



State of New Jersey
DEPARTMENT OF HEALTH

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

www.nj.gov/health

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

JEFFREY A. BROWN
Acting Commissioner

November 6, 2025

VIA CERTIFIED MAIL RRR

Aura Barroso



**Re: Notice of Revocation for Nurse
Aide Certification**

Aura Barroso vs. New Jersey
Department of Health
Certification No: NA8391938
Agency Reference No. OPC 25-15616

Dear Ms. Barroso:

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 to ensure that nurse aides have the education and clinical skills necessary to care for residents of long-term care facilities. See 42 C.F.R. Part 483. These regulations also require that each State maintain a nurse aide Registry, which, pursuant to 42 C.F.R. 483.156(c)(1)(iv), must contain all substantiated findings by the State of resident mistreatment, abuse, neglect, or misappropriation of resident property by a certified nurse aide.

The Certification Program of the New Jersey State Department of Health (Department) was notified of the results of an investigation in which there was sufficient information that you committed acts of neglect when you failed to check on your resident after 11:00 am and did not complete your required rounds after lunch or prior to the end of your shift.

The incident occurred on July 3, 2025, while you were employed as a certified nurse aide at Rose Garden Nursing and Rehabilitation in Toms River, New Jersey. Specifically, an

investigation revealed that you neglected a long-term care resident under your supervision. You were assigned to care for a resident during your 7:00 a.m. to 3:00 p.m. shift. However, after 11:00 a.m., you failed to check in on the resident and did not complete your required rounds after lunch or prior to the end of your shift. As a result, you did not notice that the resident had been taken outside to the patio at approximately 12:50 p.m. and remained there unsupervised for an extended period. At approximately 3:20 p.m., the resident was found on the patio in her wheelchair, exhibiting signs of lethargy. She was transferred to the hospital, where she was admitted for dehydration and elevated troponin levels. Your failure to monitor and account for the resident's whereabouts contributed to the incident and reflects a neglect of duty in providing appropriate care. Your actions constitute neglect in accordance with the federal definitions under 42 C.F.R. 483.5.

The Department issued a Right to Hearing Notice on October 9, 2025. You waived your right to a hearing on October 27, 2025.

Therefore, in accordance with 42 C.F.R. 483.156(c)(1)(iv), please be advised that a finding of neglect will be placed next to your name on the Registry and will remain on the Registry for a minimum of one year. Please also be advised that your certification is hereby revoked.

Please surrender your nurse aide certificate and wallet card to:

Office of Program Compliance-Reporting
120 South Stockton Street, 3rd Floor
Trenton, NJ 08625-0358

The certificate and the wallet card are no longer valid, and the status of your nurse aide certification is now revoked.

Please be advised that pursuant to N.J.A.C. 8:39-43.1(a)(1), only individuals who maintain a currently valid nurse aide certificate and are registered in good standing on the Registry are considered by the Department to be competent to work as a certified nurse aide in a licensed long term care facility. A certified nurse aide is no longer registered in good standing if a finding of abuse, neglect or misappropriation by the certified nurse aide's name is included on the Registry. Therefore, you are prohibited from employment as a certified nurse aide when a finding of neglect remains next to your name on the Registry.

In accordance with 42 C.F.R. 483.156 and N.J.A.C. 8:39-43.7, 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 written statement, you must do so within 20 days of the date of this letter. Your letter should reference "Notice of Revocation of Nurse Aide Certificate: Contested Findings."

Please forward this statement to the Office of Program Compliance-Reporting along with your nurse aide certification and your nurse aide wallet card to the address listed above.

Sincerely,



Lisa King, Program Manager
Office of Program Compliance Division of
Certificate of Need and Licensing
New Jersey Department of Health

LK:JC

Date: November 6, 2025

CERTIFIED MAIL:

Return Receipt Requested

US FIRST CLASS MAIL