



State of New Jersey
DEPARTMENT OF HEALTH

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Lt. Governor

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JEFFREY A. BROWN
Acting Commissioner

In Re Licensure Violation:

ASHBROOK CARE & REHABILITATION CENTER
(NJ Facility ID# NJ62002)

DIRECTED PLAN OF CORRECTION

TO: Alexa Bohinek, Administrator
Ashbrook Care & Rehabilitation Center
1610 Raritan Road
Scotch Plains, New Jersey 07076
abohinek@autumnhc.net

As more fully detailed below, the New Jersey Department of Health (the Department) is issuing to Ashbrook Care & Rehabilitation Center (Ashbrook) a Directed Plan of Correction due to violations identified by Department surveyors that constitute an immediate and serious risk of harm to facility residents.

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 Standards for Licensure of Long-Term Care Facilities set forth at N.J.A.C. 8:39-1.1 et seq.

LICENSURE VIOLATIONS

Staff from the Department's Health Facility, Survey and Field Operations (HFS&FO) unit were on-site at Ashbrook from May 4, 2025, through May 9, 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 facility failed to protect a resident, as well as all residents from abuse, when an alert and oriented resident with a history of being abused reported an allegation of sexual abuse to staff that was not investigated.
- The facility failed to report within two hours to the Department an allegation of sexual abuse after a resident reported to the Registered Nurse/Unit Manager that sometime at the end of December 2024 or January 2025 two female staff members inappropriately touched their buttocks.

- The facility failed to initiate and complete a thorough investigation for an allegation of sexual abuse, after a resident informed staff that two female staff members inappropriately touched their buttocks.
- The facility's administrator failed to ensure that the administrator and facility staff implemented the facility's abuse policies and procedures to ensure resident safety and well-being by a.) ensuring all residents were protected from abuse; b.) ensuring an allegation of sexual abuse was thoroughly investigated; and c.) reporting an allegation of sexual abuse to the Department.

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

As a result of these violations, all residents in the facility are at an immediate and serious risk of harm.

DIRECTED PLAN OF CORRECTION

The Commissioner of the Department of Health hereby directs the following plan of correction.

- a. The facility must retain the full-time, on-site services of an Administrator Consultant who is a New Jersey Licensed Nursing Home Administrator. 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 identification of compliance issues and implementation of timely corrective measures.
- b. The facility must retain the full-time, on-site services of a Registered Nurse to begin providing services to the facility as a consultant Director of Nursing.

The two consultants shall be approved in advance by the Department. The facility shall provide the names and resumes of the proposed consultants by sending them to Kara.Morris@doh.nj.gov, Carol.Hamill@doh.nj.gov, Christina.Farkas@doh.nj.gov, Christine.Farfalla@doh.nj.gov, Veronica.Parent@doh.nj.gov, Gene.Rosenblum@doh.nj.gov, Lisa.King@doh.nj.gov, and Jean.Markey@doh.nj.gov by close of business on June 9, 2025. The approved consultants shall be retained and begin work no later than the close of business on June 13, 2025. 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 consultants shall be present in the facility for no less than 40 hours per week until further notice from the Department, with documented coverage of all shifts and weekends.

The facility should send weekly progress reports every Friday by 1:00 p.m. to Kara.Morris@doh.nj.gov, Carol.Hamill@doh.nj.gov, Christina.Farkas@doh.nj.gov, Christine.Farfalla@doh.nj.gov, Veronica.Parent@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) in response to serious violations observed by Department staff in Ashbrook during its on-site inspection as detailed above.

Department staff will monitor facility compliance with this order to confirm compliance with this order and Directed Plan of Correction and 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 penalties.

The Directed Plan of Correction shall remain in place until the facility is otherwise notified in writing by a representative of this Department.

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 Lisa.King@doh.nj.gov.

Sincerely,



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

LK:JLM:eg
DATED: June 4, 2025
E-MAIL
Control #X25131

C. Order Distribution List