



State of New Jersey
DEPARTMENT OF HEALTH

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www.nj.gov/health

PHILIP D. MURPHY
Governor

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Lt. Governor

JUDITH M. PERSICHILLI, RN, BSN, MA
Commissioner

December 13, 2021

VIA REGULAR and EMAIL
(yakovbasmanov@gmail.com)

Yakov Jon Basmanov
Mi Casa Su Casa II, Inc.
6120 Buchanan Place
P.O. Box 4074
West New York, NJ 07093

**RE: Curtailment of Admissions/Services
Order
Mi Casa Su Casa II, Inc.
Facility ID# NJ09001**

Dear Mr. Basmanov:

This letter confirms the telephone call of December 10, 2021 between you and the Department of Health, Office of Program Compliance (Department), wherein you were **ordered to curtail all admissions/services at Mi Casa Su Casa II, Inc., Facility ID# NJ09001, effective immediately.** This Order shall remain in effect until the facility develops an acceptable plan of correction and the Department determines to allow you to resume services at the facility.

This action is in accordance with N.J.S.A. 26:2H-1 et seq., N.J.A.C. 8:43E, N.J.A.C. 8:43F, and is based on a recommendation from Survey staff after the Survey team visited the site on a Complaint survey and found significant deficiencies posing an immediate and serious threat of harm to patients.

The conditions found posing serious health, safety, and welfare hazards to staff and potential patients include, but are not limited to:

1. The facility failed to ensure that an Administrator and/or alternate Administrator was designated in writing and available on the premises at all times when participants were present because the Administrator was terminated on November 12, 2021, and the facility failed to make arrangements acceptable

to the Department for administrative supervision. See N.J.A.C. 8:43F-3.1 et seq.

2. On November 29, 2021, the Director of Nursing (DON) stated that she was the DON and was informed by the program Owner on November 15, 2021 that she was the acting Administrator in violation of the regulations requiring an Administrator and a separate person in the role of Director on Nursing. See N.J.A.C. 8:43F-3.1(a); N.J.A.C. 8:43F-7.1
3. On November 29, 2021 during a telephone interview with the facility's Owner, the surveyor inquired if the facility had a Medical Consultant. The owner stated that the facility has not had a Medical Consultant, who must be a physician, since the program re-opened on October 6, 2021. See N.J.A.C. 8:43F-8.2
4. On November 29, 2021 the surveyor interviewed the Assistant Social Worker (ASW) who stated that she had been employed by the facility since May of 2021. She told the surveyor that she worked under the former Licensed SW (LSW) whose last date of employment at the facility was November 12, 2021. The ASW confirmed that she was not NJ Board certified or licensed and explained that she was in the process of obtaining her Certificate of SW (CSW). The facility therefore failed to ensure social work services were provided by a licensed or board certified social worker. See N.J.A.C. 8:43F-12.1

You will receive an inspection report detailing the noted deficiencies.

Please be advised that N.J.A.C. 8:43E-3.4(a)(2) provides for a penalty of \$250 per day for each participant served at the facility in violation of this curtailment order. Please also be advised that you may be subject to other enforcement remedies in addition to the curtailment order.

FORMAL HEARING

Mi Casa Su Casa II, Inc. is entitled to a prompt formal hearing at the Office of Administrative law (OAL) to challenge the curtailment.

Mi Casa Su Casa II, Inc. must advise the Department within 30 days of this letter to request an OAL hearing regarding this matter. Please forward your OAL hearing request to:

Attention: OAL Hearing Requests
Office of Legal and Regulatory Compliance, Room 805
New Jersey State Department of Health
P.O. Box 360
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Mi Casa Su Casa II, Inc. is owned by a corporation, it must be represented by counsel.

If Mi Casa Su Casa II, Inc. requests an OAL hearing regarding this matter, the facility is further required to submit a written response to each charge specified in this order, which shall accompany your request for a hearing.

If you have any questions regarding this curtailment, you may contact me at the below email address.

Sincerely,



Lisa King, Program Manager
Division of Certificate of Need &
Licensing
New Jersey Department of Health
Lisa.King@doh.nj.gov

LK/mdj
Control # AX21009

Cc: Michael J. Kennedy
E. Brenycz
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