

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 60a005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/18/2020
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NAME OF PROVIDER OR SUPPLIER SPRING HILLS AT MORRISTOWN	STREET ADDRESS, CITY, STATE, ZIP CODE 17 SPRING PLACE MORRISTOWN, NJ 07960
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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 000	<p>Initial Comments</p> <p>Initial Comments: A COVID-19 Focused Infection Control Survey was conducted by the State Agency on 11/18/2020. The facility was found not to be in compliance with the New Jersey Administrative Code 8:36 infection control regulations standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19.</p> <p>Census - 76</p> <p>The facility must submit a plan of correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.</p>	A 000		
A 891	<p>8:36-10.5(a) Dining Services</p> <p>(a) The facility and personnel shall comply with the provisions of N.J.A.C. 8:24, Retail Food Establishments and Food and Beverage Vending Machines Chapter XII of the New Jersey Sanitary Code.</p>	A 891		

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

TITLE

(X6) DATE

01/11/21

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A 891	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and interview, and New Jersey Sanitary Code, the facility failed to ensure the dishwasher temperature gauge for the wash cycle was in working order in accordance with the provisions of N.J.A.C. 8:24 "Sanitation in Retail Food Establishments and Food and Beverage Vending Machines" Chapter XII of the New Jersey Sanitary Code, and ensure dishes and silverware were properly sanitized for residents. This had the potential to affect all residents in the facility, and the deficient practice occurred during the COVID-19 pandemic.</p> <p>This deficient practice was evidenced by the following:</p> <p>Reference: New Jersey Sanitary Code, "Sanitation in Retail Food Establishments and Food and Beverage Vending Machines," Section 8:24-4.9(c), read, "A ware washing machine shall be equipped with a temperature measuring device that indicates the temperature of the water: 1. In each wash and rinse tank"</p> <p>On 11/18/2020 at 3:20 PM, the operations of the dishwasher were observed. The dish machine had two thermometers, one for the wash cycle and one for the rinse cycle. The dishwasher was a high temperature machine. The wash cycle was expected to reach a water temperature of at least 150 degrees Fahrenheit. The rinse cycle was expected to reach a water temperature of at least 180 degrees Fahrenheit. The thermometer gauge for the wash cycle was determined to be inoperable. The thermometer for the rinse cycle was operable and reading in the 180-degree range. The dishwasher ran through four cycles</p>	A 891		
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A 891	<p>Continued From page 2</p> <p>before it was determined to be inoperable. Upon further investigation, it was determined the staff were not monitoring the wash cycle of the dish machine for proper water temperatures.</p> <p>On 11/18/2020 at 3:26 PM, the Food Service Director (FSD) was interviewed. He stated that only the rinse temperatures were logged on the Dish Machine Temperature Log sheet. He stated that he did not know he was supposed to have the wash cycle temperature documented as well. He was unable to state when the wash cycle thermostat was last observed to be working.</p> <p>On 11/18/2020 at 3:50 PM, the Corporate Chef was interviewed. He stated that it was his expectation of each Food Service Director to be monitoring the Dish Machine Temperature Log and assure that the dishwasher machines were in proper working order.</p> <p>On 11/18/2020 at 7:29 PM, the Executive Director (ED) was interviewed. The ED stated it was her expectation that the Food Service Director was to monitor the dish machine temperature logs and make sure that it was working properly.</p>	A 891		
A1301	<p>8:36-18.3(a)(6) Infection Prevention and Control Services</p> <p>(a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following:</p> <p>6. Protocols for identification of residents with communicable diseases and education of residents regarding prevention and spread of communicable diseases;</p>	A1301		

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A1301	<p>Continued From page 3</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation and interviews, the facility failed to ensure residents maintained six-foot social distancing and wearing facial coverings in accordance with the New Jersey Department of Health (NJDOH) Executive Directive No. 20-026-1 for Phase 2 of reopening. This affected eight of eight unsampled residents observed waiting outside the dining room for meal service. This deficient practice had the potential to affect all residents which occurred during the COVID-19 pandemic..</p> <p>This deficient practice was evidenced by the following:</p> <p>Reference: Executive Directive No. 20-026-1, dated 10/20/2020 revealed the following: 1. "...3. Cohorting, PPE and Training Requirements in Every Phase: ...ii. Facilities shall implement universal source control for everyone in the facility. All residents, whether they have COVID-19 symptoms or not, must practice source control when around others (surgical mask if supply is available) in accordance with CDC guidance at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html... Source control may be provided with cloth face coverings or facemasks"</p> <p>2. "...IV. Required standards for services during each phase. ... 3. Phase 2: ... ix. Maintain infection prevention and control measures including social distancing</p>	A1301		
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A1301	<p>Continued From page 4</p> <p>and source control measures"</p> <p>1. On 11/18/2020 at 12:05 PM, eight residents were observed waiting outside the dining room for their turn to eat lunch. The residents were not maintaining a six-foot social distancing and four of the residents were wearing their facial covering under their chin.</p> <p>On 11/18/2020 at 12:10 PM, the Food Service Director was interviewed. He stated the facility had recently reopened the dining room for communal dining with limited seating to maintain the six-foot social distancing. Residents were seated on a first come first serve basis and were asked to wait in their apartments until a staff member could bring them to the dining room. He stated the residents do not like to wait in their apartments and started waiting outside the dining room. He stated, "We (the staff) are constantly reminding the them to wear their masks up over their nose and mouth and to wait in their apartments, but they just won't."</p> <p>On 11/18/2020 at 12:53 PM, Resident #2 was interviewed. Resident #2 stated, "You can tell them (the residents) to stay six feet away, but they don't listen. Residents here do what they want."</p> <p>On 11/18/2020 at 1:12 PM, Resident #1 was interviewed. Resident #1 stated that the residents were taught to stay six feet apart and wear their masks, but "no one listened." Resident #1 stated that the residents didn't want to miss their turn in the dining room, so they lined up in the hallway. The resident also stated, "Occasionally, an employee will tell us to wear our mask or keep six feet apart."</p>	A1301		

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A1301	Continued From page 5 On 11/18/2020 at 7:29 PM, the Executive Director (ED) was interviewed. She stated when they re-opened the dining room, the nursing staff was instructed to bring residents down to the dining room as a table opened. She did not want the residents gathering in the hallway. She stated that residents were not supposed to come down on their own. She stated that they will have to have someone outside the dining room to monitor the residents until it was their time to dine or send the residents back to their apartments. The ED stated that nursing staff was supposed to be monitoring residents to make sure all were wearing a mask.	A1301		
A1333	8:36-18.4(k) Infection Prevention and Control Services (k) Equipment and supplies used for sterilization, disinfection, and decontamination purposes shall be maintained according to manufacturers' specifications. This REQUIREMENT is not met as evidenced by: Based on observation and interviews, the facility failed to follow the manufacturer's specifications for the use of disinfectant in the length of contact time required for effective disinfecting performance of the solution, for one of one dietary staff observed. This occurred during the COVID-19 pandemic and had the potential to affect all residents in the facility. This deficient practice was evidenced by the following: Reference:	A1333		

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A1333	<p>Continued From page 6</p> <p>EPA List N, indicated for Santec Eight, EPA Reg. No. 1839-86, the contact time for effectiveness against COVID-19 was 10 minutes. This meant the disinfectant needed to remain on the surface for 10 minutes in order to kill COVID-19.</p> <p>During an interview with the Food Service Director (FSD) on 11/18/2020 at 3:26 PM, he stated that the facility was using Santec Eight as a disinfectant on hard surfaces. He stated that the dining room staff sprayed it on the tables and left it for about 30 seconds before wiping it off. He stated that it was a new chemical recommended by the corporate office for the prevention of COVID-19.</p> <p>The FSD stated he had not read the manufacturer's recommendations for the dwell time for Santec Eight. He also stated he had not received any formal training on how to properly use the chemical. Upon reading the manufacturer's recommended dwell time for the disinfectant, the FSD stated, "We don't have 10 minutes in between dining room seating to let that chemical sit for 10 minutes."</p> <p>On 11/18/2020 at 6:27 PM, surveyor observed a dining room server used the Santec Eight, sprayed on the tables and immediately wiped it dry. Upon awareness, the FSD stated that he would be doing "quite a bit of education."</p> <p>On 11/18/2020 at 7:29 PM, the Executive Director was interviewed. She stated additional in-services would need to be done to ensure all chemicals were used per manufacturer's recommendation.</p>	A1333		

STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER 60a005	MULTIPLE CONSTRUCTION A. Building B. Wing	DATE OF REVISIT 1/11/2021
NAME OF FACILITY SPRING HILLS AT MORRISTOWN	STREET ADDRESS, CITY, STATE, ZIP CODE 17 SPRING PLACE MORRISTOWN, NJ 07960	

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 A0891	Correction	ID Prefix A1301	Correction	ID Prefix A1333	Correction
Reg. # 8:36-10.5(a)	Completed	Reg. # 8:36-18.3(a)(6)	Completed	Reg. # 8:36-18.4(k)	Completed
LSC	11/19/2020	LSC	11/24/2020	LSC	11/24/2020
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 11/18/2020		<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		

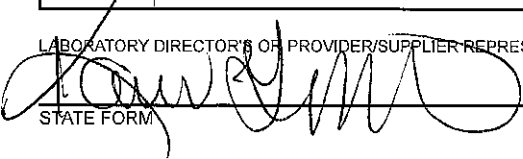
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A 000	<p>Initial Comments</p> <p>Initial Comments: A COVID-19 Focused Infection Control Survey was conducted by the State Agency on 11/18/2020. The facility was found not to be in compliance with the New Jersey Administrative Code 8:36 infection control regulations standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19.</p> <p>Census - 76</p> <p>The facility must submit a plan of correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.</p>	A 000		
A 891	<p>8:36-10.5(a) Dining Services</p> <p>(a) The facility and personnel shall comply with the provisions of N.J.A.C. 8:24, Retail Food Establishments and Food and Beverage Vending Machines Chapter XII of the New Jersey Sanitary Code.</p> <p>This REQUIREMENT is not met as evidenced by:</p>	A 891		

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



TITLE

Executive Director

(X6) DATE

11/30/20

A1333

The Law requires that all equipment and supplies used for sterilization and decontamination purposes shall be maintained according to the manufacturers specifications.

All products being utilized by the staff for sterilization and decontamination must be reviewed by the DDS. All instructions for the use of said products must be in serviced to all staff. Written instructions for the use of said product must be written and placed in view of all staff. The dwell time of each product will be visibly marked on the bottle to insure the proper time is followed and cleaning can be effective per the manufacture direction.

The DDS will monitor the use and the timing of each staff member. **Effective Immediately**

A1301

The law requires that there are protocols in place for identification of residents with communicable diseases and education of residents regarding prevention and spreading of communicable diseases.

All residents without masks will be given masks and will be instructed how to wear them. Residents will be instructed to stand on the yellow lines while waiting to enter the dining room for meals. The Lines will be 6 feet apart and designated by yellow tape. The maintenance department will ensure the patency of said tape. A department manager will be scheduled daily to monitor the residents at mealtime. They will be responsible for maintenance of proper distancing, monitoring of face masks and the patency of the yellow tape.

The executive director will be responsible to evaluate the effectiveness of this procedure daily Effective 11/20/20

A891

The law states that the dishwashing temperature during the wash cycle must read 155 to 160 degrees and the rinse temperature must be 180 - 195 degrees. All temperatures need to be monitored and recorded daily

The dishwasher person will be assigned to record all wash and rinse cycle temperatures before each meal. A clipboard with the required temperatures listed will have columns for wash and rinse cycle temps and the date and time to record said temperatures. The temperature sheet will be initialed after each entry.

Staff will be in-serviced on the regulation and what to do if the correct temperature is not reached.

The DDS or the Administrator on Duty will initial the temperature log daily to ensure proper function and documentation. **Effective Immediately**