

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROV DER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20A001	(X2) MULT PLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/15/2020
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NAME OF PROVIDER OR SUPPLIER BROOKDALE CAPE MAY	STREET ADDRESS, CITY, STATE, ZIP CODE 591 ROUTE 9 SOUTH CAPE MAY COURT HOUSE, NJ 08210
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFIC ENCES (EACH DEFIC ENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENT FY NG INFORMATION)	D PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments Initial Comments: A Covid-19 Focused Infection Control Survey was conducted by the State Agency on 6/15/20. 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.	A 000		
A 310	8:36-3.4(a)(1) Administration (a) The administrator or designee shall be responsible for, but not limited to, the following: 1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights; This REQUIREMENT is not met as evidenced by: Based on observation, interview, and review of facility records, it was determined that the facility Executive Director (ED) failed to ensure the development and implementation of comprehensive policies and procedures to address, manage, and control the spread of Covid-19 in accordance with April 4, 2020 instructions issued by the Commissioner of the	A 310		

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

TITLE

(X6) DATE

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A 310	<p>Continued From page 1</p> <p>Department of Health (DOH) and the facility's internal policy on social distancing.</p> <p>This deficient practice was evidenced by:</p> <p>During a tour with the Health and Wellness Director 6/15/20 at 9:30 a.m. the surveyor observed 7 residents participating in a group activity in a Clare Bridge unit common room. The residents were observed to be answering "trivia" questions presented by a facility staff member. Residents were observed to be sitting within arm's reach of each other and not wearing masks. The staff member was wearing a surgical face mask but was observed to be within arms reach of several residents.</p> <p>At 11:00 a.m. the surveyor reviewed the facility policy, effective 2/20, "Outbreak Response Plan NJ-14." The facility policy did not address the cancellation of group activities. The surveyor also reviewed the policy "Communicable Disease Control." Revised 4/2020. This policy stated in item E "Social Distancing: Social distancing measures are essential in containing communicable disease outbreaks, especially when virus infections are mostly spread by close contacts within a community. Social distancing aims to reduce the frequency of contact and increase physical distance between persons, thereby reducing the risks of person-to-person transmission."</p> <p>At 2:00 p.m. the ED confirmed that the residents in the [REDACTED] unit were participating in a group activity and were not socially distanced. The ED did not ensure group activities were cancelled in accordance with the instructions of the Commissioner of the DOH issued on 4/4/20 and did not ensure that the facility policy regarding social distancing was followed. The ED</p>	A 310		

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A 310	Continued From page 2 provided the surveyor with a Plan of Correction (POC) at 2:30 p.m. which was accepted. A follow up survey was completed on 6/19/20 and the facility was found to be in compliance with the POC.	A 310		

7/2/2020

Plan of Correction

1. On 6/16/20 all Memory Care associates were in-serviced on "no group activities" and "social distancing." This in-service was conducted by [REDACTED] our Activities Manager.
2. All residents will remain in their individual rooms and be served all meals in their rooms.
3. [REDACTED] will conduct activities with residents in their rooms for engagement purposes ensuring she is social distancing. [REDACTED] will also provide activity supplies for residents to enjoy when alone.
4. [REDACTED] (MC Nurse Manager, RN) will monitor the Memory Care to ensure our Communicable Disease Control Policy is followed. LPN's will monitor the Memory Care when Tina is not in the building by walking the unit and conducting room checks every shift. LPN's are to speak about and remind associates about group activities and social distancing every shift during the change meeting.
5. All corrections were in place and corrected by 6/16/2020

