



State of New Jersey  
DEPARTMENT OF HEALTH

PO BOX 360  
TRENTON, N.J. 08625-0360

www.nj.gov/health

PHILIP D. MURPHY  
Governor

TAHESHA L. WAY  
Lt. Governor

KAITLAN BASTON, MD, MSc, DFASAM  
Acting Commissioner

In Re Licensure Violation:	:	
	:	CURTAILMENT OF
	:	ADMISSIONS
Sterling Manor	:	ORDER AND
	:	DIRECTED PLAN OF
(NJ Facility ID# NJ 060312)	:	CORRECTION
	:	
	:	

TO: Donald Ware, Administrator  
Sterling Manor  
794 N. Forklanding Road  
Maple Shade, NJ 08052

Dear Mr. Ware:

This letter confirms the verbal order given to you by the Department of Health (hereinafter, “the Department”) on January 3, 2024, ordering Sterling Manor to curtail all admissions, and readmissions of any residents sent to a hospital for a drug overdose, and imposing a Directed Plan of Correction (DPOC) requiring Sterling Manor to retain the full-time services of a Consultant Administrator and Consultant Director of Nursing.

These enforcement actions are being 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), after Staff from the Department's Health Facility Survey and Field Operations (HFS&FO or Survey) were on-site at Sterling Manor and found significant deficiencies in the facility’s failure to consistently monitor and/or supervise residents with a known history of drug abuse, to prevent drugs from entering the facility, and the failure to prevent overdose incidents while in the facility.

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 Survey were on-site at the Sterling Manor on November 12 through November 14 and November 27 through November 29, 2023. Based on observations, interviews, and review of pertinent Facility documentation, it was determined that the Facility violated N.J.A.C. 8:39-27.1 by failing to provide and ensure that each resident receives all care and services needed.

The facility failed to ensure resident safety by not consistently monitoring and/or supervising residents with a known history of drug abuse, by failing to prevent drugs from entering the facility, and/or overdose incidents while in the facility. The facility also failed to follow its Resident Substance Abuse policy.

On August 3, 2023, Resident #3 was disoriented, mumbling, confused, did not have the ability to focus their attention, and not making sense when communicating. Resident #3 was repeatedly asked what happened with no effect. Narcan was administered to the resident at 4:43 p.m.

On September 21, 2023, Resident #3 was assessed by the LPN and noted to be "incoherent with speech when able to speak, eyes were pinpoint then patient's eyes started to roll in the back of her head. The LPN administered 2 doses of Narcan. 911 called."

On September 23, 2023, Resident #3 was found unresponsive, and a nurse proceeded to do sternum rub with ineffective results. The nurse administered the first dose of Narcan 4mg at 8:25 a.m. A second dose of Narcan was administered into the left nostril at 8:28 a.m. At 8:56 a.m. the resident began to experience withdrawal symptoms. The facility did not take steps to increase monitoring or implement interventions to manage the resident's substance abuse after Resident #3's incidents.

On December 25, 2023, Resident #23 was found unresponsive in hallway and turning blue in color. Narcan 4mg was administered twice. The facility did not follow the facility's "Resident Substance Abuse Policy" for Resident #23's incident.

The survey team determined that the facility's non-compliance with these requirements had caused, or was likely to cause, serious injury, harm, impairment, or death to residents.

### **CURTAILMENT:**

The Department hereby orders the continuation of curtailment of all admissions to Sterling Manor and curtailment of readmissions of any residents sent to a hospital for a drug overdose. The facility's current census is 100.

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:**

a. The facility must retain the full-time, on-site services of an Administrator Consultant in accordance with N.J.A.C. 8:34-1.1 et seq., who shall be responsible for consultation services concerning the day-to-day operations of the facility. The Administrator Consultant must be approved by the Department. The facility shall provide the name and resume of the proposed Administrator Consultant by submitting the name and resume to [carol.fogarty@doh.nj.gov](mailto:carol.fogarty@doh.nj.gov), [kara.morris@doh.nj.gov](mailto:kara.morris@doh.nj.gov), [Gene.Rosenblum@doh.nj.gov](mailto:Gene.Rosenblum@doh.nj.gov) and [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov) by 12:00 noon on January 9, 2024. The Administrator Consultant shall be present in the facility for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The approved Administrator Consultant shall be retained no later than the close of business, January 12, 2024. The contract with the consultant shall include provisions for immediate corrective action with applicable state licensing standards. The consultant 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 Administrator Consultant and facility shall submit weekly progress reports, beginning on January 19, 2024, and continuing each Friday thereafter. The progress reports shall be submitted to [carol.fogarty@doh.nj.gov](mailto:carol.fogarty@doh.nj.gov), [kara.morris@doh.nj.gov](mailto:kara.morris@doh.nj.gov).

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.

The weekly progress reports by the Administrator Consultant and the facility should be sent every Friday by 1:00 p.m. to [carol.fogarty@doh.nj.gov](mailto:carol.fogarty@doh.nj.gov), [kara.morris@doh.nj.gov](mailto:kara.morris@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.

b. Sterling Manor shall retain the full-time services of a Consultant Director of Nursing who is a Registered Nurse (RN). The Consultant DON must be approved by the Department. The facility shall provide the Department with the name and resume by 12:00 noon January 9, 2024. The resume should be sent to [carol.fogarty@doh.nj.gov](mailto:carol.fogarty@doh.nj.gov), [kara.morris@doh.nj.gov](mailto:kara.morris@doh.nj.gov), [Gene.Rosenblum@doh.nj.gov](mailto:Gene.Rosenblum@doh.nj.gov), and [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov). The consultant 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 consultant DON shall be on-site for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The approved Consultant Director of Nursing shall be retained no later than the close of business, January 12, 2024. They shall be responsible for ensuring that immediate corrective action is taken to ensure resident safety is not jeopardized and applicable state licensing standards are met.

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

Department staff will monitor facility compliance with this order 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 additional enforcement actions, including penalties.

Please be advised that you may be subject to other enforcement remedies in addition to this order.

**FORMAL HEARING:**

Sterling Manor 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). Sterling Manor may request a hearing to challenge any or all of the following: the factual survey findings and/or the curtailment. Sterling Manor 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  
P.O. Box 360  
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Sterling Manor is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Sterling Manor 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.

Since the surveyors have determined that an immediate and serious risk of harm is posed to the residents, please be advised that the Department will not hold the curtailment or the DPOC in abeyance during any appeal of the curtailment.

Thank you for your attention to this important matter and for your anticipated cooperation. Should you have any questions concerning this order, please contact Lisa King, Office of Program Compliance at (609) 376-7751.

Sincerely,



Lisa King  
Regulatory Officer, Office of Program Compliance  
Division of Certificate of Need and Licensing

DATE: January 5, 2024  
FACSIMILE  
E-MAIL (Dware@sterlingmanorc.com)  
REGULAR AND CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
Control # X24002