

State of New Jersey DEPARTMENT OF HEALTH

PHILIP D. MURPHY
Governor

TAHESHA L. WAY

PO BOX 360 TRENTON, N.J. 08625-0360

www.nj.gov/health

KAITLAN BASTON, MD, MSC, DFASAM Acting Commissioner

January 9, 2024

VIA CERTIFIED MAIL RRR

Antoinette Brown

Re: Notice of Revocation for Nurse Aide Certification

Antoinette Brown vs. New Jersey Department of Health Certification No: NA200026417

Agency Reference No. OPC 23-14539

Dear Ms. Brown:

The Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services, under authority of federal law, imposes a requirement on state governments to ensure that nurse aides have the education and clinical skills necessary to care for residents of long-term care facilities. See 42 C.F.R. Part 483. These regulations also require that each State maintain a nurse aide Registry, which, pursuant to 42 C.F.R. 483.156(c)(1)(iv), must contain all substantiated findings by the State of resident mistreatment, abuse, neglect, or misappropriation of resident property by a certified nurse aide.

The Certification Program of the New Jersey State Department of Health (Department) was notified of the results of an investigation in which there was sufficient information that you committed acts of misappropriation when you wrongfully obtained and used the debit card number of a long-term care resident, entrusted in your care.

The incident occurred between February and May of 2023 while you were employed as a certified nurse aide at Our Lady's Center Rehabilitation and Healthcare, in Pleasantville, New Jersey. Specifically, an investigation by the facility established credible evidence that on various occasions you purchased goods through Uber, in which there was a total of \$4,650 of charges incurred on the resident's debit card and delivered to your address. Your actions were willful and constitute misappropriation in accordance with the federal definitions under 42 <u>C.F.R.</u> 483.5.

The Department summarily suspended you on July 19, 2023. You failed to appear for the scheduled status call with the Honorable Robert Herman, Office of Administrative Law, on October 27, 2023, regarding the expedited hearing you requested on August 19, 2023. On August 31, 2023, the Department issued a Right to Hearing Notice. You

failed to request a hearing in the allotted 30 days from the date of the Right to Hearing Notice. Moreover, the Department has not received any evidence that you did not receive the notice.

Therefore, in accordance with 42 <u>C.F.R.</u> 483.156(c)(1)(iv), please be advised that a finding of misappropriation will be placed next to your name on the Registry and will remain on the Registry permanently. Please also be advised that your certification is hereby revoked.

Please surrender your nurse aide certificate and wallet card to:

Office of Program Compliance-Reporting 120 South Stockton Street, 3rd Floor Trenton, NJ 08625-0358

The certificate and the wallet card are no longer valid, and the status of your nurse aide certification is now revoked.

Please be advised that pursuant to N.J.A.C. 8:39-43.1(a)(1), only individuals who maintain a currently valid nurse aide certificate and are registered in good standing on the Registry are considered by the Department to be competent to work as a certified nurse aide in a licensed long term care facility. A certified nurse aide is no longer registered in good standing if a finding of abuse, neglect or misappropriation by the certified nurse aide's name is included on the Registry. Therefore, you are prohibited from employment as a certified nurse aide when a finding of misappropriation remains next to your name on the Registry.

In accordance with 42 <u>C.F.R.</u> 483.156 and <u>N.J.A.C.</u> 8:39-43.7, you are entitled to submit a written statement contesting the findings noted above. This statement will be maintained on the Registry. If you wish to submit such a written statement, you must do so within 20 days of the date of this letter. Your letter should reference "Notice of Revocation of Nurse Aide Certificate: Contested Findings."

Please forward this statement to the Office of Program Compliance-Reporting along with your nurse aide certification and your nurse aide wallet card to the address listed above.

Sincerely

Lisa King, Program Manager

Office of Program Compliance Division of

Certificate of Need and Licensing New Jersey Department of Health

LK:JC

Date: January 9, 2024 CERTIFIED MAIL: Return Receipt Requested US FIRST CLASS MAIL