

State of New Jersey DEPARTMENT OF HEALTH

PO BOX 358 TRENTON, N.J. 08625-0358

www.nj.gov/health

JUDITH M. PERSICHILLI, RN, BSN, MA Commissioner

February 4, 2020

Tosha Morant

PHILIP D. MURPHY

Governor

SHEILA Y. OLIVER

Lt. Governor

RE: Notice of Revocation of Nurse Aide Certificate

Dear Ms. Morant,

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 (42 <u>CFR</u> § 483, et al.) to ensure that nurse aides have the education and clinical skills necessary to care for residents of long-term care facilities. These regulations also require that each State maintain a nurse aide Registry, which pursuant to 42 <u>CFR</u> § 483.156(c)(1)(iv), must contain all substantiated findings by the State of abuse, neglect or misappropriation of resident property by a certified nurse aide.

The Office of Program Compliance of the New Jersey State Department of Health ("Department") was notified of credible evidence that on or about May 1, 2019 while you were employed as a nurse aide at Wiley Mission in Marlton, New Jersey, you neglected a resident of the facility. Specifically, it is alleged that you placed a resident, who was at a high risk for falls, on a toilet and left her alone on the toilet for more than 30 minutes before returning to check on her, and in doing so, your actions caused the resident pain and resulted in injuries, including a fracture to her lumbar spine, as a result of the resident falling onto the floor during the time she was alone on the toilet. Your actions constitute neglect of a resident in accordance with the federal definitions under 42 <u>C.F.R.</u> 483.5.

Further, a Notice of Right to Hearing letter was mailed to you on November 18, 2019 and, not having received a request for a hearing, be advised that the Department has revoked your nurse aide certification on the New Jersey Registry. Please forward your nurse aide certificate and nurse aide wallet card to the address below, as they are no longer valid.

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 statement, you must do so within 20 days of receipt of this letter. Your letter should reference "Notice of Revocation of Nurse Aide Certificate". Please mail this statement to:

Office of Program Compliance-Reporting P O Box 358 Trenton, NJ 08625-0358

Further, since this matter involves an act of resident neglect, a finding of neglect will be placed next to your name on the Registry pursuant to 42 <u>U.S.C.</u> §1395 i-3 (g)(D). You have the right to make a written request to this Department to remove the finding of neglect from the Registry one (1) year after the date of the original placement. If your request to remove the finding of neglect is granted by the Department, the finding of neglect is then removed from the Registry by the Department. If you fail to make a written request to the Department to remove the finding of neglect from the Registry, the finding of neglect will remain on the Registry permanently.

Should you have any questions about this matter, kindly contact me at the telephone number below.

Sincerely,

Lisa King, M.S., J.D.

Program Manager

Office of Program Compliance Certificate of Need and Licensing

(609) 376-7742

LK: jac CERTIFIED MAIL: Return Receipt Requested US FIRST CLASS MAIL