

New Jersey Department of Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 061411 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 05/02/2023 |
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| NAME OF PROVIDER OR SUPPLIER MORRIS VIEW HEALTHCARE CENTER | STREET ADDRESS, CITY, STATE, ZIP CODE 540 WEST HANOVER AVENUE 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 |
|--------------------|---|---------------|---|--------------------|
| S 000 | <p>Initial Comments</p> <p>TYPE OF SURVEY: New Construction and Renovation Project: Interior renovations of the third floor including the rehab therapy suite, training bathroom, kitchen/dining areas, nursing stations and support spaces; and the addition of 80 LTC beds to increase the licensed bed count from 283 to 363 licensed beds.</p> <p>SURVEY DATE: 5/2/23</p> <p>CENSUS: 248</p> <p>The facility was not in compliance with the standards in the New Jersey Administrative code, 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.</p> <p>THE AREAS AS NOTED ABOVE MAY NOT BE OCCUPIED UNTIL YOU RECEIVE FORMAL NOTIFICATION FROM CERTIFICATE OF NEED AND LICENSING DIVISION.</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:</p> | S 560 | | 6/16/23 |

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

Electronically Signed

TITLE

(X6) DATE

05/16/23

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| S 560 | <p>Continued From page 1</p> <p>Based on interview and review of pertinent facility documentation, it was determined that the facility failed to maintain the required minimum direct care staff to resident ratios as mandated by the State of New Jersey. This was evident for 13 out of 42 shifts reviewed.</p> <p>Findings include:</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 (CNA) 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 CNAs, and each direct staff member shall be signed in to work as a CNA 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 CNA and perform CNA duties.</p> <p>A review of the "Nurse Staffing Report" completed by the facility for the weeks of 4/16/23 to 4/22/23 and 4/23/23 to 4/29/23 revealed the staffing to resident ratios that did not meet the minimum requirement of 1 CNA to 8 residents. This</p> | S 560 | <p>1. What corrective action(s) will be accomplished for those residents found to have been affected by the practice:</p> <p>There was no negative outcome to residents the shifts identified as not meeting the NJ staffing requirements during 04/16/23 had 12 CNAs for 239 residents on the day shift, 04/17/23 had 22 CNAs for 239 residents on the day shift, 04/18/23 had 27 CNAs for 239 residents on the day shift, 04/19/23 had 21 CNAs for 239 residents on the day shift, required 30 CNAs, 04/20/23 had 25 CNAs for 239 residents on the day shift, -04/21/23 had 20 CNAs for 245 residents on the day shift, 04/22/23 had 23 CNAs for 245 residents on the day shift, 04/23/23 had 15 CNAs for 245 residents on the day shift, 04/24/23 had 21 CNAs for 245 residents on the day shift, 04/25/23 had 29 CNAs for 245 residents on the day shift, 04/26/23 had 27 CNAs for 245 residents on the day shift, 04/28/23 had 23 CNAs for 248 residents on the day shift, 04/29/23 had 19 CNAs for 248 residents on the day shift.</p> <p>5/15/2023, the facility Human Resources Director and Staffing Coordinator were reeducated by the Licensed Nursing Home Administrator (LNHA) on the components of this regulation with an emphasis on CNA to resident ratios.</p> <p>Staffing Coordinator directed to increase rounding on weekdays and Nursing Supervisor directed to increase rounding on weekend days to confirm staff are in place and there is sufficient staffing CNA to resident ratios. Supervisor has been</p> | |

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| S 560 | <p>Continued From page 2</p> <p>occurred for 13 of 14 day shifts.</p> <p>-04/16/23 had 12 CNAs for 239 residents on the day shift, required 30 CNAs (18 CNAs short). -04/17/23 had 22 CNAs for 239 residents on the day shift, required 30 CNAs (8 CNAs short). -04/18/23 had 27 CNAs for 239 residents on the day shift, required 30 CNAs (3 CNAs short). -04/19/23 had 21 CNAs for 239 residents on the day shift, required 30 CNAs (9 CNAs short). -04/20/23 had 25 CNAs for 239 residents on the day shift, required 30 CNAs (5 CNAs short). -04/21/23 had 20 CNAs for 245 residents on the day shift, required 31 CNAs (11 CNAs short). -04/22/23 had 23 CNAs for 245 residents on the day shift, required 31 CNAs (8 CNAs short). -04/23/23 had 15 CNAs for 245 residents on the day shift, required 31 CNAs (16 CNAs short). -04/24/23 had 21 CNAs for 245 residents on the day shift, required 31 CNAs (10 CNAs short). -04/25/23 had 29 CNAs for 245 residents on the day shift, required 31 CNAs (3 CNAs short). -04/26/23 had 27 CNAs for 245 residents on the day shift, required 31 CNAs (4 CNAs short). -04/28/23 had 23 CNAs for 248 residents on the day shift, required 31 CNAs (8 CNAs short). -04/29/23 had 19 CNAs for 248 residents on the day shift, required 31 CNAs (12 CNAs short).</p> <p>No additional information related to the staffing levels was provided to the survey team by the Licensed Nursing Home Administrator (LNHA) on 5/2/23 upon survey exit.</p> | S 560 | <p>directed to call agencies and in real time and fill open shifts.</p> <p>Agency contract re-activated to assist in CNAs staffing and utilizing their agency web-based program for quick shift availability.</p> <p>Added an internal app for staff to pick up shifts with gift card incentives.</p> <p>Added and or increased incentive bonuses for attendance referrals and picking up shifts for both agency and internal staff.</p> <p>2. How you will identify other residents having potential to be affected by the same practice and what corrective action will be taken:</p> <p>All residents have potential to be affected by this deficient practice.</p> <p>3. What measures will be put into place or what systemic changes you will make to ensure that the practice does not recur:</p> <p>To increase CNA staffing: Instituted perfect attendance bonus 2 weeks \$500, instituted referral bonus raffle meaning refer one Certified Nursing Assistant get one raffle ticket and the monthly winner gets one month rent paid, increased CNA sign on bonus to \$4000, added additional contract with staffing agency, added on-call rapid bonus, doubled bonus for weekend shifts, cross trained CNA's from sister facilities to pick up shifts, facility initiated a higher rate for CNAs, multiple</p> | |

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| S 560 | Continued From page 3 | S 560 | <p>staff cold calling CNAs on job boards with public profiles, hired company recruiter to actively recruit, held a job fair, staffing coordinator utilizing agency web based program for quick shift availability, offer bonuses for staffing agency CNAs as well as inhouse, expanded transportation company to pick up in additional counties and covered costs for staff, nurses directed to assist with direct care when needed, Administrator assisting Staffing Coordinator with calling CNA's to pick up shifts, Administrator met with CNA classes to directly recruit new staff, Staffing Coordinator increased rounding on weekdays and Nursing Supervisor increased rounding on weekend days to confirm staff are in place and there is sufficient CNA to resident ratios, access provided to Nursing Supervisors to call agencies to fill open positions shifts in real time, contracted an internal app for staff to pick up shifts with easy access and added gift card incentives when the app is utilized, working with agencies to allow in contract for conversion from agency CNA to internal CNA.</p> <p>Nursing Management reviews staffing ratios daily at clinical meeting to ensure all efforts to meet proper standards are being met.</p> <p>4. How the corrective action(s) will be monitored to ensure the practice will not recur, i.e., what quality assurance program will be put into place:</p> <p>Staffing Coordinator or designee will review ratios daily and report to HR and Nursing Administration. Phone tree will be</p> | |

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| S 560 | Continued From page 4 | S 560 | <p>started for any call outs, starting with the supervisor, Staffing Coordinator, then Nursing Administration to secure staffing for any call outs.</p> <p>HR or designee will present findings to the monthly QAPI committee for 3 months and determine if further interventions are needed.</p> | |