

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315180	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/29/2025
NAME OF PROVIDER OR SUPPLIER Alameda Center for Rehabilitation and Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE 303 Elm Street Perth Amboy, NJ 08861	

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 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</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
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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Complaint: 2587228Based on interviews, medical record review, and review of other pertinent facility documents on 12/29/2025, it was determined that the facility failed to provide documented evidence of care provided to residents (Resident #1, Resident #2, Resident #3, and Resident #7). This deficient practice occurred for 4 of 4 residents reviewed.The deficient practice was evidenced by the following:1.According to the admission Record (AR), Resident #1 was admitted to the facility with diagnoses which included but were not limited to: dementia, diabetes, and muscle weakness.According to the most recent comprehensive Minimum Data Set (MDS), an assessment tool dated 10/4/2025, Resident #1 had a Brief Interview for Mental Status (BIMS) score of 3 out of 15, which indicated the resident's cognition was severely impaired. The MDS further revealed the resident was dependent on staff for activities of daily living (ADLs).A review of Resident #1's POC flowsheet, a form utilized for documentation of ADL care by the Certified Nursing Assistants (CNAs) for November 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift (every shift)7-3 shift on 11/1/2025, 11/4/2025, 11/5/2025, 11/6/2025, 11/8/2025, 11/11/2025, 11/12/2025, 11/14/2025, 11/17/2025, 11/19/2025, 11/22/2025, 11/24/2025, 11/25/2025, 11/26/2025, and 11/29/2025.3-11 shift on 11/15/2025, 11/22/2025, and 11/30/2025.11-7 shift on 11/11/2025 11-7, 11/22/2025, and 11/28/2025. Toileting Hygiene QShift7-3 shift on 11/1/2025, 11/4/2025, 11/5/2025, 11/6/2025, 11/8/2025, 11/11/2025, 11/12/2025, 11/14/2025, 11/17/2025, 11/19/2025, 11/22/2025, 11/24/2025, 11/25/2025, 11/26/2025, and 11/29/2025.3-11 shift on 11/15/2025, 11/22/2025, and 11/30/2025. 11-7 shift on 11/11/2025, 11/22/2025, and 11/28/2025. A review of Resident #1's POC flowsheet, a form utilized for documentation of ADL care by the CNAs for December 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift7-3 shift on 12/1/2025, 12/2/2025, 12/3/2025, 12/4/2025, 12/5/2025, 12/11/2025, 12/13/2025, 12/19/2025, 12/20/2025, 12/22/2025, 12/23/2025, 12/24/2025, 12/25/2025, 12/26/2025, 12/27/2025.11-7 shift on 12/25/2025.Toileting Hygiene QShift7-3 shift on 12/1/2025, 12/2/2025, 12/3/2025, 12/4/2025, 12/5/2025, 12/11/2025, 12/13/2025, 12/19/2025, 12/20/2025, 12/22/2025, 12/23/2025, 12/24/2025, 12/25/2025, 12/26/2025, and 12/27/2025.11-7 shift on 12/25/2025.22. According to the AR, Resident #2 was admitted to the facility with diagnoses which included but were not limited to: dementia, anxiety, and diabetes. According to the most recent comprehensive MDS, an assessment tool dated 12/10/2025, Resident #2 had a BIMS score of 15 out of 15, which indicated the resident's cognition was intact. The MDS further revealed the resident required supervision with ADLs. A review of Resident #2's POC flowsheet, a form utilized for documentation of ADL care by the CNAs for November 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift:7-3 shift on 11/21/2025, 11/23/2025, 11/24/2025, 11/26/2025, and 11/29/2025.3-11 shift on 11/30/2025.11-7 shift on11/19/2025. Toileting Hygiene QShift7-3 shift on 11/21/2025, 11/23/2025, 11/24/2025, 11/26/2025, and 11/29/2025.3-11 shift on 11/30/2025.11-7 shift on 11/19/2025. A review of Resident #2's POC flowsheet, a form utilized for documentation of ADL care by the CNAs for December 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift:7-3 shift on 12/4/2025, 12/9/2025, 12/17/2025, 12/20/2025, 12/22/2025, 12/26/2025, and 12/27/2025.3-11 shift on 12/17/2025.Toileting Hygiene QShift:7-3 shift on 12/4/2025, 12/9/2025, 12/17/2025, 12/20/2025, 12/22/2025, 12/26/2025, and 12/27/2025.3-11 shift on 12/17/2025.3. 3. According to the AR, Resident #3 was admitted to the facility with diagnoses which included but were not limited to: muscle weakness, chronic obstructive pulmonary disease, acute kidney failure. According to the most recent comprehensive MDS, an assessment tool dated 12/18/2025, Resident #3 had a BIMS score of 15 out of 15, which indicated the resident's cognition was intact. The MDS further revealed the resident required substantial assistance with ADLs. A review of Resident #3's POC flowsheet, a form utilized for documentation of ADL care by the CNAs for November 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift:7-3 shift on 11/9/2025,11/15/2025, 11/19/2025, and 11/23/2025. 3-11 shift on 11/8/2025, 11/9/2025, 11/22/2025, 11/23/2025, and 11/30/2025.11-7 shift on 11/18/2025 and 11/19/2025. Toileting Hygiene QShift:7-3 shift on 11/9/2025, 11/15/2025, 11/19/2025, and 11/23/2025. 3-11shift on 11/8/2025, 11/9/2025, 11/22/2025, 11/23/2025, and 11/30/2025.11-7 shift on 11/18/2025 and 11/19/2025.A review of Resident #3's POC flowsheet, a form utilized for documentation of ADL care by the CNAs for December 2025 revealed missing signatures on the following dates and shifts:Personal Hygiene QShift:7-3 shift on 12/6/2025, 12/7/2025, 12/13/2025, 12/14/2025, 12/20/2025, 12/21/2025, and 12/28/2025. 3-11 shift on 12/6/2025, 12/13/2025, 12/14/2025, 12/20/2025, 12/21/2025, and 12/28/2025. Toileting</p>		