

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 060409	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/21/2021
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NAME OF PROVIDER OR SUPPLIER PREMIER CADBURY OF CHERRY HILL	STREET ADDRESS, CITY, STATE, ZIP CODE 2150 ROUTE 38 CHERRY HILL, NJ 08002
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S 000	Initial Comments THE FACILITY WAS NOT IN COMPLIANCE WITH THE STANDARDS IN THE NEW JERSEY ADMINISTRATIVE CODE, CHAPTER 8:39, STANDARDS FOR LICENSURE OF LONG TERM CARE FACILITIES. 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 THE PROVISIONS OF THE NEW JERSEY ADMINISTRATIVE CODE, TITLE 8, CHAPTER 43E, ENFORCEMENT OF LICENSURE REGULATIONS.	S 000		
S 560	8:39-5.1(a) Mandatory Access to Care (a) The facility shall comply with applicable Federal, State, and local laws, rules, and regulations. This REQUIREMENT is not met as evidenced by: Based on interviews and review of pertinent facility documentation, it was determined that the facility failed to maintain the required minimum direct care staff to resident ratios for the day shift and night shift as mandated by the State of New Jersey. This was evident for 13 of 14-day shifts and 2 of 14-night shifts reviewed. Findings include: 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,	S 560	1. What corrective action (s) will be accomplished for those residents founds to have been affected by the practice It was noted that facility did not maintain required minimum direct care staff as mandated by State of New Jersey o A staffing analysis was completed to identify by shift the minimum amount of direct care staff and licensed nursing staff required by regulatory requirements to meet the care needs of the residents based on the daily census. The staffing schedule was reviewed by the DON with the staffing coordinator to identify by shift the required numbers of staff.	11/11/21

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

TITLE

(X6) DATE

Electronically Signed

11/11/21

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S 560	<p>Continued From page 1</p> <p>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 (CNA) to every eight residents for the day shift. 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 CNAs, and each direct staff member shall be signed in to work as a CNA and shall perform nurse aide duties: and 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 CNA and perform CNA duties.</p> <p>As per the "Nurse Staffing Report" completed by the facility for the weeks of 09/26/21-10/02/21 and 10/03/21-10/09/21, the staffing to resident ratios that did not meet the minimum requirement of 1 CNA to 8 residents for the day shift, and 1 CNA to 14 residents for the night shift as documented below:</p> <ul style="list-style-type: none"> - 09/26/21 had 6 CNAs for 114 residents on the day shift. - 09/26/21 had 4 total staff for 114 residents on the overnight shift. - 09/27/21 had 9 CNAs for 114 residents on the day shift. - 09/28/21 had 9 CNAs for 114 residents on the day shift. - 09/29/21 had 7 CNAs for 114 residents on the day shift. - 09/30/21 had 7 CNAs for 114 residents on the day shift. - 10/01/21 had 11 CNAs for 114 residents on the day shift. - 10/02/21 had 11 CNAs for 114 residents on 	S 560	<ul style="list-style-type: none"> o Additional Agencies were contacted to fill vacant direct care certified nurse aide and licensed nurse positions while the facility advertised for new staff. o When there are additional direct care staff these individuals are assigned to provide residents with additional bathing, grooming, and hygiene. The additional staff also are assigned to organizing resident rooms, clean high touch surfaces in resident rooms and spend time meeting the psychosocial needs of residents. o Assignments were reviewed to assure resident requiring total assistance were not all on one assignment. o The Facility has and will continues to run Online Ads. Facility has and will continue to Offer sign on bonus. Facility has and will continue to offer generous referral bonuses to attract new staff. o Interviews have been and continue to be conducted daily as applicants apply both scheduled or walk-ins. o The corporate recruiter has been and continues working in tandem with facility, partnering with existing nursing agencies to increase the number of contracted agencies. <p>2. How you will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken</p> <p>a) All residents have the potential to be at risk</p> <p>3. What measures will be put in place or what systemic changes you will make to ensure that the deficient practice does not recur?</p> <p>a. DON/ADON review staffing daily and</p>	
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S 560	<p>Continued From page 2</p> <p>the day shift.</p> <ul style="list-style-type: none"> - 10/03/21 had 11 CNAs for 114 residents on the day shift. - 10/04/21 had 10 CNAs for 114 residents on the day shift. - 10/04/21 had 7 total staff for 114 residents on the overnight shift. - 10/06/21 had 12 CNAs for 114 residents on the day shift. - 10/07/21 had 14 CNAs for 114 residents on the day shift. - 10/08/21 had 11 CNAs for 114 residents on the day shift. - 10/09/21 had 8 CNAs for 114 residents on the day shift. <p>During an interview with the surveyor on 10/19/21 at 03:50 PM with the Director of Nursing (DON) and Facility Administrator (FA), the FA stated that the facility recently held a Job Fair to enhance hiring new employees. The facility offered a \$2,000 sign-on bonus for CNAs and a \$4,000 sign-on bonus for Nurses. The FA and DON indicated that the facility also hosted a Luncheon for CNAs, and 5 CNAs were hired and will be starting the orientation on 10/20/21. The FA stated that the facility uses an agency for staffing and provides incentive bonuses to agency staff and their own staff. The facility had been challenged in meeting the mandate in nursing. It will continue to advertise on Indeed (a worldwide employment website) and streamline as much as possible to meet the staffing requirements.</p> <p>NJAC 8:39-5.1(a)</p>	S 560	<p>weekly to ensure all resources have been used to staff the facility as per state mandates on an ongoing basis. Agencies are sent all staffing needs in advance and additional staff requested to cover in the event of callouts.</p> <ul style="list-style-type: none"> b. The Facility continues to work with agencies, Indeed.com and other job posting sites on internet in an effort to staff the facility in compliance with regulations. Facility has contracted with additional staffing agencies, c. Administration has formed a staffing committee and has conducted salary analyses and implemented creative strategies for attracting new employees to minimize the use of agency personnel. d. Bonuses and incentive programs have been implemented to attract and to retain current staff. e. The facility is utilizing all types of digital media as well as headhunters to identify and hire new staff. f. Staffing Coordinator, Director of Nursing or designee have been notified of all call outs and absences and efforts have been made to substitute with additional facility and or agency staff <p>4. How the corrective action(s) will be monitored to ensure the deficient practice will not recur. What quality assurance program will be put into practice?</p> <ul style="list-style-type: none"> a. Daily staffing levels are reported to administrator and if there are any shortages additional incentives are provided to employees to work an extra shift. The success of bonuses and incentives is being analyzed by the facility Administrator and DON who make recommendations to the ownership 	

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S 560	Continued From page 3	S 560	<p>regarding what incentives or bonuses are working.</p> <p>b. Staffing is discussed at daily morning operations meetings and recommendations solicited from the management team about ways to attract new hires to fill vacant positions.</p> <p>c. HR and staffing coordinator/designee will track efforts and success of initiatives above and report findings to the administrator weekly for four months or until minimum staffing levels have been met on a consistent basis. The administrator will communicate findings to corporate staff for assistance and further direction as appropriate.</p> <p>5. The date of correction and the title of who is responsible for each deficiency to be corrected. Administrator will be responsible to have the corrective actions complete and all the interventions for compliance have been implemented by 11/12/2021</p>	