

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20C100	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/16/2025
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NAME OF PROVIDER OR SUPPLIER COMPLETE CARE AT VICTORIA COMMONS, L	STREET ADDRESS, CITY, STATE, ZIP CODE 610 TOWNBANK ROAD NORTH CAPE MAY, NJ 08204
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A 000	<p>Initial Comments</p> <p>Initial Comments: TYPE OF SURVEY: COMPLAINT</p> <p>COMPLAINT #: 168533, 177128, 185041, 187815 and 188859</p> <p>DATE OF SURVEY: 10/15/2025 and 10/16/2025</p> <p>CENSUS: 63</p> <p>SAMPLE SIZE: 5</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.</p> <p>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) Administrator's Responsibilities</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

12/04/25

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 #: 187815</p> <p>Based on interview and review of pertinent facility documentation, it was determined that the facility Executive Director (ED) failed to implement and enforce the policy and procedure for NJ Exec Order 26.4b Assessment for 1 of 2 residents reviewed for NJ Exec (Resident #4). This deficient practice was evidenced by the following:</p> <p>On 10/15/2025 at 9:50 AM, the surveyor reviewed Resident #4's hybrid medical record (paper and electronic).</p> <p>A review of the Admission Record face sheet (an admission summary) indicated the resident had diagnoses that included, but not limited to; NJ Exec Order 26.4b1</p> <p>A review of the resident's most current Level of Care (LOC) (an assessment that determines a resident's specific needs to ensure they receive the right support) dated NJ Exec Order 26.4b1, indicated that Resident #4 was observed to have NJ Exec Order 26.4b1 during evaluation.</p>	A 310		
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A 310	<p>Continued From page 2</p> <p>A review of the most current NJ Exec Order 26.4b1 NJ Exec Order 26.4b1) dated NJ Exec Order 26.4b1, reflected a score of NJ Ex indicating NJ Ex.</p> <p>A review of the Progress Notes (PN) revealed the resident NJ Exe on NJ Exec Order 26.4b1.</p> <p>A review of the evaluations revealed the resident was assessed for NJ Exe risk on NJ Exec Order 26.4b1 upon move-in, and on NJ Exec Order 26.4b1 upon re-entry to the community. NJ Exec Order 26.4b1</p> <p>Assessments were completed after the resident's NJ Exec on NJ Exec Order 26.4b1.</p> <p>On 10/16/2025 at 12:11 PM, during an interview with the surveyor, the Director of Nursing Services (DNS) stated that the NJ Exec Order 26.4b1 Assessment needs to be completed every time a resident NJ Exec Or.</p> <p>A review of the facility-provided policy updated on October 2019 titled "Assessing Falls and their Causes" included under Documentation: When a resident falls, the following information should be recorded in the resident's medical record ...5.) Completion of a falls risk assessment.</p>	A 310		
A 625	<p>8:36-5.18(a)(3) Managed Risk Agreements</p> <p>(a) The choice and independence of action of a resident may need to be limited when a resident's individual choice, preference and/or actions are identified as placing the resident or others at risk, lead to adverse outcome and/or violate the norms of the facility or program or the majority of the residents. When the resident</p>	A 625		

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A 625	<p>Continued From page 3</p> <p>assessment process identified in N.J.A.C. 8:36-7 indicates that there is a high probability that a choice or action of the resident has resulted or will result in any of the preceding, the assisted living residence, comprehensive personal care, home or assisted living program shall:</p> <p>3. Seek to negotiate a managed risk agreement with the resident (or legal guardian) that will minimize the possible risk and adverse consequences while still respecting the resident's preferences; and</p> <p>This STANDARD is not met as evidenced by: Complaint #: 187815</p> <p>Based on interview, record review and review of other pertinent facility documentation, it was determined that the facility failed to develop and negotiate a Managed Risk Agreement with a resident who had [NJ Exec Order 26.4b1] after identifying that the resident's choice of [NJ Exec Order 26.4b1] and [NJ Exec Order 26.4b1] with [NJ Exec Order 26.4b1] medications could lead to an adverse outcome for 1 of 5 residents reviewed (Resident #4). This deficient practice was evidenced by the following:</p> <p>On 10/15/2025 at 9:50 AM, the surveyor reviewed Resident #4's hybrid medical record (electronic and paper).</p> <p>A review of the Admission Record face sheet (an admission summary) indicated the resident had diagnoses that included, but not limited to;</p>	A 625		

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A 625	<p>Continued From page 4</p> <p>NJ Exec Order 26.4b1 [REDACTED]</p> <p>A review of the resident's re-entry Level of Care (LOC) (an assessment that determines a resident's specific needs to ensure they receive the right support) dated NJ Exec Order 26.4b1, indicated that Resident #4 was observed to have NJ Exec Order 26.4b1 [REDACTED] during evaluation.</p> <p>A review of the most current NJ Exec Order 26.4b1 [REDACTED] dated NJ Exec Order 26.4b1 reflected a score of NJ Ex indicating no NJ Exec Order 26.4b1.</p> <p>A review of the Order Summary Report (OSR) revealed the following physician orders started on NJ Exec Order 26.4b1</p> <p>May self-medicate;</p> <p>NJ Exec Order 26.4b1 Give 1 tablet by mouth two times a day for NJ Exec Order 26.4b1; NJ Exec Order 26.4b1;</p> <p>NJ Exec Order 26.4b1 Give 1 tablet by mouth one time a day for NJ Exec Order 26.4b1 and</p> <p>NJ Exec Order 26.4b1) Give 1 tablet by mouth two times a day for NJ Exec Order 26.4b1 [REDACTED]</p> <p>A review of the attending physician's NJ Exec Order 26.4b1 examination dated NJ Exec Order 26.4b1 revealed an order for the following: May NJ Exec Order 26.4b1</p>	A 625		

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A 625	<p>Continued From page 5</p> <p>NJ Exec Order 26.4b1 on special occasions.</p> <p>A review of the General Service Plan (GSP), initiated on NJ Exec Order 26.4b1 and revised on NJ Exec Order 26.4b1, indicated a focus for moderate NJ Exec Order 26.4b1. The resident's GSP also had a focus, initiated on NJ Exec Order 26.4b1, for NJ Exec Order 26.4b1 related to NJ Exec Order 26.4b1 use.</p> <p>A review of the progress notes (PN) revealed that the resident NJ Exec Order 26.4b1 on NJ Exec Order 26.4b1.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Exec Order 26.4b1 and was assisted NJ Exec Order 26.4b1 by a visitor. The resident stated that their NJ Exec Order 26.4b1. A NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1 evaluations were requested after an investigation.</p> <p>On NJ Exec Order 26.4b1 the resident had a NJ Exec Order 26.4b1 in the dining room when they NJ Exec Order 26.4b1 their NJ Exec Order 26.4b1. The resident did not want to use their NJ Exec Order 26.4b1. The resident was reminded by staff to use their NJ Exec Order 26.4b1. No investigation was completed.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Exec Order 26.4b1 when they NJ Exec Order 26.4b1. No investigation was completed.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Exec Order 26.4b1 the NJ Exec Order 26.4b1 when they stated they NJ Exec Order 26.4b1. No investigation was completed.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Exec Order 26.4b1 by another resident who stated that Resident #4's NJ Exec Order 26.4b1. The resident was sent to the hospital and was admitted with the diagnosis of</p>	A 625		

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A 625	<p>Continued From page 6</p> <p>NJ Exec Order 26.4b1 [REDACTED] The resident's NJ Exec Order 26.4b1 [REDACTED] [REDACTED] After the facility investigated the resident's NJ Exec Order 26.4b1 [REDACTED] it was concluded that the NJ Exec Order 26.4b1 [REDACTED] was the main factor for the resident's NJ Exec Order 26.4b1 [REDACTED]</p> <p>On 10/16/2025 at 9:00 AM, a review of the resident's hybrid chart did not reveal a Managed Risk Agreement related to risk for NJ Exec Order 26.4b1 [REDACTED] due to NJ Exec Order 26.4b1 [REDACTED] and/or NJ Exec Order 26.4b1 [REDACTED] with NJ Exec Order 26.4b1 [REDACTED] medication.</p> <p>On 10/16/2025 at 1:10 PM, during an interview with the survey team, the Executive Director (ED) stated that they did not know that they had to do a Managed Risk Agreement with the resident.</p> <p>A review of the undated facility-provided policy titled "Managed/Shared Risk Policy and Procedure" included under Policy the following: Managed risk agreements are completed to offer choice and independence of action of a resident that may need to be limited when a resident's individual choice, preference and/or actions are identified as placing the resident or others at risk, lead to adverse outcome and/or violate the norms of the facility or program or the majority of the residents.</p>	A 625		
A 709	<p>8:36-7.2(d)(1-18) Health Care Assmnt. and Health Service Plan</p> <p>(d) Each health care assessment by the registered professional nurse shall include, at a minimum, evaluation of the following:</p> <p>1. Need for assistance with "activities of daily</p>	A 709		

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A 709	Continued From page 7 living"; 2. Cognitive patterns; 3. Communication/hearing patterns; 4. Vision patterns; 5. Physical functioning and structural problems; 6. Continence; 7. Psychosocial well-being; 8. Mood and behavior problems; 9. Activity pursuit patterns; 10. Disease diagnoses; 11. Health conditions and preventive health measures, including, but not limited to, pain, falls, and lifestyle; 12. Oral/nutritional status; 13. Oral/dental status; 14. Skin conditions; 15. Medication use; 16. Special treatment and procedures; 17. Restraint use; and 18. Outside service utilization.	A 709		

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A 709	<p>Continued From page 8</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: 187815</p> <p>Based on interview and review of pertinent facility documentation, it was determined that the facility Registered Nurse (RN) failed to assess and document a history of NJ Exec Order 26.4b1 upon a resident's re-entry to the community in the resident's evaluation for Level of Care (LOC) (an assessment that determines a resident's specific needs to ensure they receive the right support). This deficient practice was identified for 1 of 2 residents (Resident #4) reviewed for NJ Exec and was evidenced by the following:</p> <p>On 10/15/2025 at 9:50 AM, the surveyor reviewed Resident #4's hybrid medical record (electronic and paper).</p> <p>A review of the Admission Record face sheet (an admission summary) indicated the resident had diagnoses that included, but not limited to; NJ Exec Order 26.4b1</p> <p>A review of the most current NJ Exec Order 26.4b1 dated NJ Exec Order 26.4b1, reflected a score of NJ Ex indicating no NJ Exec Order 26.4b1.</p> <p>A review of the resident's Level of Care (LOC) evaluations dated NJ Exec Order 26.4b1 (semi-annual) and NJ Exec Order 26.4b1 (re-entry), signed by the Director of Nursing Services (DNS), indicated under History of NJ Exec Or and Safety Issues, that Resident #4 had</p>	A 709		
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A 709	<p>Continued From page 9</p> <p>no NJ Exec Order 26.4b1. The LOC was categorized at Level NJ meaning the resident was NJ Exec Order 26.4b1.</p> <p>A review of the Progress Notes (PN) revealed the resident NJ Exe on NJ Exec Order 26.4b1 prior to the LOC completed on NJ Exec Order 26.4b1.</p> <p>On NJ Exec Order 26.4b1 the resident had a NJ Exec Order 26.4b1 and was assisted back to the building by a visitor. The resident stated that their NJ Exec Order 26.4b1. A NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1 NJ Ex Order 26.4b1 evaluations were requested after an investigation.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Ex Order 26.4(b)(1) when they NJ Exec Order 26.4b1 NJ Exec Order 26.4b1. The resident did not want to use their NJ Exec Order 26.4b1. The resident was reminded by staff to use their NJ Exec Order 26.4b1. The NJ Exe was not investigated.</p> <p>On NJ Exec Order 26.4b1, the resident had a NJ Exe when they NJ Exec Order 26.4b1. The NJ Exe was not investigated.</p> <p>On 10/16/2025 at 12:11 PM, during an interview with the surveyor, the DNS stated that they did the assessments for levels of care but sometimes there were changes in conditions that would come out after the resident had been in the community for several months.</p> <p>A review of the facility-provided undated policy titled "Level of Care Assessment" included under Policy: The registered professional nurse shall be called at the onset of illness, injury or change in condition of any resident to arrange for assessment of the resident's nursing care needs</p>	A 709		

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A 709	Continued From page 10 or medical needs and for needed nursing care intervention or medical care. Under Procedure the following evaluations were included : 7) Health conditions and preventive health measures, including, but not limited to, pain, falls, and lifestyle.	A 709		
A 749	8:36-7.3(a) General and Health Service Plans (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. This REQUIREMENT is not met as evidenced by: Complaint #: 168533 and 187815 Based on interview and record review, it was determined that the facility failed to ensure that the General Service Plan (GSP) for a resident with [REDACTED] was reviewed and revised with interventions following each [REDACTED] to address the resident's identified risks, preferences and specific needs. This deficient practice was identified in 2 of 2 residents, (Resident #4 and Resident #5), reviewed for General Service Plans, and evidenced by the following: 1) On 10/15/2025 at 9:50 AM, the surveyor	A 749		

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A 749	<p>Continued From page 11</p> <p>reviewed Resident #4's hybrid medical record (electronic and paper).</p> <p>A review of the Admission Record face sheet (an admission summary) indicated the resident had diagnoses that included, but not limited to; NJ Exec Order 26.4b1 [REDACTED].</p> <p>A review of the resident's most current Level of Care (LOC) (an assessment that determines a resident's specific needs to ensure they receive the right support) dated NJ Exec Order 26.4b1 [REDACTED] indicated that Resident #4 was observed to have NJ Exec Order 26.4b1 [REDACTED].</p> <p>A review of the most current NJ Exec Order 26.4b1 [REDACTED] dated NJ Exec Order 26.4b1 [REDACTED], reflected a score of NJ Ex [REDACTED] indicating no NJ Exec Order 26.4b1 [REDACTED].</p> <p>A review of the Order Summary Report (OSR) revealed the following physician orders started on NJ Exec Order 26.4b1 [REDACTED] May NJ Exec Order 26.4b1 [REDACTED];</p> <p>NJ Exec Order 26.4b1 [REDACTED]) Give 1 tablet by mouth two times a day for NJ Exec Order 26.4b1 [REDACTED]</p> <p>NJ Exec Order 26.4b1 [REDACTED] Give 1 tablet by mouth one time a day for NJ Exec Order 26.4b1 [REDACTED]; and</p> <p>NJ Exec Order 26.4b1 [REDACTED] Give 1 tablet by mouth two times a day for NJ Exec O [REDACTED]</p>	A 749		

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A 749	<p>Continued From page 12</p> <p>NJ Exec Order 26.4b1</p> <p>A review of the attending physician's NJ Exec Order 26.4b1 examination dated NJ Exec Order 26.4b1, revealed an order for the following: May NJ Exec Order 26.4b1.</p> <p>A review of the GSP initiated on NJ Exec Order 26.4b1, and revised on NJ Exec Order 26.4b1, indicated a focus for NJ Exec Order 26.4b1 related to NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1. The focus had the following interventions:</p> <p>Anticipate and meet resident's needs initiated on NJ Exec Order 26.4b1, and revised on NJ Exec Order 26.4b1;</p> <p>Resident needs activities that minimize the potential for NJ Exec Order 26.4b1 while providing NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1 initiated on NJ Exec Order 26.4b1 and revised on NJ Exec Order 26.4b1;</p> <p>Resident needs a safe environment with even NJ Exec Order 26.4b1; a working and reachable call light, NJ Exec Order 26.4b1 and personal items within reach initiated on NJ Exec Order 26.4b1, and revised on NJ Exec Order 26.4b1;</p> <p>Educate the resident and their family and friend(s) about safety reminders and what to do if a NJ Exec Order 26.4b1 occurs initiated on NJ Exec Order 26.4b1 and revised on NJ Exec Order 26.4b1;</p> <p>Encourage the resident to participate in activities that NJ Exec Order 26.4b1 initiated on NJ Exec Order 26.4b1 and revised on NJ Exec Order 26.4b1;</p> <p>Ensure that the resident is wearing NJ Exec Order 26.4b1</p>	A 749		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20C100	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/16/2025
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NAME OF PROVIDER OR SUPPLIER COMPLETE CARE AT VICTORIA COMMONS, LI	STREET ADDRESS, CITY, STATE, ZIP CODE 610 TOWNBANK ROAD NORTH CAPE MAY, NJ 08204
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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
A 749	<p>Continued From page 13</p> <p>NJ Exec Order 26.4b1 _____ when NJ Exec Order 26.4b1 _____ initiated on NJ Exec Order 26.4b1 _____, and revised on NJ Exec Order 26.4b1 _____; and</p> <p>NJ Exec Order 26.4b1 _____ evaluation and treat as ordered or as needed initiated on NJ Exec Order 26.4b1 _____.</p> <p>A review of the Progress Notes (PN) revealed that the resident NJ Exe on NJ Exec Order 26.4b1 _____.</p> <p>On NJ Exec Order 26.4b1 _____, the resident had a NJ Exec Order 26.4b1 _____ NJ Exec Order 26.4b1 _____ and was assisted NJ Exec Order 26.4b1 _____ by a visitor. The resident stated that their NJ Exec Order 26.4b1 _____ . A NJ Exec Order 26.4b1 _____ NJ Ex Order 26.4b1 _____ evaluations were requested after an investigation. The service plan was not updated.</p> <p>On NJ Exec Order 26.4b1 _____, the resident had a NJ Exec Order 26.4b1 _____ in the NJ Ex Order 26.4(b)(1) _____ when they NJ Exec Order 26.4b1 _____ their NJ Exec Order 26.4b1 _____ . The resident did not want to use their NJ Exec Order 26.4b1 _____ . The resident was reminded by staff to use their NJ Exec Order 26.4b1 _____ . The NJ Exe _____ was not investigated. The service plan was not updated.</p> <p>On NJ Exec Order 26.4b1 _____ the resident had a NJ Exe _____ when they NJ Exec Order 26.4b1 _____ . The NJ Exe _____ was not investigated. The service plan was not updated.</p> <p>On NJ Exec Order 26.4b1 _____, the resident had a NJ Exec Order 26.4b1 _____ when they stated they NJ Exe _____ . The NJ Exe _____ was not investigated. The service plan was not updated.</p> <p>On NJ Exec Order 26.4b1 _____ the resident had a NJ Exec Order 26.4b1 _____ by another resident who stated that Resident #4's NJ Exec Order 26.4b1 _____ . Resident #4 sustained a NJ Exec Order 26.4b1 _____ . The resident NJ Exec Order 26.4b1 _____ to the</p>	A 749		

New Jersey Department of Health

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A 749	<p>Continued From page 14</p> <p>community after being sent to the hospital.</p> <p>On 10/16/2025 at 12:11 PM, during an interview with the surveyor, the Director of Nursing Services (DNS) stated that the GSP should be updated if there's a change in condition like [redacted]</p> <p>2) On 10/16/2025 at 8:15 AM, a review of Resident #5's hybrid medical record revealed the following:</p> <p>A review of the Admission Record face sheet indicated the resident had diagnoses that included, but not limited to; [redacted]</p> <p>[redacted]</p> <p>A review of the most current LOC dated [redacted], reflected the resident had [redacted] and [redacted]</p> <p>[redacted]</p> <p>A review of the most current [redacted] dated [redacted], reflected a score of [redacted] indicating [redacted]</p> <p>[redacted]</p> <p>A review of the PN revealed the resident [redacted] on [redacted] in their apartment and [redacted]</p> <p>[redacted] The resident required [redacted] of the [redacted] and [redacted] of the [redacted].</p> <p>A review of the PN dated [redacted], documented that the resident was seen by an [redacted] and was provided with a [redacted] that they should [redacted] at all times [redacted] daily and that it should be taken off for [redacted]. The PN also stated that the resident should be [redacted]</p>	A 749		

New Jersey Department of Health

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A 749	<p>Continued From page 15</p> <p>NJ Exec Order 26.4b1 and could take NJ Exec Order 26.4b1 alternating with NJ Exec Order 26.4b1 for NJ Exec Or</p> <p>A review of the GSP initiated on NJ Exec Order 26.4b1, included a focus statement: "[name redacted] has had an NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1" The focus did not include interventions to address the NJ Exe with NJ Exec Order 26.4</p> <p>On 10/16/2025 at 12:11 PM, during an interview with the surveyor, the DNS stated that the GSP should be updated if there's a change in condition like NJ Exec Or</p> <p>A review of the undated facility-provided policy titled "[Community name redacted] Policy and Procedures" under Procedure: 5) Service Plans will be reviewed and updated if needed, following incidents or accidents, semi-annual RN (Registered Nurse) assessments, and when there are changes in status or changes or additions to interventions are required; and 7) A service plan should include a) A description of the services that are to be provided based on the most recent assessment and resident preferences.</p>	A 749		
A 963	<p>8:36-11.5(f) Certified Medication Aide Program</p> <p>(f) Medications shall be accurately administered and documented by properly authorized individuals, in accordance with prescribed orders.</p>	A 963		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20C100	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/16/2025
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A 963	<p>Continued From page 16</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: 187815</p> <p>Based on interview, record review and review of other pertinent facility documentation, it was determined that the facility failed to ensure that medications were administered in accordance with the physician order for 1 of 5 residents reviewed (Resident #4).</p> <p>The deficient practice was evidenced by the following:</p> <p>On 10/15/2025 at 9:50 AM, the surveyor reviewed Resident #4's hybrid medical record (electronic and paper).</p> <p>A review of the Admission Record face sheet (an admission summary) indicated the resident had diagnoses that included, but not limited to; NJ Exec Order 26.4b1 [REDACTED]</p> <p>A review of the resident's most current Level of Care (LOC) (an assessment that determines a resident's specific needs to ensure they receive the right support) dated NJ Exec Order 26.4b1 upon re-entry to the community, indicated that Resident #4 was assessed to be at NJ Exec Order 26.4b1.</p> <p>A review of the most current NJ Exec Order 26.4b1 [REDACTED] dated NJ Exec Order 26.4b1, reflected a score of NJ Ex [REDACTED] indicating no NJ Exec Order 26.4b1.</p> <p>A review of the assessments completed upon the resident's re-entry to the community on NJ Exec Order 26.4b1</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: 20C100	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/16/2025
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A 963	<p>Continued From page 17</p> <p>did not include a completed evaluation for NJ Exec Order 26.4b1 of medications.</p> <p>A review of the Order Summary Report (OSR) revealed a physician order (PO) started on NJ Exec Order 26.4b1 that the resident may NJ Exec Order 26.4b1. All the medications ordered for the resident were not discontinued and remained active.</p> <p>A review of the electronic Medication Administration Record (eMAR) from NJ Exec Order 26.4b1 to NJ Exec Order 26.4b1 reflected all physician orders were signed by nursing staff as taken by the resident through NJ Exec Order 26.4b1.</p> <p>A review of the progress note dated NJ Exec Order 26.4b1 revealed that the resident did not return to the community after being transferred to the hospital after NJ Exec Order 26.4b1.</p> <p>On 10/16/2025 at 12:11 PM, during an interview with the surveyor, the Director of Nursing Services (DNS) stated that a check or signature in the eMAR indicate that the medication was given or taken.</p> <p>A review of the facility-provided policy updated on October 2022, titled "Administering Medications," included under Policy Statement: Medications shall be administered in a safe and timely manner and as prescribed.</p> <p>A review of the facility-provided policy updated on October 2019, titled "Documentation of Medication Administration" included under Policy Interpretation and Implementation; 1) A Nurse or Certified Medication Aide shall document all medications administered to each resident on the resident's medication administration record and</p>	A 963		

New Jersey Department of Health

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A 963	Continued From page 18 2) Administration of medication must be documented immediately after it is given.	A 963		

Received POC (#3) Accepted
12/17/25



Tel. 609.898.0044
info@ccvictoriacommons.com

610 Town Bank Road
North Cape May, NJ 08204

Complete Care at Victoria Commons

Plan of Correction

Complaint Survey October 16, 2025

St-A-0000 Initial Comment

An unplanned Complaint Survey was conducted on 10/16/2025 at Complete Care at Victoria Commons by the New Jersey Department of Health.

St - A -310 - 8:36-3-3.4(a)(1) - Administrator Responsibilities

Resident #4 is no longer in our facility. Resident # 4 was discharged on [NJ Exec Order 26.4b1] to the hospital and did not return to the facility.

After the DON completed reviewing the resident assessments in PCC on [NJ Exec Order 26.4b1] focusing on [NJ Exec Order] Risk Assessments following a [NJ Exec Order] it was determined that all residents have the potential to be affected by this deficiency.

The Executive Director will review each reported fall and will ensure that a Fall Risk assessment has been completed by the Director of Nursing.

An in-service was held by the Director of Nursing on 10/30/2025 with the nursing department including all LPN's and CMA's reviewing the importance of completing the Fall Risk Assessment in PCC for residents that had a fall. The DON will be responsible for ongoing compliance.

The 24-hour summary is reviewed at morning Department Head meetings, which occur Monday through Friday. On Mondays, the weekend is reviewed. All falls will be reviewed monthly with the Director of Nursing to ensure that all Fall Risk Assessments have been completed. Quarterly, all falls are reviewed in QAPI (Quality Assurance and Performance Improvement) meetings. QAPI is attended by the Administrator, Director of Nursing, Admissions Director, Activities Director, Maintenance Director, Dietary Director, and 1 member of the Nursing Staff.

This deficiency was corrected by 10/30/2025.

St – A – 0625 – 8:36-5.18(a)(3) – Managed Risk Agreements

Resident #4 is no longer in our facility. Resident # 4 was discharged on [NJ Exec Order 26.4b1] to the hospital and did not return to the facility.

Following a review of recent incident reports by the DON, completed by 11/30/2025 and determining with the input of the Administrator and the interdisciplinary team for the need for a Managed/Shared Risk Agreement, it was determined that all residents have the potential to be affected by this deficiency. The Administrator will be responsible for ensuring Managed/Shared Risk Agreements are completed as needed moving forward.

The Executive Director will review all incident reports as well as all reported resident behaviors as they occur. A decision will be made with the Executive Director with the interdisciplinary team on whether to create a Managed/Shared Risk agreement after considering all surrounding variables.

The initial review of resident incident reports was completed by 11/30/25.

St-A-0709-8:36-5.1(d) (1-18) -Health Case Assessment and Health Service Plan

Resident #4 is no longer in our facility. Resident # 4 was discharged on [NJ Exec Order 26.4b1] to the and did not return to the facility.

The Director of Nursing (DON) completed a review of all residents' assessments that have returned to the facility following an injury or have had a change in condition to ensure that their service plan addresses their current needs. This review was completed by 11/7/2025. Following the review, it was determined that all residents have the potential to be affected by this deficiency. The Director of Nursing educated the nursing staff on the importance of ensuring that each resident service plan is revised to reflect the resident's needs and is completed in a timely manner. This in-service was completed by 10/30/25. The Director of Nursing will be responsible for ensuring that resident service plans address the resident's current needs.

The Director of Nursing (DON) will assess all facility residents for the appropriate Level of Care prior to returning to the facility, following an injury or change in condition to ensure that their service plan addresses their current needs. All residents that are currently out of the facility are reviewed morning Department Head meeting which is held Monday through Friday. Their status is discussed and the need for the Director of Nursing to complete an assessment prior to readmission.

This was completed by 11/1/25 and will be on-going.

St-A-749 – 8:36-7.3(a) – General and Health Service Plans

Resident #4 is no longer in our facility. Resident # 4 was discharged on [NJ Exec Order 26.4b1] to hospital and did not return to the facility.

Resident #5 is no longer in our facility. Resident # 5 was discharged on [NJ Exec Order 26.4b1] to the hospital and did not return to the facility.

Following a review of all current general service plans by the DON, focusing on updates following an incident or change of condition, it was determined that all residents have the potential to be affected by this deficiency.

The Director of Nursing (DON) completed a review of all residents' assessments to ensure that their service plan addresses their current needs. This review was completed by 11/7/2025

The Director of Nursing (DON) will be responsible for ensuring that all General Service Plans will be reviewed on a semi-annual basis as well as following a significant change or event, and they will reflect the current needs of the residents. This will be reviewed via PCC (Point Click Care) monthly.

This will be reviewed in QAPI (Quality Assurance and Performance Improvement) meetings on a quarterly basis. QAPI is attended by the Administrator, Director of Nursing, Admissions Director, Activities Director, Maintenance Director, Dietary Director, and 1 member of the Nursing Staff.

St-A- 963 – 8:36-11.5(f) – Certified Medication Aide Program

Resident #4 is no longer in our facility. Resident # 4 was discharged on [NJ Exec Order 26.4b1] to the hospital and did not return to the facility.

The Director of Nursing (DON) will assess all residents for the appropriateness of self-medication prior to admission and that are returning to the facility following hospitalization or rehab.

The Director of Nursing (DON) will monitor the Electronic Medication Administration Record (eMAR) on a monthly basis to ensure that the Certified Medication Aides (CMA's) are appropriately documenting resident self-administration. The facility has a few residents that self-administer medications. Monitoring will be done through Point Click Care (PCC). The Director of Nursing will be responsible for ensuring that the Certified Medications Aides are documenting appropriately and auditing the Electronic Medication Administration Record on a monthly basis.

An in-service was conducted with all CMA's as well as LPNs to review appropriate documentation in eMAR. This was completed by 10/30/2025.

STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER 20C100	MULTIPLE CONSTRUCTION A. Building B. Wing	DATE OF REVISIT 12/17/2025
NAME OF FACILITY COMPLETE CARE AT VICTORIA COMMONS, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 610 TOWNBANK ROAD NORTH CAPE MAY, NJ 08204	

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 A0625	Correction	ID Prefix A0709	Correction
Reg. # 8:36-3.4(a)(1)	Completed	Reg. # 8:36-5.18(a)(3)	Completed	Reg. # 8:36-7.2(d)(1-18)	Completed
LSC	10/30/2025	LSC	11/30/2025	LSC	11/01/2025
ID Prefix A0749	Correction	ID Prefix A0963	Correction	ID Prefix	Correction
Reg. # 8:36-7.3(a)	Completed	Reg. # 8:36-11.5(f)	Completed	Reg. #	Completed
LSC	11/07/2025	LSC	10/30/2025	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 <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE
REVIEWED BY CMS RO <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	TITLE	DATE
FOLLOWUP TO SURVEY COMPLETED ON 10/16/2025		<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		