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 9
Control No. 0119-0024
No. of Stories 2 Units 6
Lic. Capacity 16 No. of Res. 10
Class RHCF
DATE: 9-25-2024

BRBHS-1
1/18

NOTICE OF LICENSURE VIOLATION AND ORDERS TO CORRECT DEFICIENCIES

Owner's Name, Address, Zip, County	Property Address
30E BHP Realty LLC	30 E. Blackhorse Pike Pleasantville 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

Abdul Welch
Received By
Abdul Welch
Printed Name of Person Served
9/25/24 3:05 pm
Date Time Served

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

Bureau Representative

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

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	License To Own & Operate Expires: 6-30-25			
	License To Own #2 Unavailable			
	Fire Certificate Expires 4-30-2025			
2.1(a)	RHCF licensee shall obtain Owner's license #2 for: 30E BAP House LLC.	11-25-24	Yes (SAD) 12-18-24	
15.1(b)	RHCF shall increase Pest Control from once a month to biweekly and for weekly as recommended by pest control company to eradicate bed bug infestation in resident bedrooms & living areas.	11-25-24	Yes (SAD) 12-18-24	
note	RHCF MUST provide verification that treatment was provided for Active Bed Bugs			

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
9.2(m)	RHCF licensee shall ensure all residents have completed annual medical certifications by a physician or a nurse practitioner	11-25-24	Yes SAD 12-18-24	
note	Medical certs needed for the following residents: M.K, N.C, & M.T.			
9.2(i)	RHCF licensee shall ensure All residents have completed annual physicals by a physician, NP and/or PA	11-25-24	Yes SAD 12-18-24	
9.2(f)	Nursing monitoring notes shall be written on an ongoing basis & shall reflect the residents current health status	11-25-24	Yes SAD 12-18-24	
note	Nursing monitoring notes needed for: A.M.T M.K.			

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
6.2(a)1	RHCF licensee shall ensure All residents under a "month to month" occupancy agreement (once is completing a new agreement monthly. Residents shall be made aware of any changes to occupancy agreement 30 days in advance (fees & services provided)	11-25-24	Yes SMD 12-18-24	
4.8	RHCF licensee shall maintain a current written agreement for services not provided by facility.	11-25-24	Yes SMD 12-18-24	
note	Written agreement needed for All DAY Programs attended by residents			
4.5(d)	RHCF licensee shall develop & implement a staff orientation and a staff education plan including plans for each	11-25-24	Yes SMD 12-18-24	

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	service + designation of person(s) responsible for all trainings. All personnel shall receive orientation at the time of employment + at least annually. An in-service education regarding a minimum: Emergency plan + procedures, medication Observation + infection prevention + control program.			
4.16(h)	At least one education training program each year shall be held for All Administrative staff + employees providing resident supervision and/or personal care of the Rights + Responsibilities of staff under the NJ Advanced Directive for Healthcare Act NJSA 26:2H-53.	11-25-24	Yes SAD 12-18-24	
4.7(a)	RHCF licensee shall create	11-25-24	Yes SAD 12-18-24	

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	a policy & procedure regarding transportation of residents in an emergency & obtain a contract w/ a transportation company.			
			Yes SMD	
10.2(b)	The consultant pharmacist shall be present in the facility at least quarterly & shall provide written reports to the administrator & to the health maintenance & nursing Nurse.	11-25-24	12-18-24	
note:	NO pharmacy quarterly reports.			
			Yes SMD	
15.1(b)	RHCF shall provide ongoing housekeeping services daily to resident's rooms bathrooms & common areas used by residents to ensure a sanitary home-like environment	11-25-24	12-18-24	
			Yes SMD	
15.1(b)	Due to severe Bed Bug infestation in resident's room	11-25-24	12-18-24	

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	an increase of laundry			
	services shall be provided			
	to all resident clothing +			
	bedding - immidiately			
	+ on-going until issue is			
	eradicated.			
			Yes SM	
3(a) 2(f)	RHCF shall ensure	11-25-24	12-18-24	
	every mattress + box			
	spring is encased in			
	seperate tear-proof			
	bed bug covers that are			
	are fully sealed + free			
	of rips, tears, +			
	punctures.			
~~4.5~~			Yes SM	
4.12(a)	RHCF licensee shall	11-25-24	12-18-24	
	ensure All resident			
	files have completed			
	inital interview prior to			
	or at the time of admission.			
	Documentation of the			
	resident interview shall			
	be included in resident files.			
			Yes SM	
10.2(a)	RHCF shall obtain a	11-25-24	12-18-24	

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	Current Pharmacy license			
			Yes SM	
9.1(c)	RHCF licensee shall	11-25-24	12-18-24	
	obtain a current nursing			
	contract for RN that			
	is designated as the			
	Director of Health			
	Maintenance & Monitoring			
			Yes SM	
12.3(a)	RHCF shall conduct	11-25-24	12-18-24	
	at least one fire drill			
	every month of which			
	at least one annually			
	shall take place during			
	every working shift.			
			Yes SM	
5.3(a)	Toilet Tissue Soap	11-25-24	12-18-24	
	Paper Towels and/or Air			
	Dryers & waste			
	receptacles shall be			
	provided in EACH Bathroom			
	at ALL Times.			
6.2(a)2.	RHCF licensee shall			
	maintain a written record			
	of all financial arrangements			
	of the resident and his			

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	or her family guardian, or designated community agency w/ copies furnished the resident & upon request to the person or agency on/ whom the arrangements were made.			
note:	Licensee shall provide SSA/SSI issued letters for eligible residents to identify Payee Source	11-25-24	12-18-24	
	Residents whom are deemed unable to manage their own funds shall immediately discontinue usage of facility's "Personal financial Management Agreement" form & Complete/Apply for Representative payee through Social Security.			
	END of Report			

WHITE ~ Owner Copy | YELLOW ~ Evaluator | PINK ~ Office

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