

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315141		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 10/23/2025	
NAME OF PROVIDER OR SUPPLIER ABINGDON CARE & REHABILITATION CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 303 ROCK AVE , GREEN BROOK, New Jersey, 08812			
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F0000	INITIAL COMMENTS Complaint #2573215 COMPLAINT SURVEY: 10/23/25 CENSUS: 105 SAMPLE SIZE: 2 A Complaint Survey was conducted to determine compliance with 42 CFR Part 483, Requirements for Long-Term Care Facilities. Deficiencies were not cited for this survey.			F0000			12/12/2025

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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New Jersey State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 061805		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 10/23/2025	
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S0000	Initial Comments THE FACILITY WAS 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.		S0000			12/12/2025	
S0560	Mandatory Access to Care CFR(s): 8:39-5.1(a) The facility shall comply with applicable Federal, State, and local laws, rules, and regulations. This LICENSURE REQUIREMENT is NOT MET as evidenced by: This deficient practice was evidenced by the following: Reference: NJ State requirement, CHAPTER 112. An Act concerning staffing requirements for nursing homes and supplementing Title 30 of the Revised Statutes. Be It Enacted by the Senate and General Assembly of the State of New Jersey: C.30:13-18 Minimum staffing requirements for nursing homes effective 2/1/21. 1. a. Notwithstanding any other staffing requirements as may be established by law, every nursing home as defined in section 2 of P.L. 1976, c.120 (C.30:13-2) or licensed pursuant to P.L. 1971, c.136 (C.26:2H-1 et seq.) shall maintain the following minimum direct care staff-to-resident ratios: (1) one certified nurse aide to every eight residents for the day shift;		S0560	The staffing coordinator was re-educated by the administrator on new jersey staffing mandated ratios. No residents had any ill effects due to this deficient practice All residents have the potential to be affected by this deficient practice. Rates increased Sign on with new agencies Offer agency staff bonuses Offer our staff bonuses Job Fair Posting new ads around town and via social media Referral bonuses for our staff		11/25/2025	

Office of Primary Care and Health Systems Management

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S0560	Continued from page 1 (2) 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 staff member shall be signed in to work as a certified nurse aide and shall perform certified nurse aide duties; and (3) 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 b. Upon any expansion of resident census by the nursing home, the nursing home shall be exempt from any increase in direct care staffing ratios for a period of nine consecutive shifts from the date of the expansion of the resident census. c. (1) The computation of minimum direct care staffing ratios shall be carried to the hundredth place. (2) If the application of the ratios listed in subsection a. of this section results in other than a whole number of direct care staff, including certified nurse aides, for a shift, the number of required direct care staff members shall be rounded to the following higher whole number when the resulting ratio, carried to the hundredth place, is fifty-one hundredths or higher. (3) All computations shall be based on the midnight census for the day the shift begins. d. Nothing in this section shall be construed to affect any minimum staffing requirements for nursing homes as may be required by the Commissioner of Health for staff other than direct care staff, including certified nurse aides, or to restrict the ability of a nursing home to increase staffing levels, at any time, beyond the established minimum ... A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" for the two weeks beginning 10/5/25 and ending 10/18/25 for the Complaint survey on 10/23/25, revealed the facility was not in compliance with the State of New Jersey CNA minimum staffing requirements. For the 2 weeks of AAS-11 staffing, the facility was	S0560	Continued from page 1 Referral bonuses for community Sign on bonus Utilizing temporary nursing assistants Weekly retention and recruitment meetings The director of nursing / administrator or designee to have daily meetings with staffing coordinator for 4 weeks then monthly for 2 months to review schedule to monitor staff to residents ratios. The DON/designee will report the findings to the Quality assurance and performance improvement meetings.				

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S0560	Continued from page 2 deficient in CNA staffing for residents on 4 of 14 day shifts as follows: -10/05/25 had 10 CNAs for 100 residents on the day shift, required at least 12 CNAs. -10/12/25 had 8 CNAs for 99 residents on the day shift, required at least 12 CNAs. -10/13/25 had 10 CNAs for 98 residents on the day shift, required at least 12 CNAs. -10/16/25 had 10 CNAs for 98 residents on the day shift, required at least 12 CNAs. NJ 2573215 Based on the interview 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.	S0560					

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F0000	INITIAL COMMENTS The facility was found to be in compliance with 42 CFR Part 483, Requirements for Long Term Care Facilities.		F0000			12/18/2025	

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S0000	Initial Comments An off-site/desk review of the facility's Plan of Correction was conducted on 12/15/2025 in relation to the 10/23/2025 State of New Jersey Re-Licensure survey. The facility was found to be in compliance with the Standards in the New Jersey Administrative Code, Chapter 8:39, Standards for Licensure of Long-Term Care Facilities.		S0000			12/18/2025	

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