



security policy and procedure for the exit doors allowing for safe passage coming and going within the Assisted Living (AL) units for one of its residents.

On May 9, 2022, during an entrance conference with the Health Wellness Director (HWD), the surveyor inquired if there had been any incidents/accidents investigated by the facility in the past six months. The HWD told the surveyor that there had been none. Later, the surveyor was provided with a Reportable Event Report (RER) which identified that Resident #4 had eloped from the facility on January 30, 2022. The surveyor then requested the resident's closed medical record for review.

The surveyor's review of the medical record identified a progress note dated January 29, 2022, at 5:48 a.m. written by the HWD, which revealed that the resident exited the facility at approximately 3:00 a.m. through an exit door near room 117. At approximately 3:30 a.m., the HWD received a phone call from the Executive Director that the resident was outside and had fallen. The progress note revealed that the resident had fallen and sustained injuries. These facts and additional facts were confirmed during the surveyor's interview with the HWD. The HWD reported to the surveyor that she immediately went out and observed the resident lying on his/her back on the side walkway close to the exit door near room 117. She stated that upon assessment, the resident was alert, oriented and responded to questions and repeated that he/she was going for a walk. Further, the HWD documented that it appeared that the resident fell face first and sustained a laceration to the bridge of the nose and several skin tears. Bleeding from the resident's arms and feet were noted. The HWD documented that the resident was cold but was conscious and oriented to person, place and time and was able to move all extremities. At 9:14 a.m., the HWD documented that the resident was admitted to the hospital with multiple contusions on hands, arms, knees and toes. At 12:19 p.m., the HWD documented additional hospital admission diagnoses of hypothermia, left humerus fracture and lactic acidosis. The hospital report indicated that the resident was admitted to the hospital on January 29, 2022.

The surveyor conducted a tour of the first floor Assisted Living (AL) unit with the HWD. The HWD showed the surveyor the exit door near room 117 where Resident #4 exited the building. The surveyor asked the HWD if exit doors including the exit door near room 117 were alarmed. The HWD replied that the doors were not alarmed and explained that this is an Assisted Living facility and that the residents were free to go and come. The HWD confirmed that the exit door near room 117 did not have a way of communication back into the building from outside. Therefore, the exit door did not alarm when the resident opened it to leave the facility. The door automatically locked preventing anyone from entering the facility once the door closed behind them. This failure in the door system allowed Resident #4 to exit the facility unnoticed and left the resident outside unable to reenter the building.

These essential facts were also confirmed during the surveyor's interview with the Executive Director.

The surveyor also interviewed the Plant Operation Supervisor (POS) regarding the exit doors. He stated that the exit doors were locked at all times except the front door and the back porch door which were unlocked from 8 a.m. to 8 p.m. The POS told the surveyor that the residents knew to use the front and back porch exit doors and indicated that a person can exit all other doors but cannot gain entrance back into the facility without someone opening the exit door from the inside. He confirmed that only the front door had a doorbell to regain entrance to the building after hours. The surveyor then requested the facility's security policy. The POS informed the surveyor that the Assisted Living section of the facility did not have a security policy.

The Survey team received a hospital report for the resident after the survey on June 2, 2022. According to the report dated January 29, 2022, the patient was awake and alert, bilateral lungs were clear to auscultation when the patient was assessed at the hospital. Additionally, the report revealed the patient came in by Emergency Medical Services after the patient was found outside the patient's residence in the snow with severe hypothermia. The patient arrived with minimal response and a temperature of 27 degrees Centigrade [equal to 80.6 degrees Fahrenheit]. The patient had multiple skin tears of bilateral upper extremities as well as bluish discoloration of skin. The patient was started on rewarming and a Computed Tomography (CT) of the chest reveals acute fracture of left humeral neck with severe displacement of the humeral head. The patient was brought back to the trauma room for further rewarming and would be admitted to intermediate care for continued rewarming.

Finally, the report indicated that on February 7, 2022, nine days after the fall, the patient was hypotensive and went into respiratory distress and needed to be intubated. The report also indicated that the patient was started on treatment for pneumonia and CT showed severe bilateral patchy lung infiltrates and moderate bilateral pleural effusions. The patient/resident expired on February 7, 2022.

#### **MONETARY PENALTIES:**

N.J.A.C. 8:43E-3.4(a)10 provides that the Department may assess a monetary penalty of \$2,500 per violation, for violations resulting in either actual harm to a patient or resident, or in an immediate and serious risk of harm. The \$2,500 may be assessed for each day noncompliance is found.

In accordance with N.J.A.C. 8:43E-3.4(a)10, and because the violation of the licensure regulation resulted in actual harm to a resident, a \$2,500 penalty is being assessed for each day from the date the resident was admitted to the hospital on January 29, 2022 through the day of death on February 7, 2022. The total penalty for each day the resident was hospitalized is \$25,000.

Please be advised that the facility may be subject to additional enforcement actions pursuant to N.J.A.C. 8:43E.

The total amount of this penalty is required to be paid within 30 days of receipt of this letter by certified check or money order made payable to the "Treasurer of the State of New Jersey" and forwarded to Office of Program Compliance, New Jersey Department of Health, P.O. Box 358, Trenton, New Jersey 08625-0358, Attention: Lisa King. **On all future correspondence related to this Notice, please refer to Control X21040.**

#### **INFORMAL DISPUTE RESOLUTION (IDR):**

N.J.A.C. 8:43E-2.3 provides facilities the option to challenge factual survey findings by requesting Informal Dispute Resolution with Department representatives. Facilities wishing to challenge only the assessment of penalties are not entitled to IDR review, but such facilities may request a formal hearing at the Office of Administrative Law as set forth herein below. Please note that the facility's rights to IDR and administrative hearings are not mutually exclusive and both may be invoked simultaneously. IDR requests **must be made in writing within ten (10) business days from receipt of this letter** and must state whether the facility opts for an in-person conference at the Department, a telephone conference, or review of facility documentation only. The request must include an original and ten (10) copies of the following:

1. The written survey findings;
2. A list of each specific deficiency the facility is contesting;
3. A specific explanation of why each contested deficiency should be removed; and
4. Any relevant supporting documentation.

Any supporting documentation or other papers submitted later than 10 business days prior to the scheduled IDR may not be considered at the discretion of the IDR panel.

Send the above-referenced information to:

Jannelie Claudio  
Office of Program Compliance  
New Jersey Department of Health  
P.O. Box 358  
Trenton, New Jersey 08625-0358

The IDR review will be conducted by professional Department staff who do not participate in the survey process. **Requesting IDR does not delay the imposition of any enforcement remedies.**

**FORMAL HEARING:**

The Landing of Hamilton is entitled to challenge the assessment of penalties pursuant to N.J.S.A. 26:2H-14, by requesting a formal hearing at the Office of Administrative Law (OAL). The Landing of Hamilton may request a hearing to challenge any or all of the following: the factual survey findings and/or the assessed penalties. The Landing of Hamilton must advise this Department within 30 days of the date of this letter if it requests an OAL hearing regarding the findings and/or penalty.

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

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.

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

Finally, be advised that Department staff will monitor compliance to determine whether corrective measures are implemented by the Landing of Hamilton to comply with N.J.A.C. 8:36-17.7. 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 penalties. The Department also reserves the right to pursue all other remedies available by law.

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,

A handwritten signature in blue ink, appearing to read "Gene Rosenblum".

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

DATE: August 17, 2022  
FACSIMILE  
E-MAIL (mjuno@leisurecare.com)  
REGULAR AND CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
Control # X21040