| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 315236 | A. Building<br>B. Wing | 04/11/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| Sinai Post-Acute Nursing & Rehab Center | 65 Jay Street<br>Newark, NJ 07103 |

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) |
|---|---|
| F 0921<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.<br><br>Complaint #: NJ2795447, NJ 2694655, and 2648314Based on observations, staff interviews, and policy review, the facility failed to ensure that the physical environment was maintained in a safe, functional, and sanitary condition for residents and staff. This deficient practice was evidenced by the following:Findings include:During the observation on 04/08/2026 from 8:38 to 10:35 AM, the surveyor observed the following:<br><br>At 8:38 AM, in the presence of the Director of Dietary (DOD) and the Assistant DOD (ADOD), gray water was observed standing on the floor under the sink in the dishwasher room on both the clean and dirty sides. A blanket with brown staining was noted on the floor, wet under the edge of the dishwasher.<br><br>At 8:40 AM, mouse droppings were noted along the baseboards in the shower room of the third floor on the north wing. The surveyor observed a live trap under the sink in the soiled utility room and mouse droppings were noted along the baseboard and not within the trap.<br><br>At 9:20 AM, mouse droppings were noted along the baseboards in the soiled utility room on the sixth floor.<br><br>At 9:48 AM, mouse droppings were noted along the baseboard and under the head of the bed in Resident (R) 5's room.<br><br>At 10:35 AM, gray water remained standing under the sink in the dishwasher room. Broken floor tiles were observed to be lower than the lip of the sump pump, preventing proper drainage and effective function of the sump pump.<br><br>During an interview on 04/09/26 at 8:50 AM, with the DOD, he/she stated the leaking dishwasher had been reported to maintenance. He/she stated the water was coming out of the bottom, from a leaking seal. He/she confirmed the sink on the dirty side of the dish room, which leaked gray water out onto the floor. Maintenance had ordered a needed part that arrived on 4/10/26 but was not going to be put in place until Monday (April 13).<br><br>During an interview on 04/09/26 at 10:04 AM, the housekeeping director (HK) stated that there are daily reports about mice from the residents and the HK staff. The HK further stated, we have been seeing mice on all floors. There are things that the residents hoard, and the cold weather makes the mice come more.<br><br>During an interview on 04/09/26 at 10:04 AM, the Maintenance Director (MD) stated, There has been a problem all the time in this building, because of where the building is in the city. When they tear<br>(continued on next page) |



| 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: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 315236 | A. Building<br>B. Wing | 04/11/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| Sinai Post-Acute Nursing & Rehab Center | 65 Jay Street<br>Newark, NJ 07103 |

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) |
|---|---|
| F 0921<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Many | down buildings around us, we get more mice and bugs. The pest company comes out twice a week and treats our building. The main office only wants them to come once or twice a month.<br><br>On 04/09/26 at 10:34 AM, the [NAME] President of Environmental Services (VP-ES) provided the Pest control logs. I have received the report sheets from the floors where mice and other bugs have been observed by staff. Pest control has been coming, but the problem is still there.<br><br>During an interview on 04/09/26 at 11:45 AM, the [NAME] President of Environmental Service (VP-ES) stated that he/she was aware of the dishwasher leaking water, but not aware of the sinks leaking onto the floor. He/she observed the missing tiles, sinks and sump pump and confirmed the gray water could only get pumped out if someone mopped it into the pit.<br><br>Review of the facility policy reviewed and updated on 09/2025 titled, Cleaning and disinfection of environmental Surfaces.Environmental surfaces will be cleaned and disinfected according to current CDC recommendations for disinfection of healthcare facilities and the OSHA bloodborne pathogens standard. |