

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>061803</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>10/17/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FOOTHILL ACRES REHABILITATION &amp; NURSIN</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>39 EAST MOUNTAIN ROAD HILLSBOROUGH, NJ 08844</b>
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S 000	<p>Initial Comments</p> <p>Complaint #: NJ147763, NJ146794 Census: 121 Sample Size: 5</p> <p>TYPE OF SURVEY: Complaint Survey</p> <p>The facility is not in substantial compliance with all of the standards in the New Jersey Administrative Code 8:39, Standards for Licensure of Long-Term Care Facilities.</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>	S 000		
S 560	<p>8:39-5.1(a) Mandatory Access to Care</p> <p>(a) The facility shall comply with applicable Federal, State, and local laws, rules, and regulations.</p> <p>This REQUIREMENT is not met as evidenced by: Complaint Intake#: NJ146794</p> <p>Based on interviews, facility document review, and New Jersey Department of Health (NJDOH) memo, dated 01/28/2021, it was determined that the facility failed to ensure staffing ratios were met for 10 of 42 shifts reviewed. This deficient practice had the potential to affect all residents.</p> <p>Findings included:</p>	S 560	<p>PLAN OF CORRECTION: S560 8:39-5.1(a) Mandatory Access to Care – STATE'S STAFFING RATIOS</p> <p>CORRECTIVE ACTION(S):</p> <ul style="list-style-type: none"> <li>Foothill Acres is actively seeking to hire CNAs and train NAs to become CNAs in order to ensure that all shifts are scheduled to comply with ratios, that any callouts or no-shows result in calls being</li> </ul>	10/18/21

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

TITLE

(X6) DATE  
11/12/21

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S 560	<p>Continued From page 1</p> <p>Reference: New Jersey Department of Health (NJDOH) memo, dated 01/28/2021, "Compliance with N.J.S.A. (New Jersey Statutes Annotated) 30:13-18, new minimum staffing requirements for nursing homes," indicated the New Jersey Governor signed into law P.L. 2020 c 112, codified at N.J.S.A. 30:13-18 (the Act), which established minimum staffing requirements in nursing homes. The following ratio(s) were effective on 02/01/2021:</p> <p>One certified nurse aide to every eight residents for the day shift.</p> <p>One direct care staff member to every 10 residents for the evening shift, provided that no fewer than half of all staff members shall be certified nurse aides, and each direct staff member shall be signed in to work as a certified nurse aide and shall perform nurse aide duties; and</p> <p>One direct care staff member to every 14 residents for the night shift, provided that each direct care staff member shall sign in to work as a certified nurse aide and perform certified nurse aide duties.</p> <p>1. A review of the "Nurse Staffing Report," completed by the facility for the weeks of 10/02/2021 - 10/16/2021, indicated staff-to-resident ratios that did not meet the minimum requirements as listed below:</p> <p>10/03/2021 - 12 CNAs to 123 residents on the day shift. 10/04/2021 - 13 CNAs to 122 residents on the day shift.</p>	S 560	<p>made by the shift supervisor to fill the shift. Facility has documented evidence to reflect facility's Recruitment and Retention Efforts in its attempts to comply with the staffing ratios. No residents have been adversely affected.</p> <p>IDENTIFICATION OF RESIDENTS WHO HAVE THE POTENTIAL TO BE AFFECTED BY THE SAME DEFICIENT PRACTICE</p> <ul style="list-style-type: none"> <li>All residents have the potential to be affected by this situation.</li> </ul> <p>MEASURES PUT IN PLACE:</p> <ul style="list-style-type: none"> <li>Facility's Recruitment and Retention Strategies and Efforts to comply with the State's Staffing Ratios have been in progress, which include but are not limited to the following: <ul style="list-style-type: none"> <li>Offer Sign on bonuses to attract staff</li> <li>Recruitment bonus to encourage referrals from current staff and new hired staff</li> <li>Offering daily and weekend bonuses to attract overtime or PRN staff shifts</li> <li>Aggressively running ads in various social media platforms</li> <li>Attended job fairs outside of facility</li> <li>Flexible shifts and schedules</li> <li>Increased wages to be well above state minimum</li> <li>Increased agency staff wages</li> <li>Approved agency overtime</li> <li>Increased expedience getting staff on board by offering Orientation every week</li> <li>Working with C.N.A. schools to recruit new grads and to send temp N.A.'s for certification</li> </ul> </li> </ul>	
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S 560	<p>Continued From page 2</p> <p>10/06/2021 - 15 CNAs to 122 residents on the day shift. 10/08/2021 - 14 CNAs to 120 residents on the day shift. 10/08/2021 - Half of the evening staff members were not CNAs. There were 21 total staff members present on the evening shift, only 10 were CNAs. There should have been 11 CNAs present on the evening shift. 10/10/2021- 12 CNAs to 120 residents on the day shift. 10/11/2021- 14 CNAs to 121 residents on the day shift. 10/12/2021- 14 CNAs to 120 residents on the day shift. 10/13/2021- 13 CNAs to 120 residents on the day shift. 10/16/2021- 13 CNAs to 119 residents on the day shift.</p> <p>During an interview on 10/16/2021 at 7:00 PM, the Director of Nursing (DON) stated they were aware of the mandate regarding staffing ratios. The DON stated they had a hard time recruiting CNAs due to the training programs nearby closing. The DON stated the facility had increased their wages, posted on all the job boards, had a booth at several job fairs, and worked with the state agency (SA) to accept nurse aids (NA) for training and certification. The DON stated the SA approved the training program, and they had a few NAs that had completed the program and a few more who were close to completion. The DON stated call offs were difficult to fill for some shifts, and the other staff did their best to fill the holes. The DON stated they utilized agency staff and got approval to pay overtime to those staff members, which they previously could not do. The DON stated</p>	S 560	<ul style="list-style-type: none"> <li>o Allow C.N.A. training classes in facility</li> <li>o Offer Tuition reimbursement in full for all new grads</li> <li>o Hiring Temp Aides</li> <li>o Using staffing agencies</li> <li>o Facility currently offering housing</li> </ul> <p>MONITORING OF MEASURES:</p> <ul style="list-style-type: none"> <li>• Staffing Coordinator or designee will provide weekly reports to the Director of Nursing and Administrator regarding all efforts made to try to comply with the State's Staffing Ratios.</li> <li>• Reports will be submitted to the QAPI Committee monthly X 3 months.</li> <li>• Director of Nursing will submit monthly reports to document status of all recruitment efforts. Director of Nursing will report monthly to the QAPI Committee X 3 months.</li> </ul>	
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S 560	Continued From page 3  agency staff were picking up overtime shifts and that was helping fill vacancies.	S 560		