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 3
Control No. 2012-0152
No. of Stories 3 Units 14
Lic. Capacity 23 No. of Res. 22
Class RHCF
DATE: 3/26/25

BRBHS-1
1/18

NOTICE OF LICENSURE VIOLATION AND ORDERS TO CORRECT DEFICIENCIES

Owner's Name, Address, Zip, County	Property Address
Advocate Care Group LLC	520 Central Ave Plainfield, 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

Received By

Printed Name of Person Served

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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NJAC 5:27A 2012-0152

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	License to own and operate expired 6/30/24.			
	Fire Certificate expires 7/31/25.			
2.1(a)	Shelter shall obtain a valid, current License to own and operate.	5/16/25	Yes 3/31/25	
10.3(e)	All medications shall be kept in their original containers and shall be properly labeled and identified.	Immediate	No 3/31/25	
Note:	Medications labeled only in resident's first name in written script for PH. No identifying information including the date of medication disbursement, name of Rx, dose or prescribing physician was on the bottle. Administrator stated medications belonged to a resident no longer residing at facility, and was given to Resident, PH, because he ran out of medication. Disbursement of medication shall cease immediately.			MB

2012-0152

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
10.1(a)1	R+CF licensee shall document the provision of training to each employee who has been designated to provide resident supervision and/or assistance with self-administration of medication. Trainings are to be conducted by the Health Maintenance & Monitoring Director (RN), provider pharmacist or consulting pharmacist.	Immediate	Yes 3/21/25	
Note:	Due to the incorrect storage and distribution of resident's medication, all staff shall be immediately trained in the handling and monitoring of medication.			
		End of Report.		

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POSTED

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Commissioner

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

Received By
Printed Name of Person Served MARIE Belfort

Date 11/14/24 Time Served 3:05PM

Bureau Representative

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	License to own and			
	operate expired 6/30/24.			
	Fire Certificate expires			
	7/31/25.			
9.2(i)	RHCF licensee shall	1/14/25	No	
	ensure all residents		3/26/25	
	have completed annual			
	physicals by a physician,			
	nurse practitoner or			
	physician assistant.			
Note:	Copy of annual physicals			
	or documentation from			
	the resident's medical			
	provider verifying the			
	date and by whom the			
	physical was completed.			
	Documentation shall be			
	maintained in each			
	resident's file.			
9.2(m)	Upon completion of the	1/14/25	No	
	annual physical in (i) above,		3/26/25	
	or more often, as determined			
	by the physician, advance			
	practice nurse or physician			1/13

1/24/25

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	assistant, a licensed physician, APN or PA shall certify that the resident does not have medical or personal care needs which exceed the level of services provided in a RHCF, is free from communicable diseases (that is, does not have a reportable, communicable disease which is not controlled through prophylaxis or medication) and does not require skilled nursing care.			
Note:	The following medical certifications expired: PH, LM, CH, FC, AC, KM, OP, AB, GB, LB, RT, PH, AJ, AF, JF + WA.			
4.12(a)	RHCF licensee shall ensure all resident charts have completed initial interviews prior to or at the time of admission. Documentation that the interview was	1/14/25	Yes 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	completed and signed by the resident and/or the resident's designee, including signed Resident's Rights and facility rules shall be maintained in each resident's file.			
Note:	• Resident, RT's, file was not available for review.			
	• The following files were missing resident's rights: CH, AB, RT, AJ, AF & JF.			
	• The following files were missing facility rules: PH, CH, RT, AF & JF.			
	All documents are to be signed by the resident or their designee to acknowledge this information was reviewed with the resident upon intake.			
4.16(c)	Advance Directives must be completed for each resident and clearly indicate if the resident refuses or agrees for	1/14/25	No 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	the completion of an Advance Directive. If the resident agrees to an Advance Directive, the RtlCF shall develop and implement procedures to promptly request and take reasonable steps to obtain a copy of currently executed Advance Directives from all residents. These shall be entered into the resident's record when received.			
Note:	Currently, the Advance Directives on file are incomplete and do not clearly indicate if the resident requested an Advance Directive be completed or refused.			
9.2(d)	Nursing assessments shall be completed by a registered professional nurse upon intake. Thereafter, each resident shall be reassessed annually or whenever there	1/14/25	Yes 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	is a significant change			
	in the resident's condition.			
Note:	Resident, RT's, file was			
	not available for review.			
6.2(a)1	RHCF shall complete a	1/14/25	NO.	
	lease or Admission		3/26/25	
	Agreement upon admittance,			
	annually and if there are			
	any changes to rates. The			
	agreement shall clearly			
	indicate the rate charged			
	to the resident, dates of			
	the lease, services offered to			
	the resident, and the			
	leases are to be signed by			
	the resident, their guardian			
	or their designee.			
Note:	Resident, RTs, file was			
	not available for review.			
6.2(a)3	RHCF shall assess no	1/14/25	NO	
	additional charges, expenses,		3/26/25	
	or other financial liabilities			
	in excess of the daily, weekly			
	or monthly rate included in			
	the admission agreement.			MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
Note:	Upon review of the financial records, the amounts billed to the resident differed from the lease agreements on file for the following residents.			
	• Resident, AL, lease stated the resident was to pay $1751/mo, but is being charged $1800/mo.			
	• Resident, AE, lease stated the resident was to pay $1047/mo (per lease from 1/1/23; no lease for 2024 was in the file), but is being charged $1269/mo.			
	• Lease for resident, WA, stated resident was to pay $1000/mo, but is charged $1200/mo.			
	• leases for residents, RT + JF, were not available for review or missing from the file.			
	Overpayments billed to these residents must be paid back to the residents to			N/B

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	ensure the residents are reimbursed and made whole. If the RHCF intends to increase the rent and change the lease agreements, residents must be given 30 days prior notice of the increase in rent per NJAC 5:27A-6.2(a)3iii.			
6.2(a)2	RHCF shall maintain an updated and accurate, written record of all financial arrangements.	1/14/25	NO 3/26/25	
Note:	Documentation of rent paid by each individual each month shall be maintained to verify each resident is paying the rent agreed upon in the lease agreements.			
6.3(b)	Every Administrator to whom a resident's personal funds are entrusted shall maintain written records such as ledgers, including the	1/14/25	NO 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	date of payment, date of each disbursement, the reason for disbursement and to whom the disbursement was made.			
Note:	If the RHCF is payee or responsible for the disbursement of funds, a PNA ledger is required. R+ICF shall maintain records verifying all payee proof of income, so as to verify any discrepancies in PNA paid to residents.			
9.1(e)	RHCF shall provide a minimum of .20 hrs of nursing care from a registered professional nurse per week.	1/14/25	Yes 3/26/25	
Note:	RN must maintain seperate schedules for each licensed R+ICF to ensure each resident at the facility is receiving the minimum nursing supervision per week.			
				MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
4.9(a)1-3	The facility shall notify the Department immediately by telephone at 609-984-1704 followed within 72 hours by written confirmation of the following: 1. Termination of employment of the administrator & the name and qualifications of his/her/their replacement. 2. All residents who are missing for 24 hours. 3. All suspected cases of resident abuse or exploitation that have been reported to the State of NJ of the Ombudsman for Institutionalized Elderly and/or to the county welfare agency.	1/14/25	Yes 3/26/25	
4.6(a)1	An organizational chart delineating the lines of authority, responsibility and accountability for the	1/14/25	No. 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	administration and resident care services of the facility shall be maintained on site.			
Note:	R+ICF shall provide an updated organizational chart with job titles and responsibilities of each employee currently employed with the R+ICF.			
10.1(a)2	The R+ICF shall maintain a daily record of the type and amount of medication taken by the resident and the time at which such medication is taken.	1/14/25	NO 3/26/25	
Note:	Medication logs were incomplete. Staff must indicate if medication was observed being taken, refused by resident or alternate reason for medication not being taken. There shall be no blank areas on the log not completed by staff.			
				MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
4.11(a)	RHCF shall maintain an annual chronological listing of residents admitted or discharged, including the destination of residents who are discharged and dates of discharge.	1/14/25	NO 3/26/25	
12.3(aa)(2)	RHCF shall conduct at least one fire drill per month, of which one annually shall take place during every working shift. The facility shall maintain documentation of all drills including the date, hour (AM or PM), description of drill, participating staff and signature of staff in charge of drill.	1/14/25	Yes 3/26/25	
Note:	Last fire drill was completed in May 2024.			
12.3(b)	RHCF shall request the local fire department complete one joint fire drill	1/14/25	Yes 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	annually.			
Note:	R+CF shall mail a certified letter to the fire department requesting a drill be completed. A copy of the letter and certified mail receipt shall be maintained on site.			
4.16(h)	At least one education training program each year shall be held for all administrative staff and employees providing resident supervision and/or personal care on the rights and responsibilities of staff under the NJ Advance Directives for Healthcare Act NJSA 26:2H-53 et seq. and internal facility policies and procedures which implement this law.	1/14/25	No 3/26/25	
15.1(b)	R+CF shall increase pest control to 2 times per month until mouse/mice are eradicated.	1/14/25	Yes 3/26/25	
Note:	Residents reported seeing			MB

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202-0152

EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	mice in their rooms and evidence of mouse droppings observed in the medication closet located off of the dining room.			
10.2(b)	The consulting pharmacist shall be present in the facility at least quarterly and shall provide written reports to the administrator and to the health maintenance and monitoring nurse.	1/14/25	Yes 3/26/25	
10.3(g)	Discontinued or expired medications shall be destroyed within 30 days or, where possible, returned to the pharmacy. All medication destruction in the facility shall be witnessed by 2 persons, each of whom shall be either the administrator, the licensed nurse or the consultant pharmacist.	1/14/25	Yes 3/26/25	MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
3A.5	A dining room or rooms shall be provided which is of sufficient size and properly equipped to seat comfortably all residents at one sitting.	1/14/25	Yes. 3/26/25	
Note:	17 chairs for 23 residents was in the dining room at the time of inspection.			
3A.2(f)	RHCF shall ensure every mattress and boxspring are encased in seperate, tear proof, bed bug covers that are free from seams, rips, punctures or tears.	1/14/25	Yes 3/26/25	
Note:	Bed bug covers required in rooms # 1 & 13.			
15.3(a)6	RHCF shall ensure every refrigerator and freezer (including in resident's rooms) be equipped with thermometers.	1/14/25	Yes 3/26/25	
Note:	Medication closet refrigerator, Kitchen & Rooms # 8 & 14 missing refrigerators.			MB

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2012-0152

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
15.3(a)4	All facility furnishings shall be clean and in good repair.	1/14/25	Yes 3/26/25	
Note:	The following items require repair:			
	• Rm # 3 - broken dresser replaced/repaired.			
	• Rm # 9 - broken dresser replaced/repaired			
	• Rm # 14 - broken dresser replaced/repaired.			
	• 3rd floor hallway light repaired/replaced.			
15.3(a)13	Toilet tissue, soap, paper towels or air dryers and waste receptacles shall be provided in each bathroom at all times.	1/14/25	No 3/26/25	
Note:	3rd floor bathroom at the top of the stairs requires a replaced/repaired hand dryer or paper towels.			
15.3(a)4	RHCF shall repair and/or replace missing shower head and drain cover in the bathroom near Rooms # 4 and # 5.	1/14/25	Yes 3/26/25	
10.3(a)2	Medication storage area shall be locked when not in use.	1/14/25	Yes 3/26/25	
Note:	Medication closet located in the dining room shall be equipped			MB

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EVALUATION REPORT AND ORDERS OF THE COMMISSIONER

Administrative Code Reference		Compliance Date	Reinspection Date	Compliance Date
	with a lock to ensure			
	safe storage and limited			
	access of medications.			
	End of Report.			
	Tracy Yrich. Ale			
	Report reviewed with:			
	[signature]	11/14/24		

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