

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 85A001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 02/27/2024
NAME OF PROVIDER OR SUPPLIER UNITED METHODIST COMMUNITIES AT BRISTOL GL		STREET ADDRESS, CITY, STATE, ZIP CODE 200 BRISTOL GLEN DRIVE NEWTON, NJ 07860		
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A 000	Initial Comments Initial Comments: TYPE OF SURVEY: Complaint COMPLAINT #: NJ00171543 CENSUS: 81 SAMPLE SIZE: 3 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.	A 000		
A 310	8:36-3.4(a)(1) Administration (a) The administrator or designee shall be responsible for, but not limited to, the following: 1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;	A 310		

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

TITLE

(X6) DATE

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A 310	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: NJ00171543 ased on interview, record review, and pertinent facility documentation, it was determined that the facility's Executive Director (ED) failed to implement and enforce the policies and procedures titled, "Abuse Prevention (AD-7)," "Evaluation and Assessment of Resident Needs," and "Notification of Changes (RS-33)" regarding NJ Exec Order 26.4b1 for 2 of 3 residents reviewed, Residents #1 and #2. This deficient practice was evidenced by the following:</p> <p>On 2/21/2024 at 11:27 a.m. the surveyor reviewed Resident #1's MR which revealed the resident moved into the facility on NJ ex order 26.4b1 with diagnoses which NJ ex order 26.4b1. The surveyor continued review of Resident #1's MR revealed multiple progress notes which indicated Resident #1 NJ ex ord NJ ex order 26.4b1 Resident #2</p> <p>The surveyor reviewed the medical record (MR) of Resident #2, who moved into the facility NJ ex order with diagnoses which included NJ ex order 26.4b1 and NJ ex order 26.4b1. The surveyor review of Resident #2's MR revealed multiple progress notes written by several nursing services staff members which revealed Resident #2 NJ ex order 26.4b1 Resident #1 from NJ ex order 26.4b1.</p> <p>At 1:45 p.m. the surveyor interviewed the Director</p>	A 310		

New Jersey Department of Health

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A 310	<p>Continued From page 2</p> <p>of Residential Living/Registered Nurse (RN) and the Residential Executive Director (RED) regarding the [REDACTED] NJ ex order 26.4b1 [REDACTED]. The RN and RED stated that prior to [REDACTED] when Resident #2 NJ ex order 26.4b1 [REDACTED] Resident #1 NJ ex order 26.4b1 [REDACTED]. The RN and the RED explained that on [REDACTED] when Resident #1, NJ ex order 26.4b1 [REDACTED] Resident #2 NJ ex order 26.4b1 [REDACTED] #1's NJ ex order 26.4b1 [REDACTED] NJ ex order 26.4b1. The RN and RED stated that the families were not notified on [REDACTED] when the NJ ex order 26.4b1 [REDACTED] Resident #'s 1 and 2. The RN stated that Resident #1's NJ ex order 26.4b1 [REDACTED] and Resident #2 NJ ex order 26.4b1 [REDACTED]</p> <p>The surveyor reviewed the policy and procedure titled, "Abuse Prevention (AD-7)" which indicated, "... If a behavioral symptom begins suddenly or gets worse quickly, the following guidelines should be implemented at the time that the behavior occurs: ... Documentation of the incident, findings, interventions, and corrective measures taken will be made in the resident's medical record...."</p> <p>Further review of the policy titled, "Evaluation and Assessment of Resident Needs" revealed, "...2. A General Service Plan shall be initiated at the time of admission, be completed within 14 days of the admission, and reviewed at least semi-annual, 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...."</p> <p>In addition, the surveyor reviewed the policy titled,</p>	A 310		

New Jersey Department of Health

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A 310	Continued From page 3 "Notification of Changes (RS-33)" ... In addition to a change in the resident's condition, the resident and/or representative(s) shall be notified promptly if there is: ... In Assisted Living, the registered professional nurse (RN) 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 or medical needs and for needed nursing care intervention or medical care ...Document the notification and the resident's or representative's response in the resident's medical record ...Update the resident's care plan " The facility failed to implement intervention(s) and corrective measure(s) taken at the start of the above behavioral symptoms, failed to update the General Service Plan (GSP) upon changes in the resident's physical/cognitive status, and failed to notify the resident's representatives upon change in the residents' condition. Refer to A-0565	A 310			
A 565	8:36-5.10(a)(3) General Requirements (a) The facility shall notify the Division of Health Facility Survey and Field Operations immediately by telephone at (609) 633-9034 (609) 392-2020 if after business hours, followed within 72 hours by written confirmation, of the following: 3. Any suspected cases of resident abuse or exploitation which have been reported to the State Long-Term Care Ombudsman.	A 565			

New Jersey Department of Health

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A 565	<p>Continued From page 4</p> <p>This REQUIREMENT is not met as evidenced by: Complaint#: NJ00171543 Based on interview and record review it was determined that the facility failed to immediately report an [NJ Exec Order 26.4b1] of [NJ Exec Order 26.4b1] [NJ ex order 26.4b1] the Department of Health (DOH) upon first occurrence on [NJ ex order 26.4b1], and not reported to the DOH until [NJ ex order 26.4b1], for 2 of 3 residents [NJ ex order 26.4b1], Resident #1, and Resident #2. This deficient practice was evidenced by the following:</p> <p>On 2/12/2024 the DOH received a Facility Reportable Event (FRE) which indicated resident to [NJ Exec Order 26.4b1] that occurred on [NJ ex order 26.4b1]. The FRE revealed two residents with a diagnosis of [NJ ex order 26.4b1] [Resident #'s 1 and 2] [NJ ex order 26.4b1] [NJ ex order 26.4b1].</p> <p>On 2/21/2024 the surveyor reviewed the medical record (MR) of Resident #1 [NJ ex order 26.4b1] [redacted] and [NJ ex order 26.4b1] [redacted].</p> <p>The surveyor reviewed the medical record (MR) of Resident #2, who moved in the facility [NJ ex order 26.4b1] [redacted].</p> <p>The surveyor reviewed Resident #'s 1 and 2 progress notes (PNs) which included reports of Certified Medication Aides (CMAs) to the Registered Nurse (RN) of Resident #2's</p>	A 565			

New Jersey Department of Health

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A 565	<p>Continued From page 5</p> <p>NJ ex order 26.4b1 and NJ ex order 26.4b1 #1's NJ ex order 26.4b1 these notes included the following dates and times:</p> <ol style="list-style-type: none"> NJ ex order 26.4b1 at 20:05 [8:05 p.m.] NJ ex order 26.4b1 at 17:38 [5:38 p.m.] NJ ex order 26.4b1 at 22:58 [10:58 p.m.] NJ ex order 26.4b1 at 15:00 [3:00 p.m.] NJ ex order 26.4b1 at 15:43 [3:43 p.m.] NJ ex order 26.4b1 at 16:19 [4:19 p.m.] NJ ex order 26.4b1 at 6:01 [6:01 a.m.] NJ ex order 26.4b1 at 23:14 [11:14 p.m.] NJ ex order 26.4b1 NJ ex order 26.4b1 at 16:01[4:01 p.m.]: This PN included a documentation that states, "Resident #2 NJ ex order 26.4b1 Resident #1 NJ ex order 26.4b1 Resident #1 NJ ex order 26.4b1" <p>At 1:45 p.m. on 2/21/24, the surveyor interviewed the Director of Residential Living/Registered Nurse (RN) and the Residential Executive Director (RED) both stated that prior to NJ ex order 26.4b1 NJ ex order 26.4b1 Resident #1 and Resident #2 NJ ex order 26.4b1 The RN stated that it wasn't until staff reported that Resident #1 NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1</p> <p>The facility failed to notify the DOH on NJ ex order 26.4b1 of all suspected cases of NJ ex order 26.4b1 immediately by telephone, followed within 72 hours by written confirmation in accordance with state regulations.</p>	A 565		

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A 565	Continued From page 6 The RED provided the surveyor with a removal plan on NJ ex order 26.4b1 The surveyor completed a follow-up survey on 2/26/2024 and confirmed that the facility implemented the removal plan.	A 565		
A 751	8:36-7.3(b) Resident Assessments and Care Plans (b) The resident health service plan shall be reviewed, and if necessary, revised quarterly, and 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#: NJ00171543 Based on interview and record review it was determined that the facility failed to ensure that a Health Service Plan (HSP) was developed which contained interventions in response to NJ Exec Order 26.4b1 for 2 of 3 residents reviewed for NJ Exec Order 26.4b1 Resident #'s 1 and 2. This deficient practice was evidenced by the following: 1. On 2/21/2024 at 11:15 a.m., the surveyor reviewed the medical record (MR) of Resident #1 who moved in the facility NJ ex order 26.4b1 with NJ ex order 26.4b1 . Review of the General Service Plan (GSP) NJ ex order 26.4b1 . The surveyor reviewed the progress notes (PN) and observed the following:	A 751		

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A 751	<p>Continued From page 7</p> <p>1/3/2024 at 22:58 [10:58 p.m.] the resident [Resident #1] NJ ex order 26.4b1 The resident NJ ex order 26.4b1 [Resident #2] NJ ex order 26.4b1 staff to NJ ex order 26.4b1.</p> <p>2/9/2024 11:25 [11:25 a.m.] Resident #1 and Resident #2 NJ ex order 26.4b1 Resident [Resident#1] NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1</p> <p>2. The surveyor reviewed the medical record (MR) of Resident #2, NJ ex order 26.4b1 According to the general service plan (GSP) dated NJ ex order 26.4b1, Resident #2 NJ ex order 26.4b1</p> <p>The surveyor reviewed Resident #'s 1 and 2 progress notes (PNs) which included reports of Certified Medication Aides (CMAs) to the Registered Nurse (RN) of Resident #2 NJ ex order 26.4b1 #1's NJ ex order 26.4b1 requiring staff to intervene and unlock the door; these notes included the following dates:</p> <ol style="list-style-type: none"> NJ ex order 26.4b1 at 20:05 [8:05 p.m.] NJ ex order 26.4b1 at 17:38 [5:38 p.m.] NJ ex order 26.4b1 at 22:58 [10:58 p.m.] NJ ex order 26.4b1 at 15:00 [3:00 p.m.] NJ ex order 26.4b1 at 15:43 [3:43 p.m.] NJ ex order 26.4b1 at 16:19 [4:19 p.m.] NJ ex order 26.4b1 at 6:01 [6:01 a.m.] NJ ex order 26.4b1 at 23:14 [11:14 p.m.] 	A 751		

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A 751	<p>Continued From page 8</p> <p>9. [redacted] [no specific time indicated]</p> <p>10. [redacted] at 16:01[4:01 p.m.]: This PN included a documentation that states, "Resident #2 [redacted] Resident #1 [redacted] [redacted] Resident #1 [redacted] [redacted] Resident #1 [redacted] [redacted]"</p> <p>On 2/21/2024 at 12:15 p.m., the surveyor interviewed the RN who stated that there was no [redacted] for Resident #2 until [redacted]. The RN stated that it wasn't until staff reported that Resident #1 [redacted] Resident #2 [redacted] [redacted]</p> <p>Later that day at 1:45 p.m., the surveyor interviewed the Director of Residential/Registered Nurse (RN) and the Residential Executive Director (RED) who both stated that prior to [redacted] that [redacted] Resident #1 and Resident #2 [redacted] [redacted]. The RN confirmed that Resident #'s 1 and 2 families were not notified on [redacted] of the behaviors and there were no family consents at that time.</p> <p>Although [redacted] and reported, the facility failed to develop and implement a HSP to address the [redacted], and failed to update as needed prior to [redacted]</p> <p>The RED provided the surveyor with a removal plan on [redacted]</p> <p>The surveyor completed a follow-up survey on 2/26/2024 and confirmed that the facility implemented the removal plan.</p>	A 751		