

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315136	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/23/2024
NAME OF PROVIDER OR SUPPLIER Complete Care at Shrewsbury LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 89 Avenue at the Common Shrewsbury, NJ 07702	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0606</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Not hire anyone with a finding of abuse, neglect, exploitation, or theft.</p> <p>51037</p> <p>COMPLAINT #: NJ00175673</p> <p>Based on interview, employee file review, and review of other pertinent documents on 7/23/24, it was determined that the facility failed to obtain and keep a record of an employee certification verification and to implement their Abuse, Neglect, Exploitation and Misappropriation Prevention Program. This deficient practice was identified for 1 of 3 sampled agency employees (Certified Nursing Assistant #1) during the employee file review. The deficient practice was evidenced by the following:</p> <p>Review of the facility policy titled Abuse, Neglect, Exploitation and Misappropriation Prevention Program, reviewed on 5/2023, indicated .The resident abuse, neglect and exploitation prevention program consists of a facility-wide commitment and resource allocation to support the following objectives: 1. Protect residents from abuse, neglect, exploitation or misappropriation of property by anyone including, but not necessarily limited to .e. staff from agencies .2. Develop and implement policies and protocols to prevent and identify: a. abuse or mistreatment of residents; b. neglect of residents .4. Conduct employee background checks and not knowingly employ or otherwise engage any individual who has: a. been found guilty of abuse, neglect, exploitation, misappropriation of property, or mistreatment by a court of law; b. had a finding entered into the state nurse aide registry concerning abuse, neglect, exploitation, mistreatment of residents or misappropriation of their property; or c. a disciplinary action in effect against his or her professional license by a state licensure body as a result of a finding of abuse, neglect, exploitation, mistreatment of residents or misappropriation of resident property .</p> <p>On 7/23/24, the surveyors reviewed 3 sampled agency employees and reviewed their pre-employment file.</p> <p>A review of CNA #1's employee file (EF) revealed that an orientation checklist was done on 5/7/2024 by the facility. The EF further revealed the CNAs Profile compiled on 5/23/24, obtained from the Agency Company.</p> <p>The Profile revealed that CNA #1's credential was created on 4/24/23, the credential indicated that her License Status was Active. The Profile further revealed that the CNAs Background Check was completed on 12/19/23.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
---	-------	-----------

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315136	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/23/2024
NAME OF PROVIDER OR SUPPLIER Complete Care at Shrewsbury LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 89 Avenue at the Common Shrewsbury, NJ 07702	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0606</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview conducted by the surveyors on 7/23/24 at 12:53 p.m. with the Human Resources (HR) and the License Nursing Home Administrator (LNHA). The HR and LNHA stated that when a new agency employee comes in the building, the facility verifies the employee's certification through Online Public Registry (OPR). The HR stated that CNA #1's certification was visually check on or after 5/7/24 (unable to recall exact date).</p> <p>On 7/23/24 at 3:04 p.m., the surveyors contacted New Jersey Department of Health Certificate of Need and Licensing, who confirmed that CNA #1's certification was Suspended since 3/7/24 and this would have been noted if it was verified by the facility in May 2024.</p> <p>The facility was unable to provide documentation evidence that CNA #1's certification was verified before providing care to the residents on 5/22/24 and 6/15/24.</p> <p>Review of the job description Human Resource Director, dated 9/28/2022, indicated Purpose of Your Job Position .is to manage the Human Resources department in accordance with current applicable federal, state, and local standards, guidelines, and regulations. To follow all company policies and apply them uniformly to all employees as directed by your Administrator and the Director of Human Resources. To assure that qualified personnel are interviewed, trained and employed. To timely perform all administrative tasks with regards to personnel actions .Duties and Responsibilities .Administrative Functions .Check applications and references of prospective employees and arrange for interview with department managers as required or requested .Also files applications for positions, by positions or alphabetically, to include job applications, resume, reference checks, etc. of that person meeting eligibility requirements for the position to which they applied .Develop, implement and maintain an adequate personnel filing system that meets the needs of the facility and complies with current employment practices .</p> <p>N.J.A.C 8:39-9.3(b)</p>		