

and failure to ensure nursing services were appropriately led by a Registered Nurse. Additional findings included failure to ensure medication administration and medical regimens were carried out in accordance with physician orders and applicable New Jersey Board of Nursing requirements, as well as failure to implement policies addressing verbal and standing orders. Surveyors also identified repeated infection control deficiencies, including failure to ensure Operating Room cleaning and disinfection in accordance with CDC guidelines, failure to perform hand hygiene per CDC recommendations, and failure to ensure patient care equipment and environmental surfaces were properly cleaned and disinfected between patients. Further, the facility failed to adhere to AAMI standards and manufacturer Instructions for Use (IFU) related to instrument reprocessing, sterilization documentation, and Biological Indicator (BI) testing, resulting in Immediate Jeopardy (IJ) findings at the federal level, which were mirrored in the state findings. These deficiencies reflect a breakdown in infection prevention controls, clinical oversight, and regulatory compliance, compromising patient safety and demonstrating inadequate administrative and nursing leadership.

The Health Care Facilities Planning Act (N.J.S.A. 26:2H-1 et seq.) (the Act) provides a statutory scheme designed to ensure that all health care facilities are of the highest quality. Pursuant to the Act and N.J.A.C. 8:43E-1.1 et seq. (General Licensure Procedures and Standards Applicable to All Licensed Facilities), the Commissioner of Health is authorized to inspect all health care facilities and to enforce the Manual of Standards for Licensing of Ambulatory Care facilities set forth at N.J.A.C. 8:43A-1.1 et seq.

LICENSURE VIOLATIONS & MONETARY PENALTIES

Staff from the Department's Health Facility Survey and Field Operations visited Cherry Hill Women's Center for the purpose of conducting a federal Recertification and State Re-Licensure survey. The facility violated N.J.A.C. 8:43A-3.6(a)(7), N.J.A.C. 8:43A-6.7, N.J.A.C. 8:43A-8.2, N.J.A.C. 8:43A-8.4(a), N.J.A.C. 8:43A-9.4(b), and multiple infection prevention and sterile processing regulations under N.J.A.C. 8:43A-12.6, 14.3, 14.4, 14.5, and 17.4, which collectively require safe nursing oversight, compliance with physician orders, proper infection control practices, and adherence to AAMI and CDC standards. Several of these deficiencies resulted in Immediate Jeopardy (IJ) determinations at the federal level, which were mirrored in state findings.

During the surveys, investigators identified systemic failures in nursing leadership and clinical oversight, including the facility's failure to ensure Nursing Services were directed by a Registered Nurse, failure to implement policies addressing employee performance evaluations, and failure to establish procedures for verbal and standing orders. Additionally, surveyors found that nursing staff did not consistently follow physician orders or New Jersey Board of Nursing requirements in the administration of care, demonstrating a breakdown in clinical governance and accountability. The investigation further revealed repeated and significant infection prevention and sterile processing deficiencies. These included failure to remove expired supplies from active use, improper cleaning and disinfection of the Operating Room consistent with CDC guidance, and failure to ensure appropriate hand hygiene practices. Surveyors also identified widespread noncompliance with AAMI standards and manufacturer Instructions for Use (IFU) in instrument reprocessing, including inaccurate sterilization records, improper completion of Biological Indicator (BI) testing, and failure to follow IFU for cleaning solutions and high-level disinfectants.

These deficiencies contributed to Immediate Jeopardy findings related to sterilization and infection control processes, indicating a serious risk to patient safety.

Based on these findings, the Department determined that Cherry Hill Women's Center repeatedly failed to comply with regulatory requirements governing nursing services, infection prevention, and sterile processing. The facility's inability to maintain adequate clinical oversight, enforce infection control standards, and ensure compliance with established protocols demonstrated systemic breakdowns in leadership, regulatory compliance, and patient safety safeguards.

These are representative findings and do not necessarily include all survey findings, which will be detailed in the survey report.

DIRECTED PLAN OF CORRECTION:

- a. Cherry Hill Women's Center shall retain the full-time services of a Consultant Director of Nursing who is a Registered Nurse (RN). The Consultant DON must be approved by the Department, and must at least meet the requirements of N.J.A.C. 8:43A-1.10 (Qualifications of the Director of Nursing Services) and, in addition, have experience specific to ambulatory surgical centers. The facility shall provide the Department with the name and resume by 12:00 noon on May 5, 2026. The resume should be sent to Charlene.Valenta@doh.nj.gov, Kimberly.Hansen@doh.nj.gov, Denise.Gorski-galla@doh.nj.gov, Lisa.Kiernan@doh.nj.gov, Myhra.Protusada@doh.nj.gov, Jannelie.Claudio@doh.nj.gov, Gene.Rosenblum@doh.nj.gov, and Lisa.King@doh.nj.gov. The consultant 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 consultant DON shall be on-site for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The approved Consultant Director of Nursing shall be retained no later than the close of business, May 6, 2026. They shall be responsible for ensuring that immediate corrective action is taken to ensure resident safety is not jeopardized and applicable state licensing standards are met.
- b. Retain the full-time, on-site services of a Director of Nursing who meets the requirements of N.J.A.C. 8:43A-1.10 (Qualifications of the Director of Nursing Services).
- c. The facility should send weekly progress reports every Friday by 1:00 p.m. to Charlene.Valenta@doh.nj.gov, Kimberly.Hansen@doh.nj.gov, Denise.Gorski-galla@doh.nj.gov, Lisa.Kiernan@doh.nj.gov, Myhra.Protusada@doh.nj.gov. These weekly reports shall include timely status updates regarding:
 1. Identified areas of non-compliance;
 2. Corrective measures to address identified areas of non-compliance; and,
 3. Status of corrective measures implementation.

In addition, the facility is directed to maintain timely communication with the Department, as may be required.

This enforcement action is taken in accordance with the provisions set forth at N.J.A.C. 8:43E-2.4 (Plan of Correction) and 3.1 (Enforcement Remedies Available).

Please be advised that this DPOC shall remain in place until Cherry Hill Women's Center is otherwise notified by the Department.

Department staff will monitor compliance with this notice to determine whether corrective measures are implemented in a timely fashion. Failure to comply with these and any other applicable requirements, as set forth in pertinent rules and regulations, will result in the imposition of further enforcement remedies, including but not limited to, civil monetary penalties, and may include summary suspension and/or license revocation.

FORMAL HEARING

Cherry Hill Women's Center is entitled to contest the Directed Plan of Correction, pursuant to N.J.S.A. 26:2H-14, by requesting a formal hearing at the Office of Administrative Law (OAL). Cherry Hill Women's Center must advise this Department within 30 days of the date of this letter if it requests an OAL hearing regarding the Directed Plan of Correction.

Please forward your OAL hearing request to:

Attention: OAL Hearing Requests
Office of Legal and Regulatory Compliance, New Jersey Department of Health
P.O. Box 360
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Cherry Hill Women's Center is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Cherry Hill Women's Center is further required to submit a written response to each and every charge as specified in this notice, which shall accompany its written request for a hearing.

Failure to submit a written request for a hearing within 30 days from the date of this notice will render this a final agency decision. The final agency order shall thereafter have the same effect as a judgment of the court. The Department also reserves the right to pursue all other remedies available by law.

Due to the emergent situation and the immediate and serious risk of harm posed to the patients, the Department will not hold the Directed Plan of Correction in abeyance during any appeal of the Directed Plan of Correction.

Thank you for your attention to this important matter and for your anticipated cooperation. If you have any questions concerning the Directed Plan of Correction, please contact Lisa King, Office of Program Compliance, at (609) 376-7890.

Sincerely,

A handwritten signature in blue ink, appearing to read "Gene Rosenblum". The signature is fluid and cursive, with a long horizontal stroke at the end.

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

GR:LK:jc:nj

DATE: April 30, 2026

REGULAR AND CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Control# AX26003