

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20A105	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/06/2023
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NAME OF PROVIDER OR SUPPLIER CONTINUING CARE AT LANTERN HILL	STREET ADDRESS, CITY, STATE, ZIP CODE 537 MOUNTAIN AVENUE NEW PROVIDENCE, NJ 07974
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A 000	<p>Initial Comments</p> <p>Initial Comments: TYPE OF SURVEY: Complaint</p> <p>COMPLAINT #: NJ00167420</p> <p>CENSUS: 41</p> <p>SAMPLE SIZE: 3</p> <p>The facility was not in substantial compliance with New Jersey Administrative Code, Chapter 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes, and Assisted Living Programs, based on this Complaint survey.</p>	A 000		
A 310	<p>8:36-3.4(a)(1) Administration</p> <p>(a) The administrator or designee shall be responsible for, but not limited to, the following:</p> <p>1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: NJ00167420</p>	A 310		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

12/01/23

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A 310	<p>Continued From page 1</p> <p>Based on interview and record review, it was determined that the facility failed to develop and implement a comprehensive Health Service Plan (HSP) that included the appropriate time frame required for its review and revision, at least on a quarterly basis and as needed based on resident's change in condition, for 1 of 3 residents reviewed with change in behavioral pattern and condition, Resident #2.</p> <p>This deficient practice was evidenced by the following:</p> <p>On 11/6/2023 at 1:15 p.m., the surveyor reviewed Resident #2's Medical Record (MR) which documented that the resident was admitted to the facility on [REDACTED] with diagnoses which included but were not limited to [REDACTED].</p> <p>NJ EX Order. 264b1.</p> <p>The surveyor reviewed Resident #2's "Holistic Service Plan (HSP)" with "Date of Assessment [REDACTED]" and "Date of Next Review: [REDACTED]" which revealed that the Resident was [REDACTED] and [REDACTED], but needed assistance with dressing, bathing, and transferring.</p> <p>During an interview on 11/6/2023 at 10:18 a.m., the Administrator stated when the [REDACTED] incident occurred when Resident #2 attempted to hit a staff member, the staff member called her, so she notified the doctor [physician] to see if there was a medical issue with him/her. She continued to say "Resident #2's [REDACTED] interactions were becoming a pattern, the Resident refused a lot of interventions, and he/she was having more [REDACTED] behaviors.</p>	A 310		
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A 310	<p>Continued From page 2</p> <p>Resident #2 had a history of NJ EX Order: 26467, [but] now [was] getting NJ EX Order: 26467</p> <p>During an interview on 11/6/2023 at 2:12 p.m., the Director of Nursing (DON) stated, "the health service plan is [the] whole interdisciplinary team-holistic care plan (CP), we [facility] are person-centered ...holistic is very thorough, the general service plan (GSP) is pulled from the holistic. [The] GSP will show NJ EX Order: 26467 and nursing interventions. We handwrite and date on [the] pulled service plan, [it] has to be accurate to resident at that time, there's just one GSP."</p> <p>The DON continued to say "there's not separate care plans ...the HSP is [the] whole [care plan]. The RN assessment is embedded in [the] holistic service plan." [The] RN and the AL (Assisted Living) Manager signs off on it and changes are handwritten."</p> <p>During an interview at 3:12 p.m., the Administrator stated the Holistic Service Plan is the whole service plan, if there are new interventions before the 6 months, notes are handwritten on [the] service plan. The Administrator continued to say "on NJ EX Order: 26467, there wasn't much to update, [for] actions and expressions ... there were no new interventions."</p> <p>During an interview at 3:16 p.m., the Administrator, in the presence of the DON, stated, "Resident #2 was NJ EX Order: 26467, there was nothing to do, interventions or follow-up needed after the incident"</p> <p>During an interview with the Administrator at 3:54 p.m., in the presence of the DON, the Administrator stated that the care plan generates the HSP. Then, the DON said, "[the] RN signs off</p>	A 310		

New Jersey Department of Health

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A 310	<p>Continued From page 3</p> <p>every 6 months."</p> <p>At the time of survey on 11/6/23, there was no documented evidence provided that Resident #2 had a behavioral HSP. In addition, there was no evidence that the HSP was updated after the [REDACTED] incident when the resident attempted to hit a CNA while providing and assisting with the resident's care.</p> <p>A review of the policy titled "Holistic Assessment Assisted Living/Memory Care" with a Version "Date: 4/2023" revealed, "Policy: Residents who will be residing in either Assisted Living or Memory Care neighborhoods will be evaluated and assessed at time of admission, re-admission, every 6 months and/or with any significant change of condition to support their care needs according to [facility] clinical policies and state regulations ...Procedure ...Every six months the resident will be re-assessed by the AL Manager and Wellness Manager/nurse to support their care needs and provide services according to [facility] policy and state regulations using the Holistic Assessment in resident's electronic medical record."</p> <p>Surveyor's review of the policy titled "Care/Service Plans" with a Version Date: 5/2021 revealed, "Purpose/Scope: Each guest/resident will have an individualized Care/Service plan developed. Care/Service Plans will include guest/resident preferences, strengths, routines, personal and cultural preferences and choices as well as clinical needs ...Procedure: Assisted Living/Memory Care revealed ...15. Care/Service Plan will be updated by hand in-between completion of the holistic assessments/care/service plans. A. Care/Service Plan approaches will be reviewed and/or revised,</p>	A 310		

New Jersey Department of Health

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A 310	<p>Continued From page 4</p> <p>as applicable, at the following intervals: i. Normally 30 days after admission/readmission [,] ii. With the completion of the My Health and Wellness Review normally every [every] 60 days thereafter ...iii. With the completion of the Holistic Assessment every six months [,] iv. With any significant change of condition [,] v. In accordance with state specific regulations. 16. Each individual resident's Service package/Care Level will be reviewed with each assessment and may be altered based on assessment. 17. Care/Service Plan review will include input from the guest/resident, responsible party and interdisciplinary team. 18. All interdisciplinary team members will document any updates/changes on care plan copy in the guest/resident suite/apartment or designated accessible location and review updated with designated care associate. 19. Documentation standards will be followed when documenting changes/updates (i.e., sign/date each entry, highlight/date/sign for items that have been discontinued etc.)"</p> <p>The surveyor's interviews with the Administrator and the DON and the review of facility policies and procedures on Holistic Assessment and the Care/Services Plan, confirmed that there is no separate HSP and that the RN and the AL Manager sign this "holistic" service plan every six months. The regulatory requirements, however, requires that the review and revision of the HSP be done and completed at least on a quarterly basis and as needed for resident's condition changes.</p> <p>N.J.A.C.: 8:36-7.3 (a)(b)(c)</p>	A 310		

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A 709	Continued From page 5	A 709		
A 709	<p>8:36-7.2(d)(1-18) Resident Assessments and Care Plans</p> <p>(d) Each health care assessment by the registered professional nurse shall include, at a minimum, evaluation of the following:</p> <ol style="list-style-type: none"> 1. Need for assistance with "activities of daily living"; 2. Cognitive patterns; 3. Communication/hearing patterns; 4. Vision patterns; 5. Physical functioning and structural problems; 6. Continence; 7. Psychosocial well-being; 8. Mood and behavior problems; 9. Activity pursuit patterns; 10. Disease diagnoses; 11. Health conditions and preventive health measures, including, but not limited to, pain, falls, and lifestyle; 12. Oral/nutritional status; 13. Oral/dental status; 14. Skin conditions; 	A 709		

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A 709	<p>Continued From page 6</p> <p>15. Medication use;</p> <p>16. Special treatment and procedures;</p> <p>17. Restraint use;</p> <p>18. Outside service utilization.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: NJ00167420 Based on interview and record review on 11/6/2023, it was determined that the facility failed to have an assessment done by a Registered Nurse (RN) for 1 of 3 residents, Resident #2. This deficient practice was evidenced by the following:</p> <p>On 11/6/2023 at 1:15 p.m., the surveyor reviewed the Medical Record (MR) of Resident #2 which documented that the resident was admitted to the facility on [REDACTED] with diagnoses which included, but were not limited to, [REDACTED] rder. 264b1</p> <p>[REDACTED]</p> <p>"NJ EX Order. 264b1</p> <p>The surveyor reviewed Resident #2's Holistic Service Plan (HSP), dated [REDACTED], which revealed that the resident was oriented and independent, however, the resident needed assistance with dressing, bathing, and transferring.</p> <p>Further review of Resident #2's MR revealed a document titled, "Clinical Notes Report (CNR)" documented by the RN, dated [REDACTED] and</p>	A 709		

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A 709	<p>Continued From page 7</p> <p>timed 02:53 p.m., which documented, "... this writer was notified by the nurse to go to AL (Assisted Living) to assist resident with the transfer to ER (Emergency Room) for [REDACTED] Eval. (Evaluation) due to [REDACTED] behavior during morning resident hit staff. Dr. (Doctor) [Medical Director (MD)] and family was made aware, Ambulance called, EMS (Emergency Medical Service) arrived, resident became calm and refused to go to Hospital. MD provided scrip (prescription) with the order to send resident out. Resident did not go to ER."</p> <p>During an interview with the Administrator on 11/6/2023 at 1:28 p.m., the surveyor asked if Resident #2 was assessed by the nurse after the [REDACTED] behavior incident, when the resident attempted to hit the CNA while providing morning care to the resident on [REDACTED]. The Administrator replied, "the nurse did assess, he/she wasn't medically complex."</p> <p>During surveyor's interview with the Director of Nursing (DON) at 2:12 p.m., the DON stated that the RN assessment is embedded in the holistic service plan and that the RN signs off on it. The DON stated that updates are handwritten. When surveyor asked for the facility's RN assessment policy, the DON stated that the facility do not have RN assessment policy.</p> <p>During a second interview with the DON at 3:16 p.m., in the presence of the Administrator, the DON stated that assessments are included and documented in the nurse's note. The DON stated that there were no separate forms to document an assessment, and no standard facility RN assessment form used.</p> <p>A review of Resident #2's "My Health and</p>	A 709		

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A 709	<p>Continued From page 8</p> <p>Wellness Review (MHWR)" dated [redacted] and timed 10:34 a.m. signed by the AL Manager, and by the RN signed on [redacted] at 4:11 p.m., indicated, "Brief summary of this review period: ...I have tendencies of saying [redacted] both residents and staff. There have been conversations about how this is not kind or respectful. I sometimes will say I am upset at the situation, not the individual. I don't like to have to remind my care team of my preferences, it escalates me. I'm very vocal about things that I do not like. I am the [redacted] and take a lot of pride and responsibility in my [redacted] for others. My [redacted] visit me often. I will ask staff for my tea and need it promptly."</p> <p>Further review of the MHWR dated [redacted] revealed, " ...This is a brief summary of changes in my goals, [redacted] this review period: I have been up at night with [redacted] I will sometimes need to get up into my wheelchair between 4-6 am, I have tendencies to be [redacted] and use [redacted] with staff and residents, I will need my care team to talk me through these situations when they arise. I'm very involved in other [redacted] I become escalated easily and have [redacted] and can become verbally insulting to staff." The MHWR notes indicated that the resident was [redacted] and not [redacted] [redacted] to others, including to staff at the time on [redacted]</p> <p>During an interview with the Administrator on 11/6/2023 at 1:28 p.m. when asked if Resident #2 was assessed by the nurse after Resident #2 attempted to hit the CNA who was providing care and assisting the resident on [redacted] the Administrator replied, "the nurse did assess,</p>	A 709		

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A 709	<p>Continued From page 9</p> <p>Resident #2 wasn't medically complex."</p> <p>During an interview at 2:12 p.m., the DON stated that the RN assessment is embedded in the holistic service plan and that the RN signs off on it, and that updates are handwritten. She stated, "We [the facility] do not have an RN assessment policy."</p> <p>During a second interview at 3:16 p.m., in the presence of the Administrator, the DON stated, "RN assessment is put into a nurse's note, nursing standard of practice, not a separate form." She stated that there is no standard RN assessment form to include what information is needed to call the physician, and the "reason the nurse is called to the room."</p> <p>During another interview with the DON at 3:54 p.m., she stated that the service plan is pulled from the RN assessment, including a "holistic assessment." She continued to say, "I know we do RN assessments."</p> <p>There was no documented evidence provided to confirm that Resident #2 was assessed after the resident exhibited [REDACTED] behavior and attempted to hit the CNA on [REDACTED]. Previous MHWR documentation indicated resident's [REDACTED] and not [REDACTED]. The RN did not provide documentation of an assessment that Resident #2 had no nursing care needs that required nursing care intervention, including monitoring of resident's condition to ensure that the resident did not also require further medical care and intervention.</p> <p>Refer to tag: N.J.A.C.: 8:36-7.2 (d)</p>	A 709		

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A 751 A 751	<p>Continued From page 10</p> <p>8:36-7.3(b) Resident Assessments and Care Plans</p> <p>(b) The resident health service plan shall be reviewed, and if necessary, revised quarterly, and as needed, based upon the resident's response to the care provided and any changes in the resident's physical or cognitive status.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint #: NJ00167420 Based on interview and record review on 11/6/2023, it was determined that the facility failed to update the Health Service Plan (HSP) for 1 of 3 residents (Resident #2) who had a change in [REDACTED] pattern and exhibited [REDACTED] to staff. This deficient practice was evidenced by the following:</p> <p>On 11/6/2023 at 1:15 p.m., the surveyor reviewed Resident #2's Medical Record (MR) which documented that the resident was admitted to the facility on [REDACTED] with diagnoses which included but were not limited to [REDACTED].</p> <p>NJ EX Order. 264b1.</p> <p>The surveyor reviewed Resident #2's "Holistic Service Plan (HSP)" with "Date of Assessment [REDACTED]" and "Date of Next Review: [REDACTED]" which revealed that the Resident was [REDACTED] and [REDACTED], but needed assistance with dressing, bathing, and transferring.</p> <p>Further review of the [REDACTED] HSP revealed the</p>	A 751 A 751		

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A 751	<p>Continued From page 11</p> <p>following: "1. My Personal Story ...Service Plan Approaches included ...I can become [REDACTED] when something is not the way I wanted, when this happens, I believe staff will need to disengage so I can deescalate. ALM (Assisted Living Manager) educated staff to disengage if I use [REDACTED] or any NJ EX Order. 264b1. ...2. Engagement and Socialization included ...what helps you feel better when you are upset? ...[REDACTED] attention from my care team and someone to listen to me vent. Sometimes I become [REDACTED] and need time to process and someone to listen ...Service Plan Approaches ...I continue to be particular about my AM/PM routine and become NJ EX Order. 264b1 with staff when my routine is not as expected ...Please provide me patience when I become escalated, NJ EX Order. 264b1 unkind word[s]. I'll need my care team to talk me through the situation ...I will need my care team to talk through situations when I become escalated and begin using NJ EX Order. 264b1 towards care team or my peers. I can use [REDACTED] with staff, I will need to be told in real time that its not appropriate [REDACTED] I have been told this is not appropriate, but I become so NJ EX Order. 264b1, I forget. When this happens, staff should try to talk through it with me, if that's not effective then staff should disengage so I can de-escalate"</p> <p>Surveyor's review of the Behavior/Cognitive Needs section revealed that the entire section was left blank. Documentation review revealed, "Behavioral/Cognitive Needs ... If an issue never occurs, check "N" & skip to the next item ...How often The Issue Occurs N=Never [,] O=Occasional [,] R=Regular [,] C=Continuous[.] ...Behavioral/Cognitive Needs-Anxiety ...When & How Often (if Other please specify.) By Whom Check a box to see how often the issue occurs</p>	A 751		

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A 751	<p>Continued From page 12</p> <p>...Services to Be Provided & How They will be Provided."</p> <p>Continued review of the HSP revealed, " ...3. Cognitive Patterns, Mood, and Expressions (CPME) ...Service Plan Goal(s) ...I will maintain my usual NJ EX Order. 264b1, and/or team members ...I have a history of: ...I become NJ EX Order. 264b1 when: I feel that an aide will not show up to assist me when I need them ...This is the type of NJ EX Order. 264b1 support I require when I am NJ EX Order. 264b1 reassurance that the care team is aware of my needs and preferences ...Identify any actions/expressions that may be exhibited: NJ EX Order. 264b1, other ...emotional outburst and use of hurtful words towards others NJ EX Order. 264b1: Resident #2 is Easily NJ EX Order. 264b1 NJ EX Order. 264b1 Makes NJ EX Order. 264b1 [.] Agitated[,] Happy[,] Friendly[,] Active[,] Verbally abusive [.] Motivated[,] Irrational[,] ...These are some of the NJ EX Order. 264b1 approaches that may benefit me: Staff assistance in stepping away from situations that NJ EX Order. 264b1 me[,] Provide an environment that is conducive to NJ EX Order. 264b1 wellbeing ..."</p> <p>This is a brief summary of the plan of care/treatment: psychosocial support/anxiety ...Service Plan Approaches (include individualized approaches that will assist me when I am NJ EX Order. 264b1 ...I become NJ EX Order. 264b1 and NJ EX Order. 264b1 when I feel I have to wait for requests to be taken care of by the staff. I can become NJ EX Order. 264b1 t and begin to yell/scream at the staff and make phone calls of the front desk (NJ EX Order. 264b1 and NJ EX Order. 264b1) all management, admin (administration) and my family in those moments of escalation. Please help me to NJ EX Order. 264b1 by talking me through the situation with me. Encourage me to be patient with my care team and peer group. If that is not</p>	A 751		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20A105	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/06/2023
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NAME OF PROVIDER OR SUPPLIER CONTINUING CARE AT LANTERN HILL	STREET ADDRESS, CITY, STATE, ZIP CODE 537 MOUNTAIN AVENUE NEW PROVIDENCE, NJ 07974
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A 751	<p>Continued From page 13</p> <p>effectove (effective), disengage and allow me time to deescalate. I have a tendency to be [REDACTED] to my peers when I am [REDACTED] and/or upset-I may use [REDACTED] towards others. I have a tendency to be [REDACTED] and/or pick on my peers who perceive as [REDACTED]. I typically decline care teams (including MD (Physician) and nursing) rcomnedations (recommendations) when it comes to my care and well-being ...5b. Transferring ...Service Plan Approaches (include individualized approaches which promotes or maintains independence with transferring): I will instruct the care associates how to position and place the wheelchair and chair for my transfer. In the bedroom the care associate must stand behind the chair when I transfer"</p> <p>Surveyor reviewed Resident #2's Holistic Assessment with an AL Manager signature, dated [REDACTED], revealed, "Cognitive Patterns, Mood, and Expressions: the same Service Plan Approaches as listed on the [REDACTED] HSP."</p> <p>Review of Resident #2's Clinical Notes Report (CNR) revealed the following documentations: 1. A review of Resident #2's CNR dated 4/10/2 [REDACTED] NJ EX Order. 264b1 Manager (ALM) stated, "...resident became extremely escalated while CMA (Certified Medication Assistant) was attempting to assist [REDACTED] to open a large package in her kitchen. CMA reported resident started to [REDACTED] NJ EX Order. 264b1, CMA was trying to deescalate resident and reassure [REDACTED] that she was trying to help, resident continued to [REDACTED] NJ EX Order. 264b1 at CMA. Resident was attempting to open the box with a [REDACTED] [REDACTED] but was unsuccessful causing increasing frustration, resident threw the [REDACTED] across the room in the direction of the CMA ..."</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 14</p> <p>2. On 4/10/2023 at 5:09 PM [p.m.] the Licensed Practice Nurse (LPN) stated "Resident was made aware of NJ EX Order. 264b1) and Occupation therapy evaluation recommendation but decline, risk versus benefit explained ..."</p> <p>3. On 5/11/2023 at 4:03 PM [p.m.], the ALM stated, "When CMA was leaving his/her apartment, resident [REDACTED] at CMA ...OT (Occupational Therapy) offered to work on [REDACTED], but resident refused ..."</p> <p>4. On 5/12/2023 at 12:27 PM, the LPN stated "LATE NOTE for 5/11/23: At around 8:15 p.m., Resident #2 self-propelled in his/her wheelchair to the nurse's office to ask the asides to help her transfer to his/her arm chair. This writer offered to help him/her with transfer since both aides were busy helping other residents. Resident #2 responded by saying 'No they not, they must be hiding somewhere' and declined my offer to assist him/her to transfer, preferred to wait for them ... Resident #2's assigned aide came out of resident's room with boxes on her hands. Resident #2 then went to his/her apartment, picked up the phone and called his/her [REDACTED] saying there is no one here to help me, when I was right by [REDACTED] ready to help. Resident was [REDACTED] and NJ EX Order. 264b1."</p> <p>5. On 5/19/2023 at 3:59 PM, the ALM stated "Resident came to nurse's station looking or specific CMA to make his/her [REDACTED], this CMA was not assigned to him/her and not present at the time to assist. Resident was complaining ...started to [REDACTED] and call out for CMA in the hallway. ALM and Wellness Manager offered to help make the [REDACTED] as requested but the resident declined ...Resident continued to [REDACTED] and demand</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 15</p> <p>for CMA to make [REDACTED]. Due to resident continuing to become [REDACTED] NJ EX Order 264b1, ALM called to CMA to request her assistance in getting residents [REDACTED] ALM assured resident that CMA was on her way."</p> <p>6. On 6/2/2023 at 5:55 PM, the Registered Nurse (RN #1) stated the "ALM was made aware of staff complaint on [REDACTED]. Resident #2 reported CMA raised her voice, when asked if resident felt CMA was verbally abusing, Resident #2 denied and said CMA was trying to encourage him/her to continue making efforts to do his/her bedtime routine. Resident agreed he/she was becoming frustrated by situation."</p> <p>7. On 6/7/2023 at 03:04 PM, the ALM stated "ALM was made aware of staff complaint on [REDACTED] by way of statement received from 3-11 pm shift on [REDACTED]. CMA reported the Resident became increasingly [REDACTED] when attempting to perform bedtime routine. CMA reported she offered to assist multiple times and resident declined ...started yelling at CMA, telling her to shut-up and using [REDACTED] Resident [REDACTED] d while holding up both NJ EX Order 264b1 to CMA"</p> <p>8. On 6/19/2023 at 03:04 PM, the RN #1 stated "On [REDACTED], this nurse discussed with resident the use of a [REDACTED] again per OT and Dr. recommendation ...He/She declined. [REDACTED] is [REDACTED] and NJ EX Order 264b1</p> <p>9. On 8/15/2023 at 1:34 PM, the ALM stated, "ALM attended scheduled meetings for resident with MD (Physician)MD and resident reviewed recent recommendations, including [REDACTED] [REDACTED] y consult and [REDACTED] resident declined all MD recommendations."</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 16</p> <p>10. On 9/2/2023 at 02:53PM, the RN #2 stated, "This writer was notified by nurse to go to AL to assist resident with the transfer to ER (Emergency Room) for [REDACTED] NJ EX Order. 264b1 Eval (Evaluation) due to NJ EX Order. 264b1 during morning care-resident hit the staff. Dr. and family was made aware, Ambulance called. EMS (Emergency Medical Service) arrived, resident became clam and refused to go to Hospital, MD provided scrip (prescription) with the order to send resident out. Resident did not go to ER."</p> <p>During an interview on 11/6/2023 at 10:18 a.m., the Administrator stated when the [REDACTED] incident occurred when Resident #2 attempted to hit a staff member, the staff member called her so she notified the doctor [physician] to see if there was a medical issue with him/her. She continued to say "Resident #2's physical interactions were becoming a pattern, the Resident refused a lot of interventions and he/she was having more [REDACTED] NJ EX Order. 264b1 behaviors. Resident #2 had a history of [REDACTED] NJ EX Order. 264b1, [but] now [was] getting [REDACTED] NJ EX Order. 264b1"</p> <p>During an interview on 11/6/2023 at 2:12 p.m., the Director of Nursing (DON) stated, "the health service plan is [the] whole interdisciplinary team-holistic care plan (CP), we [facility] are person-centered ...holistic is very thorough, the general service plan (GSP) is pulled from the holistic. [The] GSP will show incontinence and nursing interventions. We handwrite and date on [the] pulled service plan, [it] has to be accurate to resident at that time, there's just one GSP."</p> <p>The DON continued to say "there's not separate care plans ...the HSP is [the] whole [care plan]. The RN assessment is embedded in [the] holistic service plan." [The] RN and the AL (Assisted</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 17</p> <p>Living) Manager signs off on it and changes are handwritten."</p> <p>During an interview at 3:12 p.m., the Administrator stated the holistic service plan is the whole service plan, if there are new interventions before the 6 months, notes are handwritten on [the] service plan. The Administrator continued to say "on [REDACTED], there wasn't much to update, [for] actions and expressions ... there were no new interventions."</p> <p>During an interview at 3:16 p.m., the Administrator, in the presence of the DON, stated, "Resident #2 was [NJ EX Order: 264b1], there was nothing to do, interventions or follow-up needed after the incident"</p> <p>During an interview with the Administrator at 3:54 p.m., in the presence of the DON, the Administrator stated that the care plan generates the HSP. Then, the DON said, "[the] RN signs off every 6 months."</p> <p>At the time of survey on 11/6/23, there was no documented evidence provided that Resident #2 had a behavioral HSP. In addition, there was no evidence that the HSP was updated after the [REDACTED] incident when the resident attempted to [REDACTED] a CNA while providing and assisting with the resident's care.</p> <p>A review of the policy titled "Holistic Assessment Assisted Living/Memory Care" with a Version "Date: 4/2023" revealed, "Policy: Residents who will be residing in either Assisted Living or Memory Care neighborhoods will be evaluated and assessed at time of admission, re-admission, every 6 months and/or with any significant change of condition to support their care needs</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 18</p> <p>according to [facility] clinical policies and state regulations ...Procedure ...Every six months the resident will be re-assessed by the AL Manager and Wellness Manager/nurse to support their care needs and provide services according to [facility] policy and state regulations using the Holistic Assessment in resident's electronic medical record."</p> <p>A review of the policy titled "Care/Service Plans" with a Version Date: 5/2021 revealed, "Purpose/Scope: Each guest/resident will have an individualized Care/Service plan developed. Care/Service Plans will include guest/resident preferences, strengths, routines, personal and cultural preferences and choices as well as clinical needs ...Procedure: Assisted Living/Memory Care revealed ...15. Care/Service Plan will be updated by hand in-between completion of the holistic assessments/care/service plans. A. Care/Service Plan approaches will be reviewed and/or revised, as applicable, at the following intervals: i. Normally 30 days after admission/readmission[,] ii. With the completion of the My Health and Wellness Review normally very [every] 60 days thereafteriii. With the completion of the Holistic Assessment every six months[,] iv. With any significant change of condition[,] v. In accordance with state specific regulations. 16. Each individual resident's Service package/Care Level will be reviewed with each assessment and may be altered based on assessment. 17 . Care/Service Plan review will include input from the guest/resident, responsible party and interdisciplinary team. 18. All interdisciplinary team members will document any updates/changes on care plan copy in the guest/resident suite/apartment or designated accessible location and review updated with</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 19</p> <p>designated care associate. 19. Documentation standards will be followed when documenting changes/updates (i.e., sign/date each entry, highlight/date/sign for items that have been discontinued etc.)"</p> <p>N.J.A.C.: 8:36-7.3 (a)(b)(c)</p> <p>Complaint #: NJ00167420</p> <p>Based on interview and record review on 11/6/2023, it was determined that the facility failed to update the Health Service Plan (HSP) for 1 of 3 residents (Resident #2) who had a change in behavioral pattern and exhibited [REDACTED] to staff. This deficient practice was evidenced by the following:</p> <p>On 11/6/2023 at 1:15 p.m., the surveyor reviewed Resident #2's Medical Record (MR) which documented that the resident was admitted to the facility on [REDACTED] with diagnoses which included but were not limited to [REDACTED]</p> <p>[REDACTED]</p> <p>NJ EX Order. 264b1.</p> <p>The surveyor reviewed Resident #2's "Holistic Service Plan (HSP)" with "Date of Assessment [REDACTED]" and "Date of Next Review: [REDACTED]" which revealed that the Resident was oriented [REDACTED] but needed assistance with dressing, bathing, and transferring.</p> <p>Further review of the [REDACTED] HSP revealed the following: "1. My Personal Story ...Service Plan</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 20</p> <p>Approaches included ...I can become [REDACTED] when something is not the way I wanted, when this happens, I believe staff will need to disengage so I can [REDACTED] ALM (Assisted Living Manager) educated staff to disengage if I use NJ EX Order. 264b1 y language. ...2. Engagement and Socialization included ...what helps you feel better when you are upset? ...1:1 attention from my care team and someone to listen to me vent. Sometimes I become [REDACTED] and need time to process and someone to listen ...Service Plan Approaches ...I continue to be particular about my AM/PM routine and become very [REDACTED] with staff when my routine is not as expected ...Please provide me patience when I become escalated, NJ EX Order. 264b1 [REDACTED] I'll need my care team to talk me through the situation ...I will need my care team to talk through situations when I become escalated and begin using NJ EX Order. 264b1 works towards care team or my peers. I can use [REDACTED] NJ EX Order. 264b1 with staff, I will need to be told in real time that its not appropriate language. I have been told this is not appropriate, but I become so escalated and angry, I forget. When this happens, staff should try to talk through it with me, if that's not effective then staff should disengage so I can de-escalate"</p> <p>Surveyor's review of the Behavior/Cognitive Needs section revealed that the entire section was left blank. Documentation review revealed, "Behavioral/Cognitive Needs ... If an issue never occurs, check "N" & skip to the next item ...How often The Issue Occurs N=Never [,] O=Occasional [,] R=Regular [,] C=Continuous[.] ...Behavioral/Cognitive Needs-Anxiety ...When & How Often (if Other please specify.) By Whom Check a box to see how often the issue occurs ...Services to Be Provided & How They will be</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 21</p> <p>Provided."</p> <p>Continued review of the HSP revealed, " ...3. Cognitive Patterns, Mood, and Expressions (CPME) ...Service Plan Goal(s) ...I will maintain my usual level of orientation to self, place, day, time, and/or team members ...I have a history of: [REDACTED] ...I become [REDACTED] when: I feel that an aide will not show up to assist me when I need them ...This is the type of [REDACTED] I require when I am [REDACTED]: reassurance that the care team is aware of my needs and preferences ...Identify any actions/expressions that may be exhibited: [REDACTED] r, other [REDACTED] and use of [REDACTED] towards others ...Mood: Resident #2 is [REDACTED] complaints Makes [REDACTED] [.] Agitated[,] Happy[,] Friendly[,] Active[,] Verbally abusive [.] Motivated[,] Irrational[,] ...These are some of the [REDACTED] approaches that may benefit me: Staff assistance in stepping away from situations that [REDACTED] [.] Provide an environment that is conducive to mental and psychological wellbeing ... This is a brief summary of the plan of care/treatment: [REDACTED] [REDACTED] ...Service Plan Approaches (include individualized approaches that will assist me when I am [REDACTED] [REDACTED] ...I become [REDACTED] and [REDACTED] when I feel I have to wait for requests to be taken care of by the staff. I can become [REDACTED] and [REDACTED] at the staff and make phone calls of the front desk (IL and CC) all management, admin (administration) and my family in those moments [REDACTED]. Please help me to [REDACTED] by talking me through the situation with me. Encourage me to be patient with my care team and peer group. If that is not effective (effective), [REDACTED] and allow me time to [REDACTED]. I have a tendency to be</p>	A 751		

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A 751	<p>Continued From page 22</p> <p>NJ EX Order: 264b1 to my peers when I am NJ EX Order: 264b1 and/or upset-I may use NJ EX Order: 264b1 towards others. I have a tendency to be NJ EX Order: 264b1 and/or pick on my peers who NJ EX Order: 264b1. I typically decline care teams (including MD (Physician) and nursing) rcomnedations (recommendations) when it comes to my care and well-being ...5b. Transferring ...Service Plan Approaches (include individualized approaches which promotes or maintains independence with transferring): I will instruct the care associates how to position and place the wheelchair and chair for my transfer. In the bedroom the care associate must stand behind the chair when I transfer"</p> <p>Surveyor reviewed Resident #2's Holistic Assessment with an AL Manager signature, dated NJ EX Order: 264b1 revealed, "Cognitive Patterns, Mood, and Expressions: the same Service Plan Approaches as listed on the NJ EX Order: 264b1 HSP."</p> <p>Review of Resident #2's Clinical Notes Report (CNR) revealed the following documentations: 1. A review of Resident #2's CNR dated 4/10/2023 at 12:28 PM [p.m.], written by the AL Manager (ALM) stated, "...resident became extremely escalated while CMA (Certified Medication Assistant) was attempting to assist NJ EX Order: 264b1 to open a large package in NJ EX Order: 264b1 kitchen. CMA reported resident started to NJ EX Order: 264b1 and use NJ EX Order: 264b1, CMA was trying to NJ EX Order: 264b1 resident and reassure NJ EX Order: 264b1 that she was trying to help, resident continued to NJ EX Order: 264b1 at CMA. Resident was attempting to open the NJ EX Order: 264b1 but was unsuccessful causing increasing NJ EX Order: 264b1, resident threw the NJ EX Order: 264b1 across the room in the direction of the CMA ..."</p> <p>2. On 4/10/2023 at 5:09 PM [p.m.] the Licensed</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 23</p> <p>Practice Nurse (LPN) stated "Resident was made aware of NJ EX Order. 264b1) and Occupation therapy evaluation recommendation but decline, risk versus benefit explained ..."</p> <p>3. On 5/11/2023 at 4:03 PM [p.m.], the ALM stated, "When CMA was leaving his/her apartment, resident cursed at CMA ...OT (Occupational Therapy) offered to work on bed posistiong (positioning), but resident refused ..."</p> <p>4. On 5/12/2023 at 12:27 PM, the LPN stated "LATE NOTE for 5/11/23: At around 8:15 p.m., Resident #2 self-propelled in his/her wheelchair to the nurse's office to ask the asides to help her transfer to his/her [REDACTED]. This writer offered to help him/her with transfer since both aides were busy helping other residents. Resident #2 responded by saying 'No they not, they must be hiding somewhere' and declined my offer to assist him/her to transfer, preferred to wait for them ... Resident #2's assigned aide came out of resident's room with boxes on her hands. Resident #2 then went to his/her apartment, picked up the phone and called his/her [REDACTED] saying there is no one here to help me, when I was right by [REDACTED] ready to help. Resident was [REDACTED] and NJ EX Order. 264b1."</p> <p>5. On 5/19/2023 at 3:59 PM, the ALM stated "Resident came to nurse's station looking or specific CMA to make his/her [REDACTED] this CMA was not assigned to him/her and not present at the time to assist. Resident was complaining ...started to [REDACTED] and call out for CMA in the hallway. ALM and Wellness Manager offered to help make the [REDACTED] as requested but the resident declined ...Resident continued to [REDACTED] and demand for CMA to make tea. Due to resident continuing to become NJ EX Order. 264b1, ALM called to CMA</p>	A 751		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20A105	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/06/2023
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NAME OF PROVIDER OR SUPPLIER CONTINUING CARE AT LANTERN HILL	STREET ADDRESS, CITY, STATE, ZIP CODE 537 MOUNTAIN AVENUE NEW PROVIDENCE, NJ 07974
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 751	<p>Continued From page 24</p> <p>to request her assistance in getting residents [REDACTED]. ALM assured resident that CMA was on her way."</p> <p>6. On 6/2/2023 at 5:55 PM, the Registered Nurse (RN #1) stated the "ALM was made aware of staff complaint on [REDACTED] 3. Resident #2 reported CMA raised her voice, when asked if resident felt CMA was verbally abusing, Resident #2 denied and said CMA was trying to encourage him/her to continue making efforts to do his/her bedtime routine. Resident agreed he/she was becoming [REDACTED] by situation."</p> <p>7. On 6/7/2023 at 03:04 PM, the ALM stated "ALM was made aware of staff complaint on [REDACTED] by way of statement received from 3-11 pm shift on [REDACTED] CMA reported the Resident became increasingly [REDACTED] when attempting to perform bedtime routine. CMA reported she offered to assist multiple times and resident declined ...started [REDACTED] at CMA, telling her to [REDACTED] and using [REDACTED]. Resident [REDACTED] and [REDACTED] while holding up [REDACTED] to CMA"</p> <p>8. On 6/19/2023 at 03:04 PM, the RN #1 stated "On [REDACTED] this nurse discussed with resident the use of a [REDACTED] again per OT and Dr. recommendation ...He/She declined [REDACTED] and [REDACTED] ..."</p> <p>9. On 8/15/2023 at 1:34 PM, the ALM stated, "ALM attended scheduled meetings for resident with MD (Physician)MD and resident reviewed recent recommendations, including [REDACTED], resident declined all MD recommendations."</p> <p>10. On 9/2/2023 at 02:53PM, the RN #2 stated, "This writer was notified by nurse to go to AL to</p>	A 751		

New Jersey Department of Health

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NAME OF PROVIDER OR SUPPLIER CONTINUING CARE AT LANTERN HILL	STREET ADDRESS, CITY, STATE, ZIP CODE 537 MOUNTAIN AVENUE NEW PROVIDENCE, NJ 07974
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A 751	<p>Continued From page 25</p> <p>assist resident with the transfer to ER (Emergency Room) for NJ EX Order: 264b1) Eval (Evaluation) due to NJ EX Order: 264b1 behavior during morning care-resident hit the staff. Dr. and family was made aware, Ambulance called. EMS (Emergency Medical Service) arrived, resident became NJ EX Order: 264b1 to go to Hospital, MD provided scrip (prescription) with the order to send resident out. Resident did not go to ER."</p> <p>During an interview on 11/6/2023 at 10:18 a.m., the Administrator stated when the NJ EX Order: 264b1 incident occurred when Resident #2 attempted to NJ EX Order: 264b1 a staff member, the staff member called her so she notified the doctor [physician] to see if there was a medical issue with him/her. She continued to say "Resident #2's physical interactions were becoming a pattern, the Resident refused a lot of interventions and he/she was having more NJ EX Order: 264b1 behaviors. Resident #2 had a history of NJ EX Order: 264b1 , [but] now [was] getting NJ EX Order: 264b1 ."</p> <p>During an interview on 11/6/2023 at 2:12 p.m., the Director of Nursing (DON) stated, "the health service plan is [the] whole interdisciplinary team-holistic care plan (CP), we [facility] are person-centered ...holistic is very thorough, the general service plan (GSP) is pulled from the holistic. [The] GSP will show NJ EX Order: 264b1 and nursing interventions. We handwrite and date on [the] pulled service plan, [it] has to be accurate to resident at that time, there's just one GSP."</p> <p>The DON continued to say "there's not separate care plans ...the HSP is [the] whole [care plan]. The RN assessment is embedded in [the] holistic service plan." [The] RN and the AL (Assisted Living) Manager signs off on it and changes are handwritten."</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 26</p> <p>During an interview at 3:12 p.m., the Administrator stated the holistic service plan is the whole service plan, if there are new interventions before the 6 months, notes are handwritten on [the] service plan. The Administrator continued to say "on [REDACTED] there wasn't much to update, [for] actions and expressions ... there were no new interventions."</p> <p>During an interview at 3:16 p.m., the Administrator, in the presence of the DON, stated, "Resident #2 was [REDACTED] there was nothing to do, interventions or follow-up needed after the incident"</p> <p>During an interview with the Administrator at 3:54 p.m., in the presence of the DON, the Administrator stated that the care plan generates the HSP. Then, the DON said, "[the] RN signs off every 6 months."</p> <p>At the time of survey on 11/6/23, there was no documented evidence provided that Resident #2 had a [REDACTED] HSP. In addition, there was no evidence that the HSP was updated after the [REDACTED] incident when the resident attempted to [REDACTED] a CNA while providing and assisting with the resident's care.</p> <p>A review of the policy titled "Holistic Assessment Assisted Living/Memory Care" with a Version "Date: 4/2023" revealed, "Policy: Residents who will be residing in either Assisted Living or Memory Care neighborhoods will be evaluated and assessed at time of admission, re-admission, every 6 months and/or with any significant change of condition to support their care needs according to [facility] clinical policies and state regulations ...Procedure ...Every six months the</p>	A 751		

New Jersey Department of Health

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A 751	<p>Continued From page 27</p> <p>resident will be re-assessed by the AL Manager and Wellness Manager/nurse to support their care needs and provide services according to [facility] policy and state regulations using the Holistic Assessment in resident's electronic medical record."</p> <p>A review of the policy titled "Care/Service Plans" with a Version Date: 5/2021 revealed, "Purpose/Scope: Each guest/resident will have an individualized Care/Service plan developed. Care/Service Plans will include guest/resident preferences, strengths, routines, personal and cultural preferences and choices as well as clinical needs ...Procedure: Assisted Living/Memory Care revealed ...15. Care/Service Plan will be updated by hand in-between completion of the holistic assessments/care/service plans. A. Care/Service Plan approaches will be reviewed and/or revised, as applicable, at the following intervals: i. Normally 30 days after admission/readmission[,] ii. With the completion of the My Health and Wellness Review normally every [every] 60 days thereafteriii. With the completion of the Holistic Assessment every six months[,] iv. With any significant change of condition[,] v. In accordance with state specific regulations. 16. Each individual resident's Service package/Care Level will be reviewed with each assessment and may be altered based on assessment. 17 . Care/Service Plan review will include input from the guest/resident, responsible party and interdisciplinary team. 18. All interdisciplinary team members will document any updates/changes on care plan copy in the guest/resident suite/apartment or designated accessible location and review updated with designated care associate. 19. Documentation standards will be followed when documenting</p>	A 751		

New Jersey Department of Health

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A 751	Continued From page 28 changes/updates (i.e., sign/date each entry, highlight/date/sign for items that have been discontinued etc.)" N.J.A.C.: 8:36-7.3 (a)(b)(c)	A 751		

STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER 20A105	MULTIPLE CONSTRUCTION A. Building B. Wing	DATE OF REVISIT 1/23/2024
Y1	Y2	Y3
NAME OF FACILITY CONTINUING CARE AT LANTERN HILL		STREET ADDRESS, CITY, STATE, ZIP CODE 537 MOUNTAIN AVENUE NEW PROVIDENCE, NJ 07974

This report is completed by a State surveyor to show those deficiencies previously reported that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the State Survey Report (prefix codes shown to the left of each requirement on the survey report form).

ITEM Y4	DATE Y5	ITEM Y4	DATE Y5	ITEM Y4	DATE Y5
ID Prefix A0310	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # 8:36-3.4(a)(1)	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____	12/23/2023	LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	

REVIEWED BY STATE AGENCY <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE
REVIEWED BY CMS RO <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	TITLE	DATE

FOLLOWUP TO SURVEY COMPLETED ON 11/6/2023	<input type="checkbox"/> CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER 20A105	MULTIPLE CONSTRUCTION A. Building B. Wing	DATE OF REVISIT 1/23/2024
Y1	Y2	Y3
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Reg. # 8:36-3.4(a)(1)	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____	12/23/2023	LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	
ID Prefix _____	Correction	ID Prefix _____	Correction	ID Prefix _____	Correction
Reg. # _____	Completed	Reg. # _____	Completed	Reg. # _____	Completed
LSC _____		LSC _____		LSC _____	

REVIEWED BY STATE AGENCY <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE
REVIEWED BY CMS RO <input type="checkbox"/>	REVIEWED BY (INITIALS)	DATE	TITLE	DATE

FOLLOWUP TO SURVEY COMPLETED ON 11/6/2023
 CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY?
 YES NO