STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF CODES AND STANDARDS
BUREAU OF ROOMING AND BOARDING
HOUSE STANDARDS
(609) 633-6251

POSTED

PAGE 1 OF 4
Control No. 0117-R-0015
No. of Stories 2 Units 13 Bedrooms
Lic. Capacity 20 No. of Res. 19
Class RHCF
DATE: 12/19/25

BRBHS-1
1/18

NOTICE OF LICENSURE VIOLATION AND ORDERS TO CORRECT DEFICIENCIES

Owner's Name, Address, Zip, County	Property Address
The Homestead RHCF	317 Weymouth Rd. Elwood, NJ
Owner's Phone Number	Property Phone Number
Administrator	

TYPE OF EVALUATION

SOCIAL	☐	ADDENDUM	☐
PHYSICAL	☑	CYCLICAL	☑

-PLEASE READ CAREFULLY-

This evaluation performed by the Bureau of Rooming and Boarding House Standards is being conducted pursuant to the Health Care Facilities Planning Act (N.J.S.A. 26:2H-1.1 et seq.).

You are ORDERED to correct the conditions described in the attached notice of violations by the compliance date indicated for each violation. Failure to comply with these orders will result in penalties and/or a court action in accordance with section 14 of the Act. Please review the violations with the Bureau representative.

You may contest these orders at an administrative hearing. The request for a hearing must be made within 15 days after receipt of these orders. Each issue intended to be raised at the hearing must be set forth in detail in the letter. Any issue not so raised shall be deemed waived. The hearing shall be held pursuant to The Administrative Procedure Act, (C.52:14B-1 et seq.). Refer to the property address and date of compliance (if applicable) and address the hearing request to:

Division of Codes and Standards, Hearing Coordinator, P.O. Box 804, Trenton, New Jersey 08625 with a copy to the **Chief, Bureau of Rooming and Boarding House Standards**, at the same address. A corporation may be represented only by a licensed attorney.

You will be notified of the time and place of the hearing.

If you find an extension of time necessary to abate any violation, a letter must be submitted two (2) weeks prior to the date of compliance which states in detail: (1) The violations abated to date; (2) The reason why each unabated violation cannot be corrected prior to the date of penalty; and (3) The date by which all violations can be abated.

By requesting an extension, one expressly waives the right to a hearing and admits that the Notice and Orders are correct and free from procedural and substantive defects.

Commissioner

By *Bernard A. Raywood, Chief*
Bureau of Rooming and Boarding House Standards

Received By

Printed Name of Person Served

12/19/25
Date Time Served

William Murray III PA
Bureau Representative

White – Owner's Copy Yellow – File Copy Pink and Goldenrod – Evaluator Copies

CamScanner

317 Weymouth Rd. Elwood, NT 0117-R-0015

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	Fire cert exp (Unavailable)			
5:27A 3A.1	Provide current fire certificate	2/19/25	Abated	
	Owner/Operator lic. exp. 3/31/25			
	2nd Floor			
	Room #14			
	- No violations			
	Room #12			
	- Vacant			
	Room #11			
5:27A 3A.2(f)	- Mattress cover shall be provided	2/19/25	Abated	
	on residents bed.			
	Room #10			
	- No violations			
	Room #9			
	- No violations			
	Room #8			
	- No violations			
	Room #7			
5:27A 7.3(a)(iii)	- Bed sheets shall be	2/19/25	Abated	
	provided on residents bed.			
	Room #6			
	- No violations			
	Common hallway			
	- No violations			
	Common bathroom #1 (Half)			
	- No violations			

All 1 May 3/3/25

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317 Weymouth Rd. Elwood, NJ 0117-R-0015

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	2nd Floor cont			
	Common bathroom #2 (Half)			
	-No violations			
	Common bathroom #3			
5:27A 15.3(a)4	-Non-working exhaust fan shall	2/19/25	Abated	
	be repaired or replaced.			
	1st Floor			
	Room #5 - Occupied by staff			
	Room #4			
	-No violation			3/3/25
	Room #3A			
	- No violations			
	Room #3			
	-No violations			
	Room #2			
	-No violations			
	Room #1			
5:27A 15.3(a)4	- Closet door right side of	2/19/25	Abated	
	entry door shall be repaired.			
	Common hallway			
	-No violations			
	Common bathroom (Full) Next to #4)			
5:27A 15.3(a)1	- Right wall area above light	2/19/25	Abated	
	switch shall be cleaned and			
	maintained.			

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317 Weymouth Rd. Elwood, NJ 0117-R-005

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	1st Floor unit-			
	Common bathroom #2 (Left) Next to #3)			
5:27A 15.3(a)4	- GFCI shall be repaired or replaced to operate.	2/19/25	Abated	
	Kitchen			
	-No violations			
	Dining room			
5:27A 15.3(a)4	- Ceiling area above fan/light shall be scraped and repainted.	2/19/25	Abated	
	Sitting room			
	-No violations			
	Basement			
	-No violations			
5:27A 15.3(a)4	- White area of both staircases shall be cleaned and repainted.	2/19/25	Abated	
			3/3/25	
	Exterior			
	-No violations			

WHITE ~ Owner Copy YELLOW ~ Evaluator PINK ~ Office

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POSTED

STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF CODES AND STANDARDS
BUREAU OF ROOMING AND BOARDING
HOUSE STANDARDS
(609) ~~633-6251~~ 984-1704

PAGE 1 OF 7
Control No. 0117-0015
No. of Stories ____ Units 14
Lic. Capacity 20 No. of Res. 20
Class RHCF
DATE: 7/12/24

BRBHS-1
1/18

NOTICE OF LICENSURE VIOLATION AND ORDERS TO CORRECT DEFICIENCIES

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Commissioner

By *Bernard A. Raywood, Chief*
Bureau of Rooming and Boarding House Standards

Received By
Florence K. Freiling
Printed Name of Person Served
7/12/24 Date
2:50 pm Time Served

Bureau Representative

White – Owner's Copy Yellow – File Copy Pink and Goldenrod – Evaluator Copies

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0117-0015

NJAC 5:27A

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	License to own # 2 expires 3/31/25.			
	Fire Certificate expires 1/15/25.			
2.1(a)	The owners of the property must apply for an owner's #1 license.	9/12/24	Yes 2/21/25	
Note:	Since the owners of the property differ from the agency running the facility, the property owners must apply for a license.			
9.2(i)	RHCF licensee shall ensure all residents have completed annual Physicals by a physician, advance practice nurse or physician assistant.	9/12/24	Yes 2/21/25	
Note:	Physicals are needed for TV, GY, DS, JG, CG, and FH.			
15.1(b)	RHCF shall increase pest control services until roaches are eradicated.	9/12/24	Yes 2/21/25	
Note:	Roaches were observed in several bedrooms.			

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0117-0015

NJAC 5:27A

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
9.2(m)	Medical Certificates must be completed annually upon completion of the annual physical and prior to admission certifying the resident does not have medical or personal care needs which exceed the level of services provided in a R+CF, is free from communicable diseases and does not require skilled nursing care.	9/12/24	Yes 2/21/25	
9.2(f)	Nursing monitoring notes shall be completed and written on an ongoing basis and shall reflect the resident's current health status.	9/12/24	Yes 2/21/25	
10.1(a)2	The facility shall maintain a daily record of the type and amount of medication taken by the resident and the time at which such medication was taken	9/12/24	Yes 2/21/25	

Corrected 4/5/25

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
Note:	A.) Medication logs shall not be signed by staff prior to the time the specified medication time on the medication Log. It should only be signed off when the staff actually observes the medication was taken by the resident.			
	B) The medication cart contained medication for residents SD + TV, but no medication log was on file to verify staff observed medications were taken by the resident.			
12.3(b)	RHCF shall request the local fire department that one joint fire drill be conducted annually.	9/12/24	Yes 2/21/25	
Note:	RHCF shall mail a certified letter to the fire department, and shall maintain a copy of the letter and certified mail receipt on file to			

4/1 init. DC

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0117-0015

NJAC 5:27A

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	verify a joint drill was requested.			
10.2(a)	RHCF shall obtain a current contract with the consultant pharmacist.	9/12/24	Yes 2/21/25	
12.2(a)	RHCF shall obtain a contract with another RHCF or facility that is able to provide a higher level of care in the event of an emergency. The updated policy and procedure shall be filed with DCA and copies of the emergency plans shall be forwarded to both the municipal and county emergency management officials for their review.	9/12/24	Yes 2/21/25	
4.7(a)	RHCF shall obtain a current, updated contract with a transportation agency.	9/12/24	Yes 2/21/25	
4.8	RHCF shall maintain a current, written agreement for services not provided by	9/12/24	Yes 2/21/25	

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NJAC 5:27A

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	the facility.			
Note:	Updated contract letters are required annually for Crossroads, Helping Hands and Day Break Day Programs.			
4.6(a)1	RHCF shall update the organizational chart delineating the lines of authority, responsibility, and accountability for the administration and resident care services of the facility.	9/12/24	Yes 2/21/25	
7.3(a)8	RHCF shall repair or replace broken blinds to ensure residents' privacy.	9/12/24	Yes 2/21/25	
Note:	Rooms # 2 & # 12.			
15.1(a)	RHCF shall ensure all bathrooms and shower curtains are free from mold.	9/12/24	Yes 2/21/25	
15.6(a)	RHCF shall repair the shower located on the 1st Floor near Room # 3, and (B) and faucet in the bathroom of bedroom # 5	9/12/24	Yes 2/21/25	

NJAC 5:27A

0117-0015

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
15.7(a)	RHCF shall repair the hole in the wall behind the door of bedroom # 4.	7/12/24	Yes 2/21/25	

Tracy 1/sick - DLe

End of Report

Tracy 1/sick - DLe

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