



State of New Jersey
DEPARTMENT OF HEALTH
PO BOX 358
TRENTON, N.J. 08625-0358
www.nj.gov/health

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

SHEREEF M. ELNAHAL, MD, MBA
Commissioner

Notice of Revocation of
Nurse Aide Certification
NA: 8325526
OPC No: 17-11347

Tihesa R. Anderson

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 CFR 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 and or certified medication aide.

The Certification Program of the New Jersey State Department of Health ("Department") was notified on October 3, 2017, of the results of an investigation in which sufficient information was obtained that you were accused of misappropriation of property belonging to a nursing home resident. This occurred while you were employed as a certified nurse aide at Hamilton Grove Healthcare and Rehabilitation, Hamilton, New Jersey.

Specifically, on September 12, 2017 you were charged by the Hamilton Police Department with N.J.S.A. 2C:21-6H, Fraudulent Use of a Credit Card. You used a credit card belonging to a victim who resided at Hamilton Grove Healthcare and Rehabilitation. You fraudulently charged items at a supermarket on June 24, 2017.

On October 24, 2017, you were sent an Order of Summary Suspension notifying you that your nurse aide certification was no longer valid. The Order of Summary Suspension sent by the Department indicated that you had 30 days to request a hearing to contest the charges against you. This office received no such request for hearing.

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On July 13, 2018, the Department sent you a Notice of Right to Hearing and on August 21, 2018, the Department received your request for a hearing.

You were scheduled to appear on September 9, 2018 at a scheduled telephone conference before Judge Edward J. Delanoy, Jr., A.L.J., and you failed to appear. Subsequently, on September 24, 2018, the file was returned to the Department and marked "Failure to Appear." A Notice of Failure to Appear was sent to you and indicated the Department must receive an explanation, in writing, within 13 days of the Notice. Neither the Office of Legal and Regulatory Compliance, nor the Department of Health received an explanation.

Therefore, in accordance with 42 CFR 483.156(c)(1)(iv), please be advised that a finding of misappropriation, will be placed next to your name on the Registry on October 11, 2018, and will remain on the Registry permanently.

Please surrender your nurse aide certificate and wallet card to:

Office of Program Compliance-Reporting
25 South Stockton Street, 2nd Floor
PO Box 358
Trenton, NJ 08625-0358

Please be advised that your nurse aide 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 are registered in good standing on the Registry are considered by the Department to be competent to work as a 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 is included on the Registry. Therefore, if a finding of misappropriation remains next to your name on the Registry, you are prohibited from employment as a certified nurse aide in a licensed long term care facility.

In accordance with 42 C.F.R. 483.156 and N.J.A.C. 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 medication aide certification and your wallet card to the address listed above.

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Sincerely,

A handwritten signature in black ink, appearing to read 'Lisa King', written over the word 'Sincerely,'.

Lisa King, Regulatory Officer
Office of Program Compliance
Division of Certificate of Need and
Licensing
New Jersey Department of Health

LK/jn
DATE: October 12, 2018
Certified Mail: 7012 2210 0000 7407 4993
US FIRST CLASS MAIL