

## State of New Jersey DEPARTMENT OF HEALTH

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

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER Lt. Governor www.nj.gov/health

JUDITH M. PERSICHILLI, RN, BSN, MA Commissioner

IN RE: LICENSURE VIOLATION

NOTICE OF

:

ASSESSMENT OF

NJ Facility ID #: NJ65A002

PENALTIES

TO: Jane McDonnell, Administrator The Residence at Stafford 1275 Route 72

Manahawkin, NJ 08050

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 the Department of Health (the "Department") is authorized to inspect all health care facilities and to enforce the Standards for Licensure of Assisted Living Facilities set forth at N.J.A.C. 8:36-1.1 et seq.

## LICENSURE VIOLATIONS & MONETARY PENALTIES:

Staff from the Department (Department) visited The Residence at Stafford (formerly Atria Stafford) ("Facility") on January 13, 2022, for the purpose of conducting a complaint survey. The report of this visit, which is incorporated herein by reference, revealed the following licensure violations:

1. The Facility was in violation of N.J.A.C. 8:36—11.4(b)-Administration of Medications – Survey Tag A0935. The former Executive Director (ED) administered medications to residents without a license, certification, training, or qualifications to do so. Based on interviews and records reviewed it was determined that the former ED of the Facility administered physician prescribed medications for 15 of 37 residents reviewed for medication administration, Resident #'s 1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, and 16. The deficient practice placed each resident at risk for injury or harm.

The Electronic Medication Administration Records (EMARs) showed that the former ED initialed the records to document administration of medications and/or treatments to each of the 15 residents. The ED also gave Acetaminophen to Resident #16 on September 4, 2021. A physician ordered the medication to be given on an as needed basis for mild pain at a level of 1-5. Medications that are given on an as needed basis require a Registered Nurse assessment. The

former ED documented on the EMAR that Resident #16 had back pain at level 10 on a pain scale of 1-10, with 10 being the most severe pain. Because the level of pain was above the level of pain for which Acetaminophen was prescribed, the prescriber was required to be notified that the resident's pain was greater than mild, and an intervention was needed.

On January 12, 2022, Surveyor #1 interviewed the Regional Director of Operations (RDO) regarding the medications administered by the former ED. The RDO stated that the former ED was not qualified to administer medications because the ED only held a Certified Assistant Living Administrator (CALA) certification.

On January 12, 2022 Surveyor #1 interviewed a Graduate Practical Nurse (GPN) Facility staff member. The GPN was present when the former ED administered medications to the residents. The GPN stated that he received training to be a Licensed Practical Nurse, but he had not yet received his license at the time the former ED administered the medications. According to the GPN, the former ED requested that he perform the medication pass because the Facility was short staffed on September 4, 2021. The GPN stated he refused to do so because he was not yet licensed. However, he stated that the former ED accessed the EMAR and administered medications to the residents on the second floor of the Facility while he read off the medications.

In accordance with <u>N.J.A.C.</u> 8:43E-3.4(a)(8), because the violations were related to patient care, and represented a direct risk to the Facility's residents' physical or mental health, \$1,000 per violation is assessed for these fifteen violations, amounting to \$15,000.

2. The Facility was in violation of N.J.A.C. 8:36-5.10(a)(2) General Requirements—Survey Tag 563. Based on interviews and Facility record review, Survey determined that the Facility failed to notify the Department of Health (DOH) when the Facility's former Executive Director (ED), who was not qualified to administer medications, administered medications to residents. The Facility also failed to develop and implement a policy and procedure to address reportable events to outside agencies. The deficient practice was observed for 15 of 37 residents reviewed for medication administration, Resident #'s 1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, and 16.

On January 13, 2022 Surveyor #3 interviewed the current ED and asked if the Facility reported to the DOH that the former ED administered medications without being qualified to do so. The current ED confirmed that the Facility did not report the September 4, 2021 incident to the DOH. The RDO then confirmed that the Facility's Incident Reporting and Recording policy provided to the surveyor was only for internal reporting, and it did not include reporting to outside agencies.

In accordance with N.J.A.C. 8:43E-3.4(a)(7), because the violations were related to patient care, and represented a risk to the health, safety, or welfare of residents at the Facility and such deficiencies are isolated or occasional and do not represent a pattern or widespread practice throughout the Facility, \$500 per violation is assessed for the failure to report and failure to develop and implement a policy and procedure to address reportable events to outside agencies, amounting to \$1,000.

These violations pertain to the care of residents using the services at The Residence at Stafford. In accordance with N.J.S.A. 26:2H-13 and N.J.A.C. 8:43E-3.4(a), The Residence at Stafford is hereby assessed penalties amounting to \$16,000.

The total amount of this penalty is required to be <u>paid within 30 days of receipt of this letter by certified check or money order</u> made payable to the "Treasurer of the State of New Jersey" and forwarded to Office of Program Compliance, New Jersey Department of Health, P.O. Box 358, Trenton, New Jersey 08625-0358, Attention: Lisa King. On all future correspondence related to this Notice, please refer to Control X21051.

## **INFORMAL DISPUTE RESOLUTION (IDR):**

N.J.A.C. 8:43E-2.3 provides facilities the option to challenge factual survey findings by requesting Informal Dispute Resolution with Department representatives. Facilities wishing to challenge only the assessment of penalties are not entitled to IDR review, but such facilities may request a formal hearing at the Office of Administrative Law as set forth herein below. IDR requests **must be made** in writing within ten (10) business days from receipt of this letter and must state whether the Facility opts for a telephone conference, or review of Facility documentation only. The request must include an original and ten (10) copies of the following:

- · The written survey findings;
- A list of each specific deficiency the Facility is contesting;
- · A specific explanation of why each contested deficiency should be removed; and
- Any relevant supporting documentation.

Any supporting documentation or other papers submitted later than 10 business days prior to the scheduled IDR may not be considered at the discretion of the IDR panel.

## **FORMAL HEARING:**

The Residence at Stafford is entitled to a prompt formal hearing at the Office of Administrative Law (OAL) to challenge this assessment of penalties pursuant to N.J.S.A. 26:2H-13. The Residence at Stafford may request a hearing to challenge the assessment of penalties. The Residence at Stafford must advise this Department within 30 days of receipt of this letter if it requests an OAL hearing regarding this matter.

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 The Residence at Stafford is owned by a corporation, representation by counsel is required by law.

In the event of an OAL hearing regarding this matter, The Residence at Stafford is further required to submit a written response to every charge specified in this Notice, which shall accompany your written request for a hearing.

Be advised that Department staff will monitor Facility compliance with this Notice to determine whether corrective measures are implemented by the Facility and whether assessed penalties are paid 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 penalties.

In accordance with N.J.A.C. 8:43E-3.5(c)(1), failure to submit a written request for a hearing within 30 days from the date of receipt of this notice will render this a final agency decision assessing the amount of the penalty, which shall then become due and owing. Further, at the request of the Department, the Clerk of the Superior Court or the Clerk of the Superior Court, Law Division, Special Civil Part, shall record the final order assessing the penalty on the judgment docket of the court, in accordance with N.J.S.A. 2A:58-10. The final agency decision shall thereafter have the same effect as a judgment of the court.

Sincerely,

Gene Rosenblum, Director
Office of Program Compliance

LK:mdj DATE: November 14, 2022 REGULAR AND CERTIFIED MAIL: RETURN RECEIPT REQUEST Control # X21051