

State of New Ilersev DEPARTMENT OF HEALTH

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

Governor www.ni.gov/health SHEILA Y. OLIVER

JUDITH M. PERSICHILLI, RN, BSN, MA Commissioner

December 17, 2021

VIA REGULAR and EMAIL (btutputnam@sladvisors.net) Barbara Tutputnam, COO Fox Trail Senior Living at Deptford 1674 Delsea Drive Deptford, NJ 08096

RE:

Curtailment of Admissions and Directed Plan of Correction Order Fox Trail Senior Living at Deptford

Facility ID# NJ35A000

Dear Ms. Tutputnam:

PHILIP D. MURPHY

Lt. Governor

This letter confirms the telephone call of December 13, 2021 between you and the Department of Health, Office of Program Compliance (Department), wherein you were ordered to curtail all admissions and the Certified Medical Aide program (CMA) at Fox Trail Senior Living at Deptford (Fox Trail Senior Living), Facility ID# NJ35A000, effective immediately. The Department is also ordering a Directed Plan of Correction (DPOC) requiring Administrator and Registered Nurse (RN) consultants who each will be required to work on site for at least 40 hours per week.

This action is in accordance with N.J.S.A. 26:2H-1 et seq., N.J.A.C. 8:43E, N.J.A.C. 8:36-1 et seq., and is based on a recommendation from Survey staff after the Survey team visited the site on a Complaint survey and found significant deficiencies posing an immediate and serious threat of harm to residents.

The conditions found posing serious health, safety, and welfare hazards to staff and potential patients include, but are not limited to:

- 1. The facility failed to have a universal transfer form and health service plan for one resident sent to the hospital who returned with an indwelling catheter. See N.J.A.C. 8:43E-13.4(d)
- The facility Administrator failed to implement the policies of the facility. See N.J.A.C. 8:36-3.1(a)

- 3. The facility failed to conduct a Registered Nurse (RN) assessment upon admission to the facility. See N.J.A.C. 8:36-7.1(a)
- 4. The facility failed to develop a health service plan for a resident readmitted with an indwelling catheter. See N.J.A.C. 8:36-7.3(b)
- 5. The facility had no documented evidence of general or health service plans in the medical record for several residents. See N.J.A.C. 8:36-7.3(b)
- 6. The facility failed to assess a resident upon readmission from the hospital. See N.J.A.C. 8:36-7.4(c)
- 7. The facility staff failed to notify the RN of a resident's change in condition. See N.J.A.C. 8:36-7.5(c)
- 8. The facility failed to notify the physician of a resident's change in condition. See N.J.A.C. 8:36-7.5(d)
- 9. The facility failed to have an RN available 24/7 for a two day period when a resident was sent out to the hospital and readmitted with an indwelling catheter. See N.J.A.C. 8:36-8.2
- 10. The facility failed to ensure entries on the nurses' shift to shift narcotic count signature record. See N.J.A.C. 8:36-11.7(k)
- 11. The facility failed to document evidence of incidents, including falls, in the residents' medical record. See N.J.A.C. 8:36-15.6(b)
- 12. The facility failed to properly dispose of nasal swabs that had been used for COVID testing. See N.J.A.C. 8:36-18.6(a)
- 13. The facility failed to document the notification of family members of a resident's change in condition. See N.J.A.C. 8:36-5.15(b)

You will receive a complete inspection report detailing all deficiencies.

The Administrator and Registered Nurse consultants must be approved in advance by the Department and resumes must be submitted to Lisa.King@doh.nj.gov and Donna.Koller@doh.nj.gov by close of business on December 21, 2021. The approved Administrator and RN consultants shall be retained no later than the close of business, December 23, 2021. The contract with the consultants shall include provisions for immediate corrective action with applicable state licensing standards. The consultants shall have no previous or current ties to the facility's principals, management and/or employers or other related individuals of any kind, including, but not limited to employment, business, or personal ties. The Administrator shall submit weekly progress reports, signed by each consultant, beginning on December 30, 2021, and continuing each Friday thereafter. The progress reports shall be submitted to Donna.Koller@doh.nj.gov.

The curtailment and DPOC shall remain in place until the Facility is otherwise notified in writing by a representative of this Department. Department staff will monitor Facility compliance with this order to determine whether corrective measures are implemented by the Facility in a timely fashion.

Please be advised that N.J.A.C. 8:43E-3.4(a)(2) provides for a penalty of \$250 per day for each resident at the facility in violation of this curtailment order. Please also be

advised that you may be subject to other enforcement remedies in addition to the curtailment order.

FORMAL HEARING

Fox Trail Senior Living is entitled to a prompt formal hearing at the Office of Administrative law (OAL) to challenge the curtailment.

Fox Trail Senior Living must advise the Department within 30 days of this letter to request an OAL hearing regarding this matter. Please forward your OAL hearing request to:

Attention:

OAL Hearing Requests

Office of Legal and Regulatory Compliance, Room 805

New Jersey State Department of Health

P.O. Box 360

Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Fox Trail Senior Living is owned by a corporation, it must be represented by counsel.

If Fox Trail Senior Living requests an OAL hearing regarding this matter, the facility is further required to submit a written response to each charge specified in this order, which shall accompany your request for a hearing.

If you have any questions regarding this curtailment, you may contact me at the below email address.

Sincerely,

Gene Rosenblum, Director
Office of Program Compliance
Division of Certificate of Need and

Licensing

New Jersey Department of Health Gene.Rosenblum@doh.nj.gov

GR/mdj Control # AX21029

Cc: Nursing Home Administrators Licensing Board Frank Skrajewski, Long Term Care Licensing

Donna Koller, Long Term Care Survey & Certification
Pamela Lebak, Long Term Care Survey & Certification
Bonnie G. Stevens
Kiisha Johnson