

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 060301	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/29/2021
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NAME OF PROVIDER OR SUPPLIER COMPLETE CARE AT BURLINGTON WOODS, I	STREET ADDRESS, CITY, STATE, ZIP CODE 115 SUNSET ROAD BURLINGTON, NJ 08016
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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
S 000	Initial Comments COMPLAINT #: NJ 144426 The facility is not in compliance with the Standards in the New Jersey Administrative Code, Chapter 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 the Provisions of the 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 #: NJ 144426 Based on observation, interviews and review of pertinent facility documentation, it was determined that the facility failed to maintain the required minimum direct care staff-to-resident ratios as mandated by the state of New Jersey. This deficient practice was evidenced by the following: Reference: New Jersey Department of Health (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,	S 560	CORRECTIVE ACTIONS ACCOMPLISHED FOR RESIDENTS FOUND TO HAVE BEEN AFFECTED BY THE DEFICIENT PRACTICE: ∩ The facility actively seeks to hire CNAs, that all shifts are scheduled to comply with ratios, that any callouts or no-shows result in calls being made by the shift supervisor to fill the shift. Facility has documented evidence to reflect facility's Recruitment and Retention Efforts in its relentless attempts to comply with the staffing ratios. No residents have been adversely affected. IDENTIFICATION OF RESIDENTS WHO HAVE THE POTENTIAL TO BE	8/30/21

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

TITLE

(X6) DATE

Electronically Signed

08/20/21

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S 560	<p>Continued From page 1</p> <p>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 Aide (CNA) 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 CNAs, and each direct staff member shall be signed in to work as a CNA 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 CNA and perform CNA duties.</p> <p>On 07/23/2021, 07/26/2021, and 07/27/2021 the surveyor reviewed the assignment sheets and observed 2 CNA's on the 7-3 shift working "A" wing unit which had a census between 32-34 residents. On 07/27/2021, the surveyor reviewed the assignment sheets and observed 3 CNA's on the 7-3 shift working on "E" wing which had a census of 54 residents. The CNA's provided direct care to the residents who resided in the facility.</p> <p>The surveyor requested staffing reports for the weeks of 03/21/2021, 03/28/2021, 07/04/2021, 07/11/2021, and 07/18/2021.</p> <p>A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" revealed the following dates and shifts that the facility did not meet the minimum staffing requirements:</p>	S 560	<p>AFFECTED BY THE SAME DEFICIENT PRACTICE</p> <p>¿ All residents have the potential to be affected by this situation.</p> <p>SYSTEMIC CHANGES TO ENSURE THAT THE DEFICIENT PRACTICE DOES NOT RECUR</p> <p>¿ Facility's Recruitment and Retention Strategies and Efforts to comply with the State's Staffing Ratios have been in progress, which include but are not limited to the following:</p> <ul style="list-style-type: none"> o Offer Sign on bonuses to attract staff o Recruitment bonus to encourage referrals from current staff o Offering daily and weekend bonuses to attract overtime or PRN staff shifts o Aggressively running ads in various social media o Flexible shifts and schedules o Increased wages to be well above state minimum o Increased expedience getting staff on board by offering Orientation every week with a schedule utilizing other sister facilities o Working with C.N.A. schools to recruit new grads and to send temp N.A.'s for certification o Initiating Temp Aides o Currently have contracts with 6 staffing agencies and will <p>MONITORING OF CORRECTIVE ACTIONS</p> <p>¿ Staffing Coordinator or designee will provide weekly reports to the Director of Nursing and Administrator regarding all efforts made to try to comply with the State's Staffing Ratios.</p> <p>Reports will be submitted to the QAPI</p>	

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S 560	<p>Continued From page 2</p> <p>7-3 shift 03/21/2021 through 03/27/2021; 11-7 shift 03/23/2021; 7-3 shift 03/28/2021 through 04/3/2021; 11-7 shift 03/29/2021; 7-3 shift 07/4/2021 through 07/10/2021; 11-7 shift 7/9/2021; 7-3 shift 07/11/2021 through 07/17/2021; 11-7 shift 07/16/2021 and 07/17/2021; 7-3 shift 07/18/2021 through 07/24/2021; 11-7 shift 07/18/2021.</p> <p>During an interview with the surveyor on 07/27/2021 at 10:25 AM, the staffing coordinator stated that she was aware of the ratio, and it was not easy to get the amount of staff required, and that the facility was under the required amount "all of the time." She stated they try to replace all call out outs and use agency, but the facility has not had much luck with the agencies.</p> <p>During an interview with the surveyor on 07/28/2021 at 10:43 AM, the Director of Nursing stated she was aware that the facility was not meeting the ratios and the facility was trying multiple ways to attract more staff such as offer in house shift bonuses, sign on bonus and referral bonus for own staff, advertising actively, orientation every other week, and use of multiple agencies.</p> <p>During an interview with the survey team on 07/28/2021 at 03:09 PM, the Administrator stated he was aware of the staffing concern and have been trying to attract staff by increased wages, offering daily and weekend bonuses, advertising aggressively, sign on bonus, using multiple agencies, and obtained a contract with two certified nurse aide schools who were starting in September.</p>	S 560	<p>Committee monthly X 3 months then quarterly thereafter. 2 Director of HR will submit monthly reports to document status of all recruitment efforts. Director of HR will report monthly to the QAPI Committee X 3 months then quarterly thereafter.</p>	