

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  315344	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/30/2024
NAME OF PROVIDER OR SUPPLIER  Optima Care Castle Hill		STREET ADDRESS, CITY, STATE, ZIP CODE  615 23rd St Union City, NJ 07087	

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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>49509</p> <p>Based on observations, interviews and review of documentation, the facility failed to consistently maintain a functional Heating, Ventilation and Air Condition Unit (HVAC) in good repair on 1 of 3 nursing units ( 3rd floor) in order to maintain a comfortable environment for its residents, staff, and visitors . This deficient practice was evident by the following:</p> <p>On 08/29/24, at 10:30 am., the surveyor conducted a tour of an empty 3rd floor unit with the Administrator (ADM) and Maintenance Director (MD). According to the ADM, a decision was made to utilize the 3rd floor unit to accommodate isolation for 11 Coronavirus (COVID-19) positive residents and 9 residents presumed exposed. The 11 COVID positive residents and 9 presumed exposed were housed on this unit from 8/27/2024 to 8/28/2024.</p> <p>During the tour, the ADM stated that 3rd floor unit had been closed for over one year and the air conditioning units were not working. The decision was made to transfer the COVID positive residents to this floor on 8/27/2024. The MD stated that the 3rd floor was not on his daily maintenance rounds inspections. The surveyor observed there were no residents on the floor during the tour. The thermostat on the wall indicated 74 degrees Fahrenheit (F). The air conditioners in residents' rooms were still not functioning.</p> <p>According to the MD, prior to the transfer of residents from the other floors on 8/27/2024, he took a temperature on the 3rd floor unit at 2 PM ,which indicated 76 degrees Fahrenheit (F). (Normal temperature ranges is from 71 F-81 F degree). According to the Environmental Temperature Log (ETL) for the 3rd floor on 8/28/2024, the temperatures at 11 AM was documented at 76 degrees F and at 2 PM the temperature was documented at 78 degrees F. There were no specific locations correlated to each temperature taken on the ETL.</p> <p>The surveyor was also provided a copy of the Administrator's ETL for the 3rd floor. The ETL for the 3rd floor on 8/27/2024 at 2 PM and 5 PM temperatures were both documented at 76 degrees. On 8/28/2024, the following temperatures were documented : 11 AM 76 degrees F; 2 PM 78 degrees F and at 5 PM 79 degrees F. There were no specific locations correlated to each temperature taken on the ETL. Also, the Surveyor confirmed with the Administrator that there were no more temperatures taken after 5 PM on 8/27/24 and 8/28/2024 on the 3rd floor.</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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 8/28/2024, the MD was told by the Administrator that residents were complaining of being warm, so he deployed an additional 3 portable air conditioners and electric fans to residents' rooms and placed a Commercial electric fan in the hallway.</p> <p>On 08/29/24 at 12:15 PM, the Surveyor interviewed Resident #2 who stated, that he/she was placed on the 3rd floor and confirmed that the room air conditioner was not working and was proved a fan, but the room was still hot. The resident couldn't provide the surveyor with a time or date regarding the temperature.</p> <p>On 08/29/24 at 3:19 PM, the surveyor interviewed Resident #3's daughter who stated, air conditioner was not working in Resident #3 room, but an electric fan was provided.</p> <p>NJAC 8:39-31.2(e)</p>		