

State of New Jerzey DEPARTMENT OF HEALTH PO BOX 358 TRENTON, N.J. 08625-0358

www.nj.gov/health

:

:

:

JEFFREY A. BROWN Acting Commissioner

In Re Licensure Violation:

Oakland Rehabilitation and Care Center

(NJ Facility ID# NJ60223)

CURTAILMENT OF ADMISSIONS ORDER AND DIRECTED PLAN OF CORRECTION

TO: Jean Monnecka, Administrator Oakland Rehabilitation and Care Center 20 Breakneck Road Oakland, New Jersey 07436

Dear Ms. Monnecka:

As you were notified orally on June 4, 2025, effective upon the facility's notification, the Department of Health (hereinafter, "the Department") ordered the curtailment of new admissions and a Directed Plan of Correction to Oakland Rehabilitation and Care Center (hereinafter "Oakland Rehabilitation"). This enforcement action was taken in accordance with the provisions set forth at <u>N.J.A.C.</u> 8:43E-3.1 (Enforcement Remedies available) and <u>N.J.A.C.</u> 8:43E-3.6 (Curtailment of Admissions) in response to serious deficiencies observed by Department staff at Oakland Rehabilitation during its on-site inspection.

The Health Care Facilities Planning Act (<u>N.J.S.A.</u> 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 <u>N.J.A.C.</u> 8:43E-1.1 et seq., General Licensure Procedures and Standards Applicable to All Licensed Facilities, the Department's Commissioner is authorized to inspect all health care facilities and to enforce the Standards for Licensure of Long-Term Care Facilities set forth at <u>N.J.A.C.</u> 8:39-1.1 et seq.

LICENSURE VIOLATIONS:

Federal Violations

Staff from the Department's Health Facility, Survey and Field Operations (HFS&FO) unit were on-site at Oakland Rehabilitation from May 22, 2025, through May 30, 2025, for a recertification, complaint investigation, life safety code and state licensure survey. During this survey, the surveyors identified multiple violations, including, but not limited to, the following:

The following federal deficiency was cited under Facility Hiring and Use of Nurse. The facility failed to ensure that,

PHILIP D. MURPHY Governor

TAHESHA L. WAY Lt. Governor

- 1. A non-certified nurse aide received the required training and competencies needed prior to receiving his or her own assignment and rendering of resident care. Such care includes, but is not limited to, bathing, toileting, transferring, feeding, personal hygiene, and grooming; and
- 2. Nurse aides worked less than or equal to the 120-day ceiling for nurse aides without certification.

The additional federal deficiency was cited under Administration.

Here, the administrator failed to ensure that the facility was administered in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident. Specifically, the facility's Licensed Nursing Home Administrator (LNHA) failed to ensure that she and staff implemented the facility's policies and procedures, including,

- 1. The hiring and utilization of non-certified nurse aides to ensure they were trained with the appropriate competencies and completed modules prior to receiving their own independent resident care assignments, and
- 2. The employment of nurse aides for less than or equal to the 120-day ceiling for nurse aides without certification.

Other Violations

In addition to the above violations, the surveyors found that the facility failed to have enough staff on multiple days.

CURTAILMENT OF ADMISSIONS:

The Department hereby orders the curtailment of new admissions to Oakland Rehabilitation effective June 4, 2025, upon oral notification to the facility via telephone call.

Please be advised that <u>N.J.A.C.</u> 8:43E-3.4(a)(2) provides for a penalty of \$250.00 per day for each resident admitted to the facility in violation of this curtailment order.

DIRECTED PLAN OF CORRECTION:

The facility must retain the full-time, on-site services of an Administrator Consultant in accordance with <u>N.J.A.C.</u> 8:34-1.1 et seq., who shall be responsible for consultation services concerning the day-to-day operations of the facility. The Administrator Consultant must be approved by the Department. The facility shall provide the name and resume of the proposed Administrator Consultant by submitting the name and resume to Kara.Morris@doh.nj.gov, Carol.Hamill@doh.nj.gov, Christina.Farkas@doh.nj.gov, Veronica.Parent@doh.nj.gov, Gene.Rosenblum@doh.nj.gov, Lisa.King@doh.nj.gov, and Steven.Smalls@doh.nj.gov, by 12:00 noon on Thursday, June 12, 2025. The Administrator Consultant shall be present in the facility for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The approved Administrator Consultant shall be retained and begin work no later than the close of business, on Monday, June 16, 2025. 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 Administrator Consultant and facility shall submit weekly progress reports, beginning on Friday, June 20, 2025, and continuing each Friday thereafter. The progress reports shall be submitted to carol.fogarty@doh.nj.gov and kara.morris@doh.nj.gov.

The Administrator Consultant shall:

- 1. Assess the facility's compliance with all applicable state licensing standards and identify areas of non-compliance;
- 2. Oversee the development, implementation, and evaluation of corrective action plans;
- 3. Develop and implement compliance management systems at the facility;
- 4. Collaborate with facility leadership to ensure that operating procedures, systems, and standards align with compliance requirements;
- 5. Ensure staff training needed to comply with applicable licensing standards; and
- 6. Take other actions as may be necessary to ensure the identification of compliance issues and implementation of timely corrective measures.

The weekly progress reports by the Administrator Consultant and the facility should be sent every Friday by 1:00 p.m. to carol.fogarty@doh.nj.gov and kara.morris@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.

Oakland Rehabilitation shall also 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. The facility shall provide the Department with the name and resume by 12:00 noon, on Thursday, June 12, 2025. The resume should be sent to Kara.Morris@doh.nj.gov, Carol.Hamill@doh.nj.gov,

Christina.Farkas@doh.nj.gov, Veronica.Parent@doh.nj.gov, Gene.Rosenblum@doh.nj.gov, Lisa.King@doh.nj.gov, and Steven.Smalls@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 and begin work no later than the close of business, on Monday, June 16, 2025. That person shall be responsible for ensuring that immediate corrective action is taken to verify that resident safety is not jeopardized, and applicable state licensing standards are met.

The Curtailment and the 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. Failure to comply with these and any other applicable requirements, as set forth in pertinent rules and regulations, may result in the imposition of additional enforcement actions, including penalties.

Please be advised that you may be subject to other enforcement remedies in addition to this order.

FORMAL HEARING:

Oakland Rehabilitation is entitled to contest the curtailment, pursuant to <u>N.J.S.A.</u> 26:2H-14, by requesting a formal hearing at the Office of Administrative Law (OAL). Oakland Rehabilitation may request a hearing to challenge any of the following: the factual survey findings and/or the curtailment. Oakland Rehabilitation must advise this Department within 30 days of the date of this letter if it requests an OAL hearing regarding the curtailment.

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 Oakland Rehabilitation is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Oakland Rehabilitation is further required to submit a written response to every charge as specified in this notice, which shall accompany its written request for a hearing.

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

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.

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

Sincerely

Lisa King, Program Manager Office of Program Compliance Division of Certificate of Need and Licensing

LK:SS

DATE: June 9, 2025 E-MAIL (jmonnecka@oaklandrehabhc.com) REGULAR AND CERTIFIED MAIL RETURN RECEIPT REQUESTED Control # X25143