyor verified that residents were transferred back on <span style="background-color: black; color: red;">NJ Excec Order</span> and complied with its licensed capacity of 111.	A 401			
A1249	8:36-17.7 Housekeeping-Sanitation-Safety-Maintenance  The building and grounds shall be well maintained at all times. The interior and exterior of the building shall be kept in good condition to ensure an attractive appearance, provide a pleasant atmosphere, and safeguard against deterioration. The building and grounds shall be kept free from fire hazards and other hazards to resident's health and safety.  This REQUIREMENT is not met as evidenced by: Complaint #: NJ00175815  Based on observation, interview, and review of pertinent facility documents, it was determined that the facility failed to maintain the building, keep the building free from hazards to resident's health and safety, and keep the interior of the building in good condition to ensure an attractive appearance and safeguard against deterioration, for 116 residents. This deficient practice was evidenced by the following:  On 7/31/24 at 10:17 a.m. and 1:18 p.m., the surveyor in the presence of the Director of Maintenance (DOM), observed gray and black discoloration along the walls inside the fire alarm	A1249			

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A1249	<p>Continued From page 10</p> <p>room, which was "mold-like" in appearance. The surveyor also observed pipes above and to the left of the discoloration. In addition, the surveyor observed electrical wires adjacent to a pipe with an opening at the top. The surveyor also observed a fire alarm control panel and breaker box in the fire alarm room.</p> <p>At this time, the DOM stated that the sewer line for the air conditioning units clogged, and the water splashed everywhere and flooded the fire alarm room. The DOM stated that a drain and sewer service company came to the facility to unclog the sewer line about two weeks prior to the day of survey [7/21/24]. The surveyor inquired how the gray and black discoloration along the walls was treated, and the DOM stated that he sprayed the discolored areas with bleach once every two weeks.</p> <p>At 1:01 p.m. and 1:21 p.m., the surveyor interviewed the Chief Savings Officer (CSO), who stated that one month prior to survey, a toilet on the second floor leaked, and a drain and sewer service company came to the facility repair the leak. The surveyor inquired how the gray and black discoloration along the walls inside the fire alarm room was treated, and the CSO stated that he was not aware of any discoloration along the walls inside the fire alarm room, and that it was the first time he had heard of it.</p> <p>At 1:36 p.m., the CSO provided the surveyor with an invoice from the drain and sewer service company dated 6/21/24, which indicated the company fixed a clogged toilet on the second floor and snaked a drain in the fire alarm room.</p> <p>The surveyor reviewed the facility policy titled, "Sanitation Requirements," which documented,</p>	A1249		

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A1249	Continued From page 11  "The assisted living residence shall maintain a sanitary and safe environment for residents ..."	A1249			

## STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER 15C000	MULTIPLE CONSTRUCTION A. Building B. Wing	DATE OF REVISIT 10/18/2024
NAME OF FACILITY IVYSTONE SENIOR LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 7999 ROUTE 130 NORTH PENNSAUKEN, NJ 08110	

This report is completed by a State surveyor to show those deficiencies previously reported that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the State Survey Report (prefix codes shown to the left of each requirement on the survey report form).

ITEM Y4	DATE Y5	ITEM Y4	DATE Y5	ITEM Y4	DATE Y5
ID Prefix A0310	Correction	ID Prefix A0401	Correction	ID Prefix A1249	Correction
Reg. # 8:36-3.4(a)(1)	Completed	Reg. # 8:36-4.1(a)(22)	Completed	Reg. # 8:36-17.7	Completed
LSC	10/18/2024	LSC	10/18/2024	LSC	10/18/2024
ID Prefix	Correction	ID Prefix	Correction	ID Prefix	Correction
Reg. #	Completed	Reg. #	Completed	Reg. #	Completed
LSC		LSC		LSC	
ID Prefix	Correction	ID Prefix	Correction	ID Prefix	Correction
Reg. #	Completed	Reg. #	Completed	Reg. #	Completed
LSC		LSC		LSC	
ID Prefix	Correction	ID Prefix	Correction	ID Prefix	Correction
Reg. #	Completed	Reg. #	Completed	Reg. #	Completed
LSC		LSC		LSC	
ID Prefix	Correction	ID Prefix	Correction	ID Prefix	Correction
Reg. #	Completed	Reg. #	Completed	Reg. #	Completed
LSC		LSC		LSC	
REVIEWED BY STATE AGENCY	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE	
REVIEWED BY CMS RO	REVIEWED BY (INITIALS)	DATE	TITLE	DATE	
FOLLOWUP TO SURVEY COMPLETED ON 8/20/2024		<input type="checkbox"/> CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY? <input type="checkbox"/> YES <input type="checkbox"/> NO			