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KAITLAN BASTON, MD, MSc, DFASAM
Commissioner

In Re Licensure Violation:

MINE HILL SURGICAL CENTER (NJ Facility ID# NJR24504-2)

CURTAILMENT OF SURGICAL SERVICES AND DIRECTED PLAN OF CORRECTION

TO: Dr. Edward Champey, Medical Director
Mine Hill Surgical Center
195 Route 46, Suite 202
Mine Hill, New Jersey 07803
administrator@minehillsurgical.com
doctorschampey@gmail.com
mhsc195@gmail.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 Manual of Standards for Licensing of Ambulatory Care facilities set forth at N.J.A.C. 8:43A-1.1 et seq.

Pursuant to N.J.A.C. 8:43A-5.1, "[t]he governing authority shall appoint an administrator who shall be accountable to the governing authority. The administrator, or an alternate who shall be designated in writing to act in the absence of the administrator, shall be available in the facility during its hours of operation."

Pursuant to N.J.A.C. 8:43A-1.4, the administrator must have the following qualifications:

The administrator shall have a baccalaureate degree and two years of full-time, or full-time equivalent, administrative or supervisory experience in a health care facility. Each additional year of full-time, or full-time equivalent, administrative or supervisory experience and/or training in a health care facility may be substituted for each year of the four-year degree requirement. Four years of such experience and/or training may be used to satisfy the degree requirement.

Pursuant to $\underline{\text{N.J.A.C.}}$ 8:43A-8.2, "[t]he facility shall designate in writing a registered professional nurse as the director of nursing services, who shall be on the premises of the facility during its hours of operation. A

registered professional nurse shall be designated in writing to act in the absence of the director of nursing services."

LICENSURE VIOLATIONS

Staff from the Department's Health Facility, Survey and Field Operations unit were on-site at Mine Hill Surgical Center (Mine Hill) on August 1, 2024, for a complaint investigation. During the inspection, the surveyors found the following violations:

- No Administrator or alternate Administrator at the facility. [N.J.A.C. 8:43A-5.1]
- The Director of Nursing (DON) was recently hired and, according to the Medical Director, she was on vacation. The facility had no personnel file for the newly hired DON. At 11:45 AM, the DON appeared and brought her personal file from home (a copy of her license). According to the DON, she does not have any job offer letter or any documents from the facility. The facility does not have an alternate DON [N.J.A.C. 8:43A-8.2].
- Facility does not have a difficult air way kit, no pads/conduction gel for the defibrillator. During the tour of the facility, the Malignant Hyperthermia Cart had no Dantrolene. [N.J.A.C. 8:43 A- 12.18 (d), 15.3(d)]
- There were two opened, needle-punctured, single dose vials found from the pain cart in the OR. [N.J.A.C. 8:43 A 14.2 (b) 9; 9.5(f)]
- There were expired medications from Crash cart, Pre-op & Post-op Medication cabinets, Anesthesia cart. [N.J.A.C. 8:43A- 9.5 (f)]
- There was a missing anesthesia control drug inventory sheet for July. [N.J.A.C. 8:43 A 9.3(b)(5)]
- There were no governing body meeting minutes since 5/2023. [N.J.A.C. 8:43A- 4.1]
- There were no credentials/privileges for the anesthesiologist present at the time of the survey. [N.J.A.C. 8:43A 12.4(b)]
- There was no renewal of alternate anesthesia certification from NJ BOME for the Medical Doctor who is also the Director of Anesthesia and is providing anesthesia services. [N.J.A.C. 8:43A12.4(b)]
- The doctor identified as the Director of Anesthesia is not board certified. [N.J.A.C. 8:43A- 12.4(a)]

These licensure violations impact directly on patient safety, especially upon the ability of the facility to respond appropriately to a patient emergency (due to lack of adequate equipment) and to provide anesthesia services due to an uncertified medical doctor providing anesthesia services.

CURTAILMENT OF SURGICAL SERVICES

As you were notified by telephone on August 6, 2024, effective upon the facility's notification, the Department ordered the curtailment of all surgical services at the facility. This enforcement action was taken in accordance with the provisions set forth at N.J.A.C. 8:43E-3.1 (Enforcement Remedies Available) and 3.6 (Curtailment of Admissions) in response to serious violations observed by Department staff at Mine Hill during its on-site inspection.

Please be advised that <u>N.J.A.C.</u> 8:43E-3.4(a)(2) provides for a penalty of \$250 per day from the date of such admission to the date of discharge or lifting of the curtailment order for each patient provided surgical services in violation of this curtailment order.

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

DIRECTED PLAN OF CORRECTION

The Commissioner of the Department of Health hereby directs the following plan of correction (DPOC). The facility must retain the part-time, on-site services of an Administrator Consultant who both meets the requirements of N.J.A.C. 8:43A-1.4 set forth above and, in addition, has experience specific to ambulatory surgical centers. 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 (including an acceptable Plan of Correction);
- 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 Administrator Consultant shall be approved in advance by the Department. The facility shall provide the names and resumes of the proposed consultant by sending them to Kimberly. Hansen@doh.nj.gov, Gene.Rosenblum@doh.nj.gov, Jean.Markey@doh.nj.gov, and Lisa.King@doh.nj.gov by close of business on August 14, 2024. The Administrator Consultant shall be present in the facility for no less than 20 hours per week until further notice from the Department. The approved Administrator Consultant shall be retained no later than the close of business, August 17, 2024. 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 facility should send weekly progress reports every Friday by 1:00 p.m. to Kimberly.Hansen@doh.nj.gov. These weekly reports shall include timely status updates regarding:

- Identified areas of non-compliance;
- Corrective measures to address identified areas of non-compliance; and,
- 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).

Department staff will monitor facility compliance with this Directed Plan of Correction 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.

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

FORMAL HEARING

Mine Hill 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). Mine Hill may request a hearing to challenge any or all of the following: the factual survey findings and/or the curtailment. Mine Hill 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 Mine Hill is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Mine Hill 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 patients, 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 Surgical Services or Directed Plan of Correction, please contact Lisa King, Office of Program Compliance, at <u>Lisa.King@doh.nj.gov</u>.

Sincerely,

Gene Rosenblum, Director Office of Program Compliance

Division of Certificate of Need and Licensing

GR:JLM:nj

DATED: August 9, 2024

E-MAIL

Control #X24025

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