

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 03/30/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315201	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 11/06/2020
NAME OF PROVIDER OR SUPPLIER CAMBRIDGE REHABILITATION AND HEALTHCARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 255 EAST MAIN ST MOORESTOWN, NJ 08057		
(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) COMPLETION DATE	
F 000	INITIAL COMMENTS COMPLAINT # NJ138135, #NJ140384, #NJ140814 CENSUS: 89 SAMPLE SIZE: 4 THE FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE REQUIREMENTS OF 42 CFR PART 483, SUBPART B, FOR LONG TERM CARE FACILITIES BASED ON THIS COMPLAINT VISIT.	F 000			
F 839 SS=D	Staff Qualifications CFR(s): 483.70(f)(1)(2) §483.70(f) Staff qualifications. §483.70(f)(1) The facility must employ on a full-time, part-time or consultant basis those professionals necessary to carry out the provisions of these requirements. §483.70(f)(2) Professional staff must be licensed, certified, or registered in accordance with applicable State laws. This REQUIREMENT is not met as evidenced by: Based on interviews and review of other pertinent facility documents on 11/5/2020 and 11/6/2020, it was determined that the facility failed to validate that a Registered Nurse (RN) and a Licensed Practical Nurse (LPN) working at the facility had an active New Jersey Nursing License. The facility also failed to follow their Policy titled "Credentialing of Nursing Service Personnel" while working at the facility. These deficient practices were evidenced by the following:	F 839	Preparation and/or execution of this plan of correction does not constitute an admission or agreement by Provider of the truth or facts alleged, or conclusion set forth in the Statement of Deficiencies. This plan of correction is prepared and/or executed because the provisions of Federal and State laws that require it. F839 Staff Qualifications 1. No residents were effected. Agency LPN and RN without New Jersey	12/2/20	

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

TITLE

(X6) DATE

Electronically Signed

11/23/2020

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 839	<p>Continued From page 1</p> <p>A Facility Reported Event (FRE) dated 6/15/2020, sent to the New Jersey Department of Health (NJDOH) regarding a medication event that involved the RN.</p> <p>During review of the employee file for the RN, it was noted that his New Jersey Nursing License expired on 5/31/2020.</p> <p>Review of the Facility Nursing Staffing schedule showed that the RN worked 8 shifts after his nursing license expired on 5/31/2020. He worked 71 hours from 6/5/2020 to 6/14/2020.</p> <p>A FRE dated 10/19/2020, was sent to the NJDOH regarding a medication event that involved the LPN.</p> <p>During review of the employee file for the LPN, it was noted that her New Jersey Nursing License expired on 5/13/2013.</p> <p>Review of the Facility Nursing Staffing schedule showed that the LPN worked 11 shifts from 10/7/2020 to 10/17/2020, for a total of 79.75 hours.</p> <p>On 11/5/2020 at 11:20 a.m., the Administrator stated the Human Resources Director (HRD) does the hiring for agency nurses.</p> <p>In a phone interview on 11/5/2020 at 11:45 a.m., the HRD stated she is responsible for hiring all nurses and for validating licenses. The Staffing Agency sends HRD the nursing licenses.</p> <p>On 11/5/2020 at 1:25 p.m., the Administrator stated he has an Agency Policy and the HRD confirms with the Agency the validity of the (nursing) license, before hiring. The Administrator</p>	F 839	<p>licensure have not worked in the Center since 10/17/2020 and 6/14/2020, respectively.</p> <p>2. All staff holding New Jersey licensure or registry have the potential to be affected. An audit on 11/9/2020 of all licensed/registered nursing staff was conducted to assure that all staff hired by the Center and those contracted with staffing agencies hold an active New Jersey Nursing License.</p> <p>3. To prevent the potential for reoccurrence, the Human Resources Director and/or designee with responsibilities for hiring licensed nursing personnel and staffing through contracted agencies were educated on the policy for Credentialing of Nursing Service Personnel to assure all licensed nursing personnel have valid/active nursing licenses.</p> <p>4. To monitor and maintain ongoing compliance, the LNHA and/or designee will audit all new licensed nursing personnel for active licensure in New Jersey daily for one month then weekly for one month and then monthly for one month. Results will be presented to the Center QAPI team monthly for continued review and recommendations.</p>		

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F 839	<p>Continued From page 2</p> <p>was not aware of the expired licenses. The Administrator agreed that the HRD should have checked to ensure the RN and LPN nursing licenses were not expired.</p> <p>On 11/6/2020 at 10:30 a.m., the surveyor received a Facility Policy, revised date of May 2019, titled "Credentialing of Nursing Service Personnel" from the Administrator, who stated this Policy pertains to agency staff as well.</p> <p>On 11/6/2020 at 11:00 a.m., the HRD informed the surveyor that since the LPN worked here previously she did not recheck any of her credentials. She did not know her license was expired.</p> <p>Record Review of Facility Policy, revised date of May 2019, titled "Credentialing of Nursing Service Personnel" revealed "Policy Statement" "Nursing service personnel who require a license or certification to provide resident care or treatment without direction or supervision within the scope of the individual's license or certification must present verification of such license or certification prior to or upon employment ... "Policy Interpretation and Implementation" 1. Nursing personnel who require a license or certification to perform resident care or treatment without direction or supervision must present verification of such license/certification to the Director of Nursing Services prior to or upon employment. 2. Nursing personnel require a license/certification are not permitted to perform direct resident care services until all licensing ...have been completed. 6. Should the investigation reveal the applicant does not hold a valid licenseappropriate state licensing boards and authorities will be notified of the applicant's attempt to practice without a license ..."</p>	F 839			

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F 839	Continued From page 3 N.J.A.C.: 8:39-9.3(a), (3), (4)	F 839			