

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  315514	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/05/2026
NAME OF PROVIDER OR SUPPLIER  Excel Care at Egg Harbor		STREET ADDRESS, CITY, STATE, ZIP CODE  6818 Delilah Road Egg Harbor Township, NJ 08234	

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>Complaint #: 2601823, 421288, 2646782Based on interviews, medical record review, and review of pertinent facility documentation on 1/2/26 and 1/5/26, it was determined that the facility failed to consistently document Activities of Daily Living (ADL) as being provided to residents for 5 of 5 residents reviewed for ADLs. The facility also failed to follow its policy titled, Activities of Daily Living (ADLs)/Maintain Abilities. This deficient practice was evidenced by the following: According to the admission Record (AR), Resident #1 was admitted with diagnoses that included but were not limited to: End Stage Renal Disease (ESDR) and Dialysis.According to the Minimum Data Set (MDS), an assessment tool dated 12/29/2025, Resident #1 had a Brief Interview of Mental Status (BIMS) that was not completed at the time of survey due to recent admission. A review of Resident #1's Care Plans (CP) with a focus of Decline in functional status reveals an initiation date of 12/30/2025 and an intervention of provide and assist with ADL.A review of Resident #1's December 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as Point of Care (POC) included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 12/30/25 on the evening shift. On 12/31/25 on the night shift.Eating on 12/30/25 on the evening shift.Amount Eaten on 12/30/25 on the evening shift. 2. According to the AR, Resident #2 was admitted with diagnoses that included but were not limited to: Chronic Kidney Disease (CKD) and Diabetes.According to the MDS, an assessment tool dated 7/10/2025, Resident #2 had a BIMS score of 14 out of 15, which indicated the resident was cognitively intact. A review of Resident #2's CP with a focus of Decline in functional status reveals an initiation date of 12/30/2024 and an intervention of provide and assist with ADL.A review of Resident #2's July 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC, included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 7/5/25, 7/6/25, 7/7/25, 7/11/25, 7/13/25, 7/15/25, 7/16/25, 7/17/25, 7/21/25, 7/27/25, 7/28/25, and 7/30/25 on the day shift. On 7/1/25, 7/4/25, 7/6/25, 7/7/25, 7/11/25, 7/13/25, 7/15/25, 7/18/25, 7/19/25, 7/26/25, 7/29/25, and 7/30/25 on the evening shift. On 7/1/25, 7/3/25, 7/9/25, 7/10/25, 7/11/25, 7/13/25, 7/16/25, 7/17/25, 7/28/25, and 7/31/25 on the night shift.Eating on 7/5/25, 7/6/25, 7/7/25, 7/11/25, 7/13/25, 7/15/25, 7/16/25, 7/17/25, 7/21/25, 7/27/25, 7/28/25, and 7/30/25 on the day shift. On 7/1/25, 7/4/25, 7/6/25, 7/7/25, 7/13/25, 7/15/25, 7/18/25, 7/19/25, 7/26/25, 7/29/25, and 7/30/25 on the evening shift. Amount Eaten on 7/5/25, 7/6/25, 7/7/25, 7/11/25, 7/13/25, 7/15/25, 7/16/25, 7/17/25, 7/21/25, 7/27/25, 7/28/25, and 7/30/25 on the day shift for the 0700 and 1200 hours. On 7/1/25, 7/4/25, 7/6/25, 7/7/25, 7/13/25, 7/15/25, 7/18/25, 7/19/25, 7/26/25, 7/29/25, and 7/30/25 on the evening shift.A review of Resident #2's August 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC, included blank spaces indicating that the following tasks were not completed:Amount Eaten on 8/8/25 on the evening shift. 3. According to the AR, Resident #3 was admitted with diagnoses that included but were not limited to: Dementia.According to the MDS, an</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>assessment tool dated 10/10/2025, Resident #3 had a BIMS score of 8 out of 15, which indicated the resident was moderately impaired. A review of Resident #3's CP with a focus of Currently requires extensive assistance with ADL tasks. reveals an initiation date of 7/24/2025 and an intervention of provide and assist with ADL.A review of Resident #3's September 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC, included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 9/20/25, 9/21/25 and 9/29/25 on the day shift. On 9/11/25 and 9/27/25 on the evening shift. On 9/13/25 and 9/30/25 on the night shift.Eating on 9/19/25, 9/20/25, 9/21/25 and 9/29/25 on the day shift. On 9/11/25 and 9/27/25 on the evening shift. On 9/13/25 and 9/30/25 on the night shift.Amount Eaten on 9/20/25 and 9/29/25 on the day shift for the 0700 hour and 9/13/25, 9/20/25 and 9/29/25 on the day shift for the 1200 hour. On 9/11/25 and 9/27/25 on the evening shift.A review of Resident #3's October 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC, included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 10/1/25, 10/26/25 and 10/29/25 on the day shift. On 10/4/25, 10/20/25, 10/24/25, 10/30/25, and 10/31/25 on the evening shift. On 10/5/25, 10/13/25, 10/27/25, and 10/31/25 on the night shift.Eating on 10/1/25, 10/26/25 and 10/29/25 the day shift. On 10/4/25, 10/20/25, 10/24/25, 10/30/25, and 10/31/25 on the evening shift. On 10/5/25, 10/13/25, 10/27/25, and 10/31/25 on the night shift.Snacks 4oz Magic Cup with lunch and dinner on 10/1/25, 10/26/25, 10/29/25, and 10/31/25 on the day shift for the 1200 hour. On 10/4/25, 10/20/25, 10/24/25, 10/30/25, and 10/31/25 on the evening shift for the 1730 hour. 4. According to the AR, Resident #4 was admitted with diagnoses that included but were not limited to: Chronic obstructive pulmonary disease.According to the MDS, Resident #4 had a BIMS that was not completed at the time of survey due to recent admission. A review of Resident #4's December 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 12/29/25 and 12/31/25 on the day shift. On 12/25/25, 12/27/25, 12/30/25, and 12/31/25 on the evening shift. On 12/27/25 on the night shift.Eating on 12/29/25 and 12/31/25 on the day shift. On 12/25/25, 12/27/25, 12/30/25, and 12/31/25 on the evening shift.Amount Eaten on 12/29/25 and 12/31/25 on the day shift for the 0700 hour and on 12/29/25, 12/30/25, and 12/31/25 for the 1200 hour. On 12/25/25, 12/27/25, 12/30/25, and 12/31/25 on the evening shift for the 1700 hour. 5. According to the AR, Resident #5 was admitted with diagnoses that included but were not limited to: ESDR and CKD.According to the MDS, an assessment tool dated 12/4/2025, Resident #5 had a BIMS score of 5 out of 15, which indicated the resident was severely impaired. A review of Resident #5's CP with a focus of Q1 REVIEW -9/11/25 -no change in ADL functions-cont. with POC reveals an intervention of provide and assist with ADL.A review of Resident #5's November 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 11/03/25, 11/26/25, and 11/27/25 on the day shift. On 11/1/25, 11/2/25, 11/12/25, 11/18/25, 11/19/25, and 11/21/25 on the evening shift. On 11/10/25, 11/12/25, 11/21/25, 11/25/25, and 11/30/25 on the night shift.Eating on 11/03/25, 11/26/25, and 11/27/25 on the day shift. On 11/1/25, 11/2/25, 11/18/25, 11/19/25, and 11/21/25 on the evening shift.A review of Resident #5's December 2025 Documentation Survey Report v2, a form used to document ADL care and often referred to as POC included blank spaces indicating that the following tasks were not completed:Bladder Elimination and Bowel Elimination on 12/15/25, 12/21/25, 12/22/25, 12/23/25, 12/24/25, 12/26/25, 12/29/25, and 12/31/25 on the day shift. On 12/1/25, 12/4/25, 12/5/25, 12/11/25, 12/15/25, 12/16/25, 12/17/25, 12/18/25, 12/19/25,</p> <p>(continued on next page)</p>		

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F 0677  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	<p>12/21/25, 12/23/25, 12/24/25, 12/25/25, 12/29/25, and 12/31/25 on the evening shift. On 12/4/25, 12/7/25, 12/18/25, 12/19/25, 12/21/25, 12/30/25, and 12/31/25 on the night shift. Eating on 12/15/25, 12/21/25, 12/22/25, 12/23/25, 12/24/25, 12/26/25, 12/29/25, and 12/31/25 on the day shift. On 12/1/25, 12/4/25, 12/5/25, 12/11/25, 12/15/25, 12/16/25, 12/17/25, 12/18/25, 12/19/25, 12/21/25, 12/23/25, 12/24/25, 12/25/25, 12/29/25, and 12/31/25 on the evening shift. Amount Eaten on 12/15/25, 12/21/25, 12/22/25, 12/23/25, 12/24/25, 12/26/25, 12/29/25, and 12/31/25 on the day shift for the 0700 and 1200 hours. On 12/1/25, 12/4/25, 12/5/25, 12/11/25, 12/15/25, 12/16/25, 12/17/25, 12/18/25, 12/19/25, 12/21/25, 12/23/25, 12/24/25, 12/25/25, 12/29/25, and 12/31/25 on the evening shift for the 1700 hour. During an interview on 1/5/26 at 9:33 A.M. with the Certified Nursing Assistant (CNA), the CNA states that for the ADL's everyone should be completing them daily. She further stated that she completes them mid shift and at the end of her shift on the POC's and if it is not documented then it's not done. During an interview on 1/2/26 at 1:42 P. M. with the Licensed Practical Nurse (LPN), the LPN stated the CNA's complete the POC documentation and if it's not documented then it's not done. During an interview on 1/5/26 at 11:10 A. M. with the [NAME] President of Nursing and Clinical Services (VP), the VP states the X's noted on the POC's are for PRN or as needed services. The blanks are when no one has documented for that shift and there's no way to know if it's done. If it's not documented, it's not done. Review of the facility's policy titled Activities of Daily Living (ADLs)/Maintain Abilities dated 05/01/25, revealed under Procedure: .3. The facility will provide care and services for the following activities of daily living: .c. Elimination-toileting, d. Dining-eating, including meals and snacks. Review of the facility's document titled Nursing Documentation, dated 05/01/25, revealed under Documentation Requirements .3. Documentation: .Document all nursing interventions and observations, including but not limited to: Activities of Daily Living (ADLs) and assistance required if applicable. NJAC 8:39-27.1 (a) NJAC 8:39-27.1 (b)</p>		