

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>060106</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>11/23/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>OUR LADY'S CENTER FOR REHABILITATION &amp; HC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1100 CLEMATIS AVE</b> <b>PLEASANTVILLE, NJ 08232</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
S 000	Initial Comments  Complaint #: NJ149126, NJ149183  Census: 126  Sample Size: 19  TYPE OF SURVEY: Complaint Survey  The facility is not in substantial compliance with all the standards in the New Jersey Administrative Code 8:39, Standards for Licensure of Long-Term Care Facilities.  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.	S 000		
S 560	8:39-5.1(a) Mandatory Access to Care  (a) The facility shall comply with applicable Federal, State, and local laws, rules, and regulations.  This REQUIREMENT is not met as evidenced by: Complaint Intake: #NJ149126  Based on interviews, facility document review, and New Jersey Department of Health (NJDOH) memo, dated 01/28/2021, it was determined the facility failed to ensure staffing ratios were met for 12 of 14 day shifts reviewed. This deficient practice had the potential to affect all residents.  Findings included:	S 560	The submission of this response to the statement of deficiencies by the undersigned does not constitute admission that the deficiency existed and/or required correction. This response is prepared, executed, and submitted solely as a requirement of the provisions of federal and state law.  I. Corrective action(s) accomplished for	12/31/21

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

TITLE

(X6) DATE

Electronically Signed

12/29/21

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S 560	<p>Continued From page 1</p> <p>Reference: NJDOH memo, dated 01/28/2021, "Compliance with N.J.S.A. (New Jersey Statutes Annotated) 30:13-18, new minimum staffing requirements for nursing homes," indicated the New Jersey Governor signed into law P.L. 2020 c 112, codified at N.J.S.A. 30:13-18 (the Act), which established minimum staffing requirements in nursing homes. The following ratio(s) were effective on 02/01/2021:</p> <p>One certified nurse aid to every eight residents for the day shift.</p> <p>One direct care staff member to every 10 residents for the evening shift, provided that no fewer than half of all staff members shall be certified nurse aides, and each direct staff member shall be signed in to work as a certified nurse aide and shall perform nurse aide duties: and</p> <p>One direct care staff member to every 14 residents for the night shift, provided that each direct care staff member shall sign in to work as a certified nurse aide and perform certified nurse aide duties.</p> <p>1. A review of the "Nurse Staffing Report," completed by the facility for the weeks of 11/07/2021 - 11/20/2021, revealed staff-to-resident ratios that did not meet the minimum requirements as listed below:</p> <p>-11/07/2021 had 11 CNAs for 117 residents on the day shift, required 15 CNAs. -11/08/2021 had 12 CNAs for 117 residents on the day shift, required 15 CNAs. -11/09/2021 had 11 CNAs for 117 residents on the day shift, required 15 CNAs. -11/10/2021 had 12 CNAs for 117 residents on</p>	S 560	<p>resident(s)affected:</p> <ul style="list-style-type: none"> <li>No residents were identified</li> </ul> <p>II. Residents identified having the potential to be affected and corrective action taken:</p> <ul style="list-style-type: none"> <li>The deficient practice has the potential to affect all residents residing in the facility.</li> </ul> <p>III. Measures will be put into place to ensure the deficient practice will not recur:</p> <ul style="list-style-type: none"> <li>Bonuses are offered for double shifts, extra shifts, weekend shifts and perfect attendance.</li> <li>The staff has been re-educated on the call out and lateness policy by Nursing Management and Nurse Educator.</li> <li>Advertisements signs for open CNA positions are placed in front of the building.</li> <li>The facility is recruiting on multiple employment search engines and multiple social media platforms for CNA's.</li> <li>Depending on the needs of the day Nursing management to include Unit Mangers, Supervisors and ADON will be evaluated to assist with resident care Staffing Coord will call, text, email CNAs to take a shift as needed.</li> <li>Reviewed Facility Staffing Agency contracts, additional Agency Contracts under review.</li> </ul> <p>IV. Corrective actions will be monitored to ensure the deficient practice will not recur:</p> <ul style="list-style-type: none"> <li>The DON/Designee will conduct weekly x 4 weeks C.N.A. staffing schedule audits. Then quarterly x 1 quarter.</li> <li>The DON/Designee will report audit findings to the Administrator. The Administrator/Designee will analyze and</li> </ul>	

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S 560	<p>Continued From page 2</p> <p>the day shift, required 15 CNAs. -11/11/2021 had 12 CNAs for 20 residents on the day shift, required 15 CNAs. -11/12/2021 had 14 CNAs for 118 residents on the day shift, required 15 CNAs. -11/13/2021 had 12 CNAs for 117 residents on the day shift, required 15 CNAs. -11/14/2021 had 12 CNAs for 117 residents on the day shift, required 15 CNAs. -11/15/2021 had 13 CNAs for 117 residents on the day shift, required 15 CNAs. -11/16/2021 had 14 CNAs for 117 residents on the day shift, required 15 CNAs. -11/18/2021 had 14 CNAs for 117 residents on the day shift, required 15 CNAs. -11/20/2021 had 15 CNAs for 126 residents on the day shift, required 16 CNAs.</p> <p>On 11/22/2021 at 9:30 AM, the Nursing Home Administrator (NHA) acknowledged he was aware of the New Jersey state staffing requirement ratios.</p> <p>In a follow-up email with the NHA on 12/02/2021 at 4:45 PM, he stated the facility had multiple ads posted daily on multiple sites to recruit staff. He stated the facility offered sign-on bonuses and competitive rates. The facility had contracts with multiple agencies to assist them as needed and continued to contract with new agencies to assist them as needed. He stated the facility had converted many of their existing staff from other departments into nursing as a promotion. He stated the facility called, texted, emailed, and tried to catch every lead to assist in recruitment. The facility had a referral program to encourage their staff to recruit CNAs and nurses to join them. He stated the facility had staff appreciation parties, as well as giveaways, to help with staff retainment. He stated the facility tried to keep a close relationship with each and every employee</p>	S 560	<p>trend findings and report outcomes to the QA Committee quarterly with follow up to recommendations, as necessary.</p>	

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S 560	Continued From page 3  to ensure they had the tools necessary to succeed.	S 560			