

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AD0210	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/08/2022
NAME OF PROVIDER OR SUPPLIER MAGNOLIA ADULT DAY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 2300 3RD STREET FORT LEE, NJ 07024		
(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
M 000	Initial Comments Type of Survey: Initial Census: 0 Sample Size: 0 The facility was not in substantial compliance with all of the standards in the New Jersey Administrative Code, Chapter 8:43F, Standards for Licensure of Adult Day Health Services. 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 New Jersey Administrative Code, Title 8, Chapter 43E, Enforcement of Licensure Regulations.	M 000		
M 251	8:43F-3.3(e) Administration The policy and procedure manual(s) shall be available and accessible to all participants, staff, and the public. This REQUIREMENT is not met as evidenced by: Based on interview and record review, it was determined that the facility failed to implement and ensure that the facility policy and procedure manual was available during the initial survey for review. The deficient practice was evident by the following: On 6/8/22 at 10:25 a.m., during the entrance	M 251		

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

TITLE

(X6) DATE

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M 251	Continued From page 1 conference and facility document review, the surveyor requested the facility policy and procedure manual. The Administrator (ADM) informed the surveyor that he had to locate the manual. On 6/8/22 at 12:55 p.m., the surveyor requested the policy and procedure manual from the owner of the facility and the ADM. Both informed the surveyor that the facility did not have a policy and procedure manual for the surveyor to review and were not aware that they had to have a policy and procedure manual available. Both stated that the facility did have policies and procedures, but they were not organized into a manual.	M 251		
M 415	8:43F-6.3(b) General Services The facility shall develop written job descriptions and ensure that personnel are assigned duties based upon their education, training, and competencies, and in accordance with their job descriptions. This REQUIREMENT is not met as evidenced by: Based on record review and interview, it was determined that the facility did not develop written job descriptions to ensure that personnel were assigned duties based upon their education, training, and competencies for 5 of 7 employees reviewed Employees #2, #4, #5, #6, #7). This deficient practice was evidenced by the following: On 6/8/2022, the surveyor reviewed 7 employee personnel files and observed that the following 5 of 7 employees files did not contain written job descriptions as follows:	M 415		

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M 415	Continued From page 2 1. Employee #2 had a date of hire of [REDACTED] NJ ex order 26.4b1 There was no documentation of a written job description for the title of Food Service Director. 2. Employee #4 had a date of hire of [REDACTED] NJ ex order 26.4b1 There was no documentation of a written job description for the title of Assistant Activity Director. 3. Employee #5 had a date of hire of [REDACTED] NJ ex order 26.4b1 There was no documentation of a written job description for the title of Administrator. 4. Employee #6 had a date of hire of [REDACTED] NJ ex order 26.4b1 There was no documentation of a written job description for the title of Social Worker. 5. Employee #7 had a date of hire of [REDACTED] NJ ex order 26.4b1 There was no documentation of a written job description for the title of Home Health Aide. On 6/8/2022 at 12:53 p.m., the surveyor interviewed the facility's Activities Director (AD)/Owner who was identified as responsible for providing a job description to new employees to ensure that personnel were assigned duties based upon their education, training, and competencies. The AD acknowledged that she did not give each employee a job description.	M 415		
M 421	8:43F-6.3(e)(1)(i) General Services (e) The facility shall develop and implement a staff orientation plan and a staff training and education plan, including plans for each service and designation of person(s) responsible for ongoing training.	M 421		

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M 421	Continued From page 3 1. All staff shall receive orientation at the time of employment and ongoing in-service training regarding, at a minimum, emergency plans and procedures, the infection prevention and control services, participant rights, and elder abuse. i. The facility shall document ongoing in-service training of all staff. This REQUIREMENT is not met as evidenced by: Based on record review and interview, it was determined that the facility failed to provide documented evidence that newly hired employees received the minimum required in-service training on orientation on emergency plans and procedures, infection prevention and control services, participants rights and elder abuse for 7 of 7 employees whose personnel files were reviewed. This deficient practice was evidenced by the following: On 6/8/2022, the surveyor reviewed the facility's 7 employee personnel files and observed that there was no documented evidence that the 7 employees received the minimum required in-service training on emergency procedures, infection control, and abuse prevention. On 6/8/2022 at 12:49 p.m., the surveyor	M 421		

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M 421	Continued From page 4 interviewed the facility's Activities Director (AD)/Owner, identified as responsible for this information, pertaining to the minimum in-service training required on emergency plans and procedures, infection prevention and control services, participants rights, and elder abuse. The AD stated the facility's Director of Nursing (DON) will be attending a third-party infection control training and that once the DON has completed this infection control training, she will then train the facility's remaining employees. During continued surveyor interview with the AD revealed she was unable to provide documented evidence that the 7 employees had received the minimum required in-service trainings in the additional required areas.	M 421		
M 423	8:43F-6.3(f) General Services Employee health records as required by these rules shall be maintained for each employee. Employee health records shall be confidential and kept separate from personnel records and shall include documentation of all medical screening tests performed and the results. This REQUIREMENT is not met as evidenced by: Based on record review and interview, it was determined the facility failed to ensure employee health records including documentation of all medical screening test performed and results were maintained for 6 of 7 employees reviewed (#1, #3, #4, #5, #6 and #7). This deficient practice was evidenced by the following: 1. Employee #1 had a date of hire of NJ ex order 26.4b1 .	M 423		

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M 423	Continued From page 5 There was no documentation of a history and physical (HP). 2. Employee #3 had a date of hire of [NJ ex order 26.4b1]. There was no documentation of a HP. 3. Employee #4 had a date of hire of [NJ ex order 26.4b1]. There was no documentation of a HP. 4. Employee #5 had a date of hire of [NJ ex order 26.4b1]. There was no documentation of a purified protein derivative (PPD) skin test to screen for tuberculosis. 5. Employee #6 had a date of hire of [NJ ex order 26.4b1]. There was no documentation of a HP or PPD skin test to screen for tuberculosis. 6. Employee #7 had a date of hire of [NJ ex order 26.4b1], there was no documentation of a HP or PPD skin test to screen for tuberculosis. On 6/8/2022 at 12:52 p.m., the surveyor interviewed the facility's Activities Director (AD)/Owner who was identified as responsible for this information pertaining the facility's employee health records. The AD stated she was unable to provide the surveyor with documented evidence of HP or PPDs for the above employees.	M 423		



M251

8:43F-3.3 (e) Administration

P1

No residents/clients were adversely affected by this deficiency.

An on boarding training/orientation will be conducted of all new staff as well an annual review of current staff.

An annual review and sign off by the Director, Director of Nursing, Social Worker. Will be conducted to ensure all P & P are up to date and utilized properly within our adult day care facility.

A comprehensive binder has been created listing all P & P as related to our Adult Day Care Facility. The binder contains a table of contents with subject matter and subsequent sub listing the various components of the listing. All give a detailed narrative of the P & P

The P & P Binder contains:

- 1) Leadership
- 2) Provisions of Adult Day Care
- 3) Participants Handbook
- 4) Medication Management
- 5) Management of Information
- 6) Improving Organizational Performance
- 7) Management of Human Resources

A copy is available for review by all who may request such. A second copy is stored in the director's office.

Completed: June 17th 2022

M251

8:43F-3.3 (e) Administration

No Resident/Clients were adversely affected by this deficiency.

As mentioned, a comprehensive P & P was created into one large binder and is available for review by clients, staff, and State representatives.

Completed: June 17th 2022

M415

8:43F-6.3 (b) General Services

No Potential of harm to residents/clients as a result of this deficiency.

accepted
6/24/22
PR

A comprehensive listing of job descriptions pertaining the adult day care facility has been created. This is part of the larger P & P book under the subcategory of Management of Human Resources. The Subcategory is listed as Job Descriptions. Director NJ Ex Order 26.4b1 or designee will monitor the distribution of all job descriptions and place a copy in each employee's file.

In addition, a smaller binder of all job descriptions has been created for easy review.
Completed: June 17th 2022

M415
8:43F-6.3 (b) General Services

A listing of all employee job descriptions has been created under the title: job descriptions a subcategory of Management of Human Resources.

The Job descriptions are listed in the larger P & P manual as well as a separate folder listing all current job descriptions for our AMDC facility. Individual job descriptions will be given to existing and future hires and a copy will be placed in their respective files.

COMPLETED: June 17th 2022

M421
8:43F-6 (e) (1) General Services

No residents/clients were adversely affected as a result of this deficiency.

A comprehensive Employee Handbook has been created and will be utilized by current as well as new hires in the future. Will train at on boarding date as well as annually.

The In-service trainings have been completed by the director of the center. The director or his/her designee will conduct annual in-service training on all aspects of the adult day.

M421
8:43F-6.3 (e) (1) General Services

All Employees have received in service training on required areas.

An in service training log has been created and staff has already utilized all in the training sessions for required in service training.

Completed: June 17th 2022

The infection Preventionist/RN is scheduled to do all infection control related in service on Sunday June 25th at 1:00PM

Areas will include but not limited to:

- 1) Hand Washing
- 2) Donning and doffing of PPE
- 3) Cross contamination clean/dirty linens.
- 4) Screening for Temp
- 5) Outbreak knowledge and response

A comprehensive in-service training manual has been created. It details all the required in-service information to be reviewed.

All Magnolia staff have received education by the director of the center, in addition the binder has been made available to all staff to review on as a needed basis.

Training and in service sign offs have been completed.

All subsequent new employees will receive the necessary training prior to official first day

All items have been covered.

Infection Control will be completed on Sunday June 25th by the infection preventionist/RN

M421

8:43F-6.3 (e) General Services

A comprehensive training manual has been created and required In Service training and back up sign off sheets have been completed by the current Magnolia staff.

The director has successfully trained staff on all areas required.

Staff has access to the training book for additional education.

All required In Service training by current employees

Completed June 17th 2022

The infection preventionist/RN will conduct an Infection control in service on Sunday June 25th at 1:00PM

M423

8:43F-6.3F General Services

No clients/residents were harmed as a result of this deficiency.

All Employee health records / folders have been updated.

TB testing has been completed on all who required such.

- 1) H & P have been added for employee requiring.
- 2) TB testing completed on a second employee (Negative)
- 3) TB test completed on a 3ed employee and is negative as well.

Health records will be monitored by director or Director of Nursing or his/her designee for all new employees to insure all are up to date prior to actual start of employment.

An annual audit will be conducted by HR or a designee to ensure accuracy of employee health files.

M423

8:43F-6.3 (f) General Services

All employee Health files have been reviewed for accuracy.

Employees health files have been updated with required H & P and or PPD testing where required.

As noted, future hires will be required to submit proper documentation prior to a start date.

HR department will conduct as needed and an annual review of all employee health files to ensure current information.

H7P from employees are in their files.

PPD on second employee completed (negative) and in health record file.

PPD of #3 employee was negative, a copy of results was placed in employee health file.
Completed: June 23th 2022

As noted, the employee health files have been updated and required documentation including H & P's and or proof of PPD have been included in the individual employee health file. All new employees will be required to submit the information prior to a start date.
Completed and updated: June 23, 2022