



State of New Jersey
DEPARTMENT OF HEALTH

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PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

KAITLAN BASTON, MD, MSc, DFASAM
Acting Commissioner

In Re Licensure Violation:	:	CURTAILMENT OF ADMISSIONS
	:	ORDER AND DIRECTED PLAN
PRINCETON CARE CENTER	:	OF CORRECTION
	:	
(NJ Facility ID# NJ61107)	:	
	:	
	:	
	:	
	:	

TO: Ezra Bogner, Administrator
Princeton Care Center
728 Bunn Drive
Princeton, New Jersey 08540
e.bogner@princetoncare.com

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 unit were on-site at Princeton Care Center from June 27, 2023, through July 13, 2023, for a complaint investigation. During the inspection, the surveyors identified 27 deficiencies on the federal health survey, including three widespread deficiencies causing no actual harm but with the potential for more than minimal harm that is not immediate jeopardy. Three of the 27 deficiencies constituted substandard quality of care in the areas of freedom from abuse, neglect and exploitation, quality of life and quality of care. See 42 C.F.R. §§483.12, 483.24 and 483.25. The surveyors also cited the facility for seven Life Safety Code deficiencies.

Based on observation, interview, record review and review of pertinent documents it was determined that the facility failed to develop and implement a comprehensive written abuse policy and procedures to ensure the identification and investigation of all types of potential abuse and a process was in place and followed to ensure staff reported all potential abuse. See 42 C.F.R. §483.12 (Freedom from Abuse, Neglect and Exploitation) and N.J.A.C. 8:39 (Standards for Licensure of Long Term Care Facilities).

Based on interview, medical record review, and review of other pertinent facility documentation, it was determined that the facility failed to a) have a system in place to ensure that staff could accurately identify a resident's code status in an emergency situation and b) follow a physician's order for code status. See 42 C.F.R. §483.24 (Quality of Life) and N.J.A.C. 8:39-14.2(b)(Advisory Staff Education and Training for Communication).

Based on observation, interview and review of facility documentation, it was determined that the facility failed to (a) ensure that staff were competent and appropriate care was provided for the hemodialysis (the filtration of waste when the kidneys are no longer able to do so) access sites, and staff were trained to differentiate between an AV (Arteriovenous) Fistula (an abnormal connection between an artery and a vein), and a Permacath (tunneled hemodialysis catheter) a flexible tube used for dialysis treatment, and (b) ensure that staff were trained to properly assess, and document care of the hemodialysis access sites which includes the auscultation/palpation of the AV fistula for Bruit (an abnormal sound generated by turbulent arterial blood flow) and Thrill (a palpable sensation of blood flow) to assure adequate blood flow and to monitor the hemodialysis access site for bleeding, signs of infection and pain. See 42 C.F.R. §483.25 (Quality of Care) and N.J.A.C. 8:39-27.1(a)(Mandatory Policies, Procedures and Practices for Quality of Care).

Based on observation, interview, and review of pertinent facility documentation, it was determined that the facility failed to ensure that all nursing and related services were provided for residents to maintain the highest practicable physical, mental, and psychosocial wellbeing by failing to (a) provide Activities of Daily Living nail care services and (b) provide thickened liquids to accommodate resident physician ordered diet. See 42 C.F.R. §483.35(a)(1)(2).

In addition to the federal deficiencies, the survey team identified violations of state staffing law, N.J.S.A. 30:13-18 (Minimum Staffing Requirements for Nursing Homes). A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" for the weeks of 09/18/2022 to 10/22/2022 revealed that the facility was deficient in certified nurse aide ("CNA") staffing for residents on 30 of 35 day shifts as follows:

- 09/18/22 had 8 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/19/22 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/21/22 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/22/22 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/23/22 had 8 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/24/22 had 5 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/25/22 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 09/26/22 had 8 CNAs for 85 residents on the day shift, required 11 CNAs.
- 09/27/22 had 8 CNAs for 85 residents on the day shift, required 11 CNAs.
- 09/28/22 had 7 CNAs for 85 residents on the day shift, required 11 CNAs.
- 09/29/22 had 7 CNAs for 85 residents on the day shift, required 11 CNAs.
- 09/30/22 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/01/22 had 9 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/02/22 had 7 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/03/22 had 8 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/04/22 had 8 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/05/22 had 9 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/06/22 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/07/22 had 8 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/08/22 had 6 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/09/22 had 6 CNAs for 84 residents on the day shift, required 10 CNAs.
- 10/10/22 had 6 CNAs for 84 residents on the day shift, required 10 CNAs.
- 10/14/22 had 5 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/15/22 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/16/22 had 6 CNAs for 83 residents on the day shift, required 10 CNAs.

- 10/17/22 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/19/22 had 8 CNAs for 83 residents on the day shift, required 10 CNAs.
- 10/20/22 had 7 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/21/22 had 7 CNAs for 82 residents on the day shift, required 10 CNAs.
- 10/22/22 had 8 CNAs for 82 residents on the day shift, required 10 CNAs.

A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" for the weeks of 03/19/2023 to 04/01/2023 revealed that the facility was deficient in CNA staffing for residents on 14 of 14 day shifts as follows:

- 03/19/23 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 03/20/23 had 9 CNAs for 83 residents on the day shift, required 10 CNAs.
- 03/21/23 had 8 CNAs for 3 residents on the day shift, required 10 CNAs.
- 03/22/23 had 8 CNAs for 83 residents on the day shift, required 10 CNAs.
- 03/23/23 had 5 CNAs for 86 residents on the day shift, required 11 CNAs.
- 03/24/23 had 8 CNAs for 86 residents on the day shift, required 11 CNAs.
- 03/25/23 had 9 CNAs for 86 residents on the day shift, required 11 CNAs.
- 03/26/23 had 6 CNAs for 86 residents on the day shift, required 11 CNAs.
- 03/27/23 had 6 CNAs for 86 residents on the day shift, required 11 CNAs.
- 03/28/23 had 8 CNAs for 85 residents on the day shift, required 11 CNAs.
- 03/29/23 had 9 CNAs for 85 residents on the day shift, required 11 CNAs.
- 03/30/23 had 7 CNAs for 85 residents on the day shift, required 11 CNAs.
- 03/31/23 had 8 CNAs for 84 residents on the day shift, required 10 CNAs.
- 04/01/23 had 9 CNAs for 84 residents on the day shift, required 10 CNAs.

A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" for the weeks of 06/04/2023 to 06/17/2023, revealed that the facility was deficient in CNA staffing for residents on 14 of 14 day shifts and deficient in total staff for residents on 1 of 14 overnight shifts as follows:

- 06/04/23 had 5 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/05/23 had 7 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/06/23 had 6 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/07/23 had 7 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/07/23 had 5 total staff for 81 residents on the overnight shift, required 6 total staff.
- 06/08/23 had 7 CNAs for 84 residents on the day shift, required 10 CNAs.
- 06/09/23 had 8 CNAs for 84 residents on the day shift, required 10 CNAs.
- 06/10/23 had 6 CNAs for 84 residents on the day shift, required 10 CNAs.
- 06/11/23 had 7 CNAs for 84 residents on the day shift, required 10 CNAs.
- 06/12/23 had 8 CNAs for 85 residents on the day shift, required 11 CNAs.
- 06/13/23 had 7 CNAs for 85 residents on the day shift, required 11 CNAs.
- 06/14/23 had 7 CNAs for 84 residents on the day shift, required 10 CNAs.
- 06/15/23 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 06/16/23 had 7 CNAs for 83 residents on the day shift, required 10 CNAs.
- 06/17/23 had 6 CNAs for 83 residents on the day shift, required 10 CNAs.

A review of the "New Jersey Department of Health Long Term Care Assessment and Survey Program Nurse Staffing Report" for the weeks of 06/18/2023 to 07/01/2023, revealed that the facility was deficient in CNA staffing for residents on 14 of 14 day shifts and deficient in CNAs to total staff on 1 of 14 evening shifts as follows:

- 06/18/23 had 6 CNAs for 82 residents on the day shift, required 10 CNAs.
- 06/19/23 had 8 CNAs for 82 residents on the day shift, required 10 CNAs.
- 06/20/23 had 7 CNAs for 81 residents on the day shift, required 10 CNAs.

- 06/21/23 had 6 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/22/23 had 7 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/23/23 had 8 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/23/23 had 2 CNAs to 9 total staff on the evening shift, required 4 total staff.
- 06/24/23 had 6 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/25/23 had 5 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/26/23 had 8 CNAs for 81 residents on the day shift, required 10 CNAs.
- 06/27/23 had 6 CNAs for 80 residents on the day shift, required 10 CNAs.
- 06/28/23 had 6 CNAs for 80 residents on the day shift, required 10 CNAs.
- 06/29/23 had 8 CNAs for 80 residents on the day shift, required 10 CNAs.
- 06/30/23 had 6 CNAs for 80 residents on the day shift, required 10 CNAs.
- 07/01/23 had 8 CNAs for 82 residents on the day shift, required 10 CNAs.

These violations pertain to the care of residents using the services at Princeton Care Center.

CURTAILMENT OF ADMISSIONS ORDER

As you were notified verbally on August 2, 2023, effective upon the facility's notification, the Department ordered the curtailment of new admissions to Princeton Care Center. The facility census at the time of the order was 80.

This enforcement action was taken in accordance with the provisions set forth at N.J.A.C. 8:43E-2.4 (Plan of Correction), 3.1 (Enforcement Remedies Available) and 3.6 (Curtailment of Admissions) in response to serious violations observed by Department staff in Princeton Care Center during its on-site inspection.

The Department hereby orders the continuation of the curtailment of all admissions to Princeton Care Center, excluding readmissions.

Please be advised that N.J.A.C. 8:43E-3.4(a)(2) provides for a penalty of \$250 per day for each resident admitted to the facility in violation of this curtailment order.

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 consultant Director of Nursing, among other things, shall ensure that all care staff are competent and educated (1) to identify a resident's code status in an emergency situation and to follow a physician's order regarding code status and (2) to provide care to hemodialysis access sites. The consultant Director of Nursing shall also ensure that all staff are competent and educated to perform proper hand hygiene.

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, Lisa.King@doh.nj.gov and Jean.Markey@doh.nj.gov by close of business on August 14, 2023. The approved consultants shall be retained and begin work no later than the close of business on August 18, 2023. 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 and Carol.Hamill@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;
3. Status of corrective measures implementation;
4. Projected CNA and nurse staffing for the following week;
5. Actual CNA and nurse staffing for the current week, and,
6. Evidence of completed training and competency.

In addition, the facility is directed to maintain timely communication with the Department, as may be required.

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

FORMAL HEARING

Princeton Care Center is entitled to contest the curtailment, pursuant to N.J.S.A. 26:2H-14, by requesting a formal hearing at the Office of Administrative Law (OAL). Princeton Care Center may request a hearing to challenge any or all of the following: the factual survey findings and/or the curtailment. Princeton Care Center 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

Princeton Care Center
Curtailment of Admissions Order and Directed Plan of Correction
August 9, 2023
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P.O. Box 360
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Princeton Care Center is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Princeton Care Center is further required to submit a written response to each and every charge as specified in this notice, which shall accompany its written request for a hearing.

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.

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

Thank you for your attention to this important matter and for your anticipated cooperation. If you have any questions concerning the Curtailment of Admissions Order or 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

GR:JLM:nj
DATED: August 9, 2023
E-MAIL
Control #X23031

- C. Nursing Home Administrators Licensing Board
Frank Skrajewski, Health Facilities Evaluation And Licensing
Pamela Lebak, Health Facility Survey and Field Operations
Kara Morris, Health Facility Survey and Field Operations
Carol Hamill, Health Facility Survey and Field Operations
Laurie Brewer, New Jersey Long-Term Care Ombudsman