

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: D35014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/16/2024
NAME OF PROVIDER OR SUPPLIER FOX TRAIL MEMORY CARE LIVING HILLSDALE		STREET ADDRESS, CITY, STATE, ZIP CODE 60 PASCACK ROAD HILLSDALE, NJ 07642		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R 000	Initial Comments Complaint #: NJ00168700 Census: 15 Sample: 3 THE FACILITY IS NOT IN COMPLIANCE WITH ALL OF THE STANDARDS IN THE NEW JERSEY ADMINISTRATIVE CODE N.J.A.C. 8:37 STANDARDS FOR LICENSURE OF DEMENTIA CARE HOMES.	R 000		
R 016	8:37-1.1(b) Purpose and Scope This chapter is promulgated for the purpose of establishing interim licensing standards for dementia care homes in the State of New Jersey to ensure that they are maintained and operated in such a manner that will protect the health, safety and welfare of its residents and at the same time preserve and promote a home-like atmosphere appropriate to such facilities. This STANDARD is not met as evidenced by: Complaint #: NJ00168700 Based on observation, interview, and record review it was determined that the facility Administrator failed to ensure that the facility's policy on "Resident Records" was implemented for 1 of 3 residents, Resident #2. The deficient practice was evidenced by the following: On NJ Exec Order 26.4b , the department of health received a Reportable Event Record (RER) regarding a NJ Exec Order 26.4b1 which resulted to a NJ Exec Order 26.4b1 which	R 016		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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R 016	<p>Continued From page 1</p> <p>occurred on [REDACTED]. According to the report Resident #2 [REDACTED] his/her [REDACTED] and [REDACTED] [REDACTED] on his/her [REDACTED] while enroute to his/her room.</p> <p>On 5/16/24 at 9:35 a.m., the surveyor reviewed the medical record (MR) of Resident #2 who moved into the facility in [REDACTED] with diagnoses which included [REDACTED] and [REDACTED]</p> <p>[REDACTED]</p> <p>During continued review of Resident #2's MR the surveyor observed a document titled, "Service Plan" dated [REDACTED] which revealed effective [REDACTED] "Resident #2 can currently [REDACTED] and be [REDACTED] by [REDACTED], [REDACTED] to the [REDACTED]). Then he/she can be [REDACTED]. Resident is [REDACTED] ..."</p> <p>At 11:00 a.m., the surveyor observed Resident #2 walking around in the common area during activity. The surveyor was unable to interview Resident #2 due to his/her [REDACTED].</p> <p>At 12:30 p.m., the surveyor interviewed the Regional Clinical Director (RCD) who was also a Registered Nurse (RN) regarding the resident's [REDACTED] and [REDACTED] status. The RCD/RN stated that Resident #2 was [REDACTED] according to a [REDACTED] recommendation. However, she was not able to provide the [REDACTED] recommendation for [REDACTED] status.</p> <p>During the interview the RCD/RN acknowledged that the service plan was not updated and stated that it should have been updated when Resident #2 became [REDACTED].</p> <p>Surveyor review of the policy titled "Resident</p>	R 016		

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R 016	Continued From page 2 Records" with a revision date of 5/21/20 indicated 3. "... Documentation will occur when an activity, event, or incident that is not usual for the resident or change in the level of assistance occurs."	R 016		