



State of New Jersey
DEPARTMENT OF HEALTH

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PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

KAITLAN BASTON, MD, MSc, DFASAM
Acting Commissioner

In Re Licensure Violation:

Carewell Health Medical Center
(NJ Facility ID# 10704)

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DIRECTED PLAN OF
CORRECTION

TO: Paige Dworak, FACHE, President and Chief Executive Officer
Carewell Health Medical Center
300 Central Avenue
East Orange, NJ 07018

As Mr. Clay McClain, Senior Director of Operations, was notified by verbal order on February 1, 2024, effective immediately, the Department of Health (Department) is ordering a Directed Plan of Correction (DPOC) requiring Carewell Health Medical Center (“the Medical Center” or “Carewell Health”) to file weekly staffing reports with the Department to demonstrate compliance with the requirements for staffing its radiology and computerized tomography (CT) scan departments, and the Medical Center is also required to participate in weekly status conference calls with the Department to discuss the staffing reports. The DPOC also requires the Medical Center to immediately file the hospital’s protocol for meeting patients’ needs in a timely manner, as required by N.J.A.C. 8:43G-12.7(h). This action is taken in accordance with the provisions set forth at N.J.A.C. 8:43E-2.4 in response to a record of deficiencies observed by Department staff in the Medical Center.

The Health Care Facilities Planning Act (N.J.S.A. 26:2H-1 et seq.) (the Act) provides a statutory scheme designed to ensure that all health care facilities are of the highest quality. Pursuant to the Act and N.J.A.C. 8:43E-1.1 et seq., General Licensure Procedures and Standards Applicable to All Licensed Facilities, the Commissioner of Health is authorized to inspect all health care facilities and to enforce the Manual of Hospital Licensing Standards set forth at N.J.A.C. 8:43G-1.1 et seq.

LICENSURE VIOLATIONS:

The Department has received credible evidence of deficient staffing practices at Carewell Health Medical Center, a stroke designated hospital. Due to lack of staffing for the CT scan and radiology departments, the Medical Center has failed to provide CT scan services at the Medical Center. The

Medical Center has had ongoing staffing issue pertaining to CT services since December 25, 2023 and pertaining to Xray services since January 24, 2024.

N.J.A.C. 8:43G-7A.3(a)(3) requires, “Neuro-imaging services capability that is available 24 hours a day, seven days a week, such that imaging shall be performed within 25 minutes following order entry. Such studies shall be interpreted by a board-certified radiologist, board-certified neurologist or residents who interpret such studies as part of their training in an Accreditation Council of Graduate Medical Education-approved radiology training program with concurrence by a board-certified radiologist or board-certified neurologist within 20 minutes of study completion.” Furthermore, N.J.A.C. 8:43G-7A.3(a)(3)(i) provides that, “Neuro-imaging services shall, at a minimum, include computerized tomography scanning or magnetic resonance imaging, as well as interpretation of the imaging.”

N.J.A.C. 8:43G-12.7(w) requires that radiology services for emergency needs shall be available to the emergency department 24 hours a day. N.J.A.C. 8:43G-28.10(c) provides that, if provided by the hospital, computer tomography shall be available within one hour at all times, when deemed appropriate in the judgement of the radiologist, unless the machinery is temporarily disabled or in use.

Department surveyors have identified the following dates/shifts at the Medical Center with a lapse in radiology services for the CT and Xray departments:

For the CT department: 12/25 (4PM-12AM); 12/30/23 (8PM-12AM); 1/5/24 (12PM-4PM); 1/6/24 (5PM-12AM); 1/8/24 (12AM-8AM); 1/9/24 (4PM-8PM); 1/14/24 (8PM-12AM); 1/16/24 (4P-12AM); 1/20/24 (4PM-12AM); 1/21/24 (8PM-12AM); and 1/28/24 (4PM-8PM). The CT department had a “lapse” in service 11 times from 12/25/23-1/30/24.

For the Xray department: 1/1/24 (8AM-3PM); 1/9/24 (12AM-8AM); 1/16/24 (4PM-6PM); and 1/20/24 (4PM-8PM).

Surveyors determined that no CT technicians are currently scheduled for: 2/2/24 (4PM-12AM); 2/3/24 (4PM-12AM); 2/4/24 (8AM-4PM, 4PM-12AM); 2/9/24 (4PM-12AM); and 2/10/24 (4PM-12AM).

Surveyors determined that no Xray technicians are currently scheduled for 2/3/24 (8AM-4PM; 4PM-12AM); and 2/10/24 (8AM-4PM; 4PM-12AM).

Surveyors reported that the Radiology Director stated that the contingency plan to address the immediate gaps in the schedule is to “try to convince agency tech or staff tech to pick up the shifts.”

The surveyors determined that the CT department currently has six CT technicians (employment status not identified) with one currently on a leave of absence, and no agency CT technicians.

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The surveyors determined that the Xray department currently has eight Xray technicians to cover the radiology and emergency departments. The staff schedule for 1/14/24-2/10/24 does not identify any agency Xray technicians. Four agency Xray technicians were identified on the 12/17/23-1/13/24 schedule.

The inability of the facility to provide CT and Xray services for patients presenting with emergency medical needs places patients at risk for serious harm, injury, impairment, or death.

The survey team also substantiated that the Medical Center does not have a protocol to meet the needs of the patients in a timely manner, as required by N.J.A.C. 8:43G-12.7(h). N.J.A.C. 8:43G-12.7(h) requires a hospital to implement a protocol for meeting the needs of patients in a timely manner, such as augmenting staff and notifying or diverting ambulances when a specified volume of patients in the emergency department is reached, or patient waiting time before initial evaluation by qualified medical personnel exceeds four hours.

DIRECTED PLAN OF CORRECTION:

As you were notified in the verbal order on February 1, 2024, the Department is ordering the facility to file weekly staffing reports beginning no later than February 9, 2024, detailing how the facility met the basic staffing requirements set forth above for the prior week.

The Hospital should send weekly staffing reports demonstrating compliance with the staffing requirements of N.J.A.C. 8:43G to Health Facility Survey and Field Operations, via facsimile to (609) 943-3013, Attention: Kimberly Hansen, Acute Care Program Manager, or via email to Kimberly.Hansen@doh.nj.gov.

These weekly reports shall include timely status updates regarding:

- Identified areas of non-compliance
- Corrective measures to address identified areas of non-compliance
- Status of corrective measures implementation

In addition, the Hospital is directed to maintain timely communication with the Department, including participation on weekly update calls, and additional calls as may be required by Department staff, including both the Hospital Administrator and the physician or other member of the Hospital's administrative staff responsible for CT and emergency department services.

As you were directed on February 1, 2024, the Hospital's protocol required by N.J.A.C. 8:43G-12.7(h) must be filed on February 2, 2024. The protocol may be emailed to Kimberly.Hansen@doh.nj.gov; gene.rosenblum@doh.nj.gov; and lisa.king@doh.nj.gov.

Please be advised that this DPOC shall remain in place until the facility is otherwise notified by a representative of this Department.

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Thank you for your attention to this important matter and for your anticipated cooperation. Should you have any questions concerning this order, please contact Lisa King, Office of Program Compliance at (609) 984-8128.

Sincerely,



Gene Rosenblum
Director
Office of Program Compliance
Division of Certificate of Need and Licensing

DATE: February 2, 2024
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E-MAIL: paige.dworak@carewellhealth.org and clay.mcclain@carewellhealth.org
REGULAR AND
CERTIFIED MAIL:
RETURN RECEIPT REQUESTED
Control # AX24005

c. Stefanie Mozgai
Pamela Lebak
Kimberly Hansen
Michael Kennedy
Gene Rosenblum
Lisa King