PRINTED: 02/23/2022 FORM APPROVED

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED			
		060805	B. WING		01/18/2022			
NAME OF PROVIDER OR SUPPLIER SHADY LANE GLOUCESTER CO HOME 256 COUNTY HOUSE ROAD CLARKSBORO, NJ 08020								
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTIC (EACH CORRECTIVE ACTION SHOULI CROSS-REFERENCED TO THE APPROF DEFICIENCY)	D BE COMPLETE			
S 000	Standards in the Ne Code, Chapter 8:39 Long Term Care Fa submit a plan of cocompletion date, fo that the plan is impledeficiencies may reaccordance with the Jersey Administration	compliance with the ew Jersey Administrative of Standards for Licensure of cilities. The facility must rection, including a reach deficiency and ensure demented. Failure to correct sult in enforcement action in e Provisions of the New we Code, Title 8, Chapter 43E, ensure Regulations.	S 000					
S 560	Federal, State, and regulations. This REQUIREMENT by: Based on interview facility documentati facility failed to a.) In minimum direct care the day shift and b. half of all staff mem Nursing Assistants as mandated by the	I comply with applicable local laws, rules, and NT is not met as evidenced s, and review of pertinent on, it was determined that the maintain the required e staff-to-resident ratios for provide that no fewer than obers shall be Certified (CNA) on the evening shifts a State of New Jersey. This f 14 day shifts reviewed and	S 560	(1) No residents were found to be affected. Shady Lane Home utilize licensed staff when falling below me staffing guidelines due to call outs to maintain required staffing levels ensuring the delivery of care to our residents. Shady Lane Home did move the additional licensed staff their role as a licensed staff to the a CNA on the Nursing Home Staffing Report Form, the internal assignments sheet did reflect the move of license.	ninimum in order r fail to from role of ng ent			
	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			to the CNA role. (2) All residents have the potential affected.				

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

TITLE

(X6) DATE

Electronically Signed

02/01/22

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	060805	B. WING		01/18	3/2022
NAME OF PROVIDER OR SUPPLIER SHADY LANE GLOUCESTER CO HOME STREET ADDRESS, CITY, STATE, ZIP CODE 256 COUNTY HOUSE ROAD CLARKSBORO, NJ 08020					
PREFIX (EACH DEFICIENCY N	EMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL C IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROF	D BE	(X5) COMPLETE DATE
Governor signed into codified at N.J.S.A. 3 established minimum nursing homes. The effective on 02/01/20 One CNA to every eishift. One direct care staff residents for the every fewer than half of all CNAs, and each direct signed in to work as nurse aide duties: an One direct care staff residents for the night direct care staff mem a CNA and perform 0 As per the "Nurse Staffing-to-resident raminimum requirement the day shift are document of the day shift, required 6 -01/03/22 had 5 CNA day shift, required 6 -01/04/22 had 5 CNA day shift, required 6 -01/05/22 had 5 CNA day shift -01	icated the New Jersey of law P.L. 2020 c 112, 30:13-18 (the Act), which in staffing requirements in following ratio(s) were 021: ight residents for the day if member to every 10 ening shift, provided that no staff members shall be est staff member shall be a CNA and shall perform and if member to every 14 in the shift, provided that each inber shall sign in to work as CNA duties. Itaffing Report" completed by sek of 01/02/22-01/08/22, the atios that did not meet the int of 1 CNA to 8 residents for elemented below: As for 41 residents on the CNAs.	S 560	(3) Administration in-serviced our Administrative Assistant on captur licensed staff when used as a CN placing them into CNA positions on Nursing Home Staffing Report For was revised on 1/24/22 reflecting move of licensed staff into CNA room The Nursing Home Staffing Report was also revised on 1/20/22 at the request of the NJDOH team leaded submitted that day by the Director Nursing for the two weeks request Administrative RN's were also edu on capturing the licensed staff whoused as a CNA on the Nursing Hostaffing Form to ensure we are convith staffing guidelines. Shady Lathome has also entered into a shaservices agreement with Rowan Coff South Jersey (RCSJ) effective for a State Opportunity Grant that CNA "feeder" program to our facilic contract is in effect through 2/1/25 assists with the procurement of Cladirect care at Shady Lane Home. (4) Monthly audits will be done by Administrative Assistant to ensure compliance and submitted to the Administrator and Director of Nurs review. The report will be monitor monthly and will be discussed quaduring our QAPI and QAA meeting during durin	A and n the m. This the les. t Form e rand of ted. ucated en being me mpliant ine red college 1/1/22 is a ty. This and NA's for the staffing sing for ed arterly	

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:) DATE SURVEY COMPLETED	
		060805	B. WING		01/1	8/2022	
NAME OF	PROVIDER OR SUPPLIER			STATE, ZIP CODE			
SHADY	SHADY LANE GLOUCESTER CO HOME 256 COUNTY HOUSE ROAD CLARKSBORO, NJ 08020						
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES 'MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE	(X5) COMPLETE DATE	
S 560	and 01/09/22-01/15 ratios that did not more from the evening of no fewer than har content of no fewer ing shift, required of notice	eeks of 01/02/22-01/08/22 i/22, the staffing-to-resident neet the minimum requirement If of all staff members shall be ng shift: IAs to 9 total staff on the red 5 CNAs. IAs to 9 total staff on the red 5 CNAs. IAs to 9 total staff on the red 5 CNAs. IAs to 10 total staff on the red 5 CNAs. IAs to 10 total staff on the red 5 CNAs. IAs to 9 total staff on the red 5 CNAs. IAs to 10 total staff on the red 5 CNAs. IAs to 10 total staff on the red 5 CNAs. IAs to 10 total staff on the red 5 CNAs. IAs to 10 total staff on the	S 560				