



**State of New Jersey**  
**DEPARTMENT OF HEALTH**  
 PO BOX 358  
 TRENTON, N.J. 08625-0358  
[www.nj.gov/health](http://www.nj.gov/health)

PHILIP D. MURPHY  
*Governor*

SHEILA Y. OLIVER  
*Lt. Governor*

JUDITH M. PERSICILLI, RN, BSN, MA  
*Commissioner*

IN RE:	:	
	:	
PARKER AT SOMERSET, INC.	:	CURTAILMENT OF NEW ADMISSIONS
(NJ Facility ID# NJ61812)	:	ORDER AND DIRECTED PLAN OF
	:	CORRECTION
	:	
	:	
	:	
	:	
	:	
	:	
	:	
	:	

DATE: February 8, 2021

TO Parker at Somerset, Inc.  
 James Zauner, Administrator  
 15 Dellwood Lane  
 Somerset, New Jersey 08873

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. 8:43-1.1 et seq. (General Licensure Procedures and Standards Applicable to All Licensed Facilities), the Commissioner of the New Jersey Department of Health (Department) is authorized to inspect all health care facilities and to enforce the Standards for Licensure of Long-Term Care Facilities set forth at N.J.A.C. 8:39-1.1 et seq. To effectuate the provisions and purposes of the Act, the Department has the power to inquire into health care services and the operation of health care facilities and to conduct periodic inspections of such facilities with respect to the fitness and adequacy of the premises, equipment, and personnel. Consistent with this authority, the Department promulgated regulations setting

forth the type and scope of inspections conducted at health care facilities. N.J.A.C. 8:43E-2.1.

On February 4, 2021, State surveyors conducted an on-site, COVID-focused infection control survey of Parker at Somerset, Inc. (the Facility), which is licensed by the Department as a skilled nursing facility. The survey found that the Facility was not in compliance with infection control standards for licensure of long-term care facilities set forth in New Jersey Administrative Code Section 8:39, the Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19 and Executive Directive No. 20-026<sup>1</sup>.

### **SURVEY FINDINGS**

The survey found that the facility failed to ensure appropriate infection control practices were followed in accordance with the Centers for Disease Control (CDC) guidelines, the New Jersey Department of Health (NJDOH) guidelines and the NJDOH's Executive Order No. 20-026<sup>1</sup> to prevent the spread of COVID-19. Specifically, among other things, the facility:

- Failed to utilize proper personal protective equipment (PPE), an N95 respirator mask, for care of COVID-19 residents. Instead, facility staff were wearing a KN95 mask that was not approved for medical use and, in addition, the staff were wearing these masks repeatedly and changed the mask twice a week.
- Continued to care for all other residents in all other cohort groups, persons under investigation (PUI) and non-ill residents, by utilizing a KN95 mask that was not approved for medical use.
- Failed to ensure, by administrative oversight, that the facility was a) in compliance with all recommended infection control measures, in accordance with CDC and Department guidelines and b) implementing mitigation strategies to prevent the transmission of COVID-19 by providing the staff with the necessary N95 respirator masks approved by The National Institute for Occupational Safety and Health.

The above-referenced practices placed residents and staff at a heightened risk of COVID-19 infection. Pursuant to the Department's powers, and in order to slow the spread of COVID-19 in the community and protect vulnerable populations from contracting the virus, the Department orders that the Facility curtail its new admissions and it issues it a directed plan of correction pursuant to N.J.A.C. 8:43E-3.6 and N.J.A.C. 8:43E-2.4(d).

### **CURTAILMENT OF NEW ADMISSIONS ORDER**

Pursuant to N.J.A.C 8:43E-3.6, the Department may impose a curtailment of new admissions where violations of licensing regulations are found that pose an immediate and serious threat of harm to patients or residents of a health care facility. Because the violations outlined above

posed an immediate threat of harm to the residents of the Facility, the Department ORDERS that the Facility is prohibited from accepting new admissions until further notice. The effective date of the curtailment is February 4, 2021, which is the date the Department verbally notified the Facility of the curtailment order.

#### **DIRECTED PLAN OF CORRECTION (DPOC)**

The Department of Health further DIRECTS the following plan of correction pursuant to N.J.A.C. § 8:43E-2.4(d). The Facility shall:

Retain the full-time services of a Certified Infection Control Practitioner (ICP) consultant to begin providing services to the Facility no later than February 12, 2021. The ICP consultant shall have no previous or current ties to the Facility's principals, management and/or employers or other related individuals of any kind, including, but not limited to, employment, business, or personal ties. The consultant shall be completely independent of Parker at Somerset, Inc. The Facility shall provide the Department with the name and resume of the consultant by February 10, 2021. The Facility may contact the Association of Professionals in Infection Control and Epidemiology ([apic.org](http://apic.org)) to obtain the names of ICPs in its area. The ICP consultant's resume should be sent to [Pam.Lebak@doh.nj.gov](mailto:Pam.Lebak@doh.nj.gov) and [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov).

The ICP consultant shall be on-site for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The Facility shall send weekly reports every Friday by 1:00 p.m. to the Communicable Disease Services (CDS) Healthcare Associated Infections Coordinator, Jason Mehr, MPH, CIC, [Jason.Mehr@doh.nj.gov](mailto:Jason.Mehr@doh.nj.gov), with a copy to [Pam.Lebak@doh.nj.gov](mailto:Pam.Lebak@doh.nj.gov). These weekly reports shall include timely updates regarding identified areas of non-compliance with infection control protocol, corrective measures to address identified areas of non-compliance and status of corrective measures implementation. The Facility shall also report the status of any outbreak investigation and identified cases (as defined by CDS). In addition, the Facility is directed to maintain timely communication with the Department as may be required, including by both the Facility's infection prevention team and the ICP consultant.

Under this Curtailment of New Admissions Order and DPOC, the Facility shall comply with the applicable standards in N.J.A.C. 8:39-1 et seq. (Standards for Licensure of Long-Term Care Facilities), as modified by the Department's operational waivers, the unwaived Medicare conditions of 42 C.F.R. 483.1 et seq. (Requirements for Long Term Care Facilities), and the conditions as modified by the Centers for Medicare & Medicaid Services 1135 blanket waivers and the New Jersey specific 1135 waivers.



This Curtailement of New Admissions Order and DPOC shall remain in place until the Facility is otherwise notified in writing by a representative of this Department. Please also be advised that Department staff will monitor Facility compliance with this order to determine whether corrective measures are implemented by the Facility in a timely fashion.

**INFORMAL DISPUTE RESOLUTION (IDR)**

N.J.A.C. 8:43E-2.3 provides facilities the option to challenge factual survey findings by requesting Informal Dispute Resolution with Department representatives. IDR requests must be made in writing within ten (10) business days from receipt of this letter and must state whether the facility opts for a telephone conference or review of facility documentation only. The request must include an original and ten (10) copies of the following:

1. The written survey findings;
2. A list of each specific deficiency the facility is contesting;
3. A specific explanation of why each contested deficiency should be removed; and
4. Any relevant supporting documentation.

Any other supporting documentation or correspondence submitted within 10 business days of the scheduled IDR will only be considered at the discretion of the IDR panel. Any supporting documentation or correspondence for the IDR should be sent via first class mail and by electronic mail to:

Darlene Jackson  
Office of Program Compliance  
New Jersey Department of Health  
P.O. Box 358  
Trenton, New Jersey 08625-0358  
Darlene.Jackson@doh.nj.gov

The IDR review and conference will be conducted by professional Department staff who do not participate in the survey process. Requesting IDR review does not delay the imposition of any enforcement remedies.

**RIGHT TO HEARING:**

Pursuant to N.J.A.C. 8:43E-4.1, Parker at Somerset, Inc. is also entitled to a prompt formal hearing at the Office of Administrative Law (OAL) to challenge this curtailement order. Parker at Somerset, Inc. may request a hearing to challenge either the factual survey findings or the curtailement, or both. Please note that facility rights to IDR (Informal Dispute Resolution) and administrative law

Parker at Somerset, Inc.  
Curtailement of New Admissions and Directed Plan of Correction  
February 8, 2021  
Page 5

hearings are not mutually exclusive, and both may be invoked simultaneously.

Parker at Somerset, Inc. must advise this Department within 30 days of receipt of this letter to request an OAL hearing regarding this matter.

Please forward your OAL hearing request to:

Office of Legal and Regulatory Compliance  
Attn: OAL HEARING REQUESTS  
New Jersey State Department of Health  
P.O. Box 360  
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Parker at Somerset, Inc. is owned by a corporation, representation by counsel is required.

In the event of an OAL hearing regarding this matter, Parker at Somerset, Inc. is further required to submit a written response to each and every charge as specified in this order, which shall accompany your written request for a hearing.

**OTHER REMEDIES:**

Failure to comply with the Curtailement of New Admissions order and DPOC may result in the imposition of penalties and/or other applicable remedies. N.J.A.C. 8:43E-3.4(a)(2) provides for a penalty of \$250 per day for each patient admitted in violation of this curtailment order.

Thank you for your attention to this important matter and for your anticipated cooperation. If you have any questions regarding this Curtailement of New Admissions Order and Directed Plan of Correction, please contact Lisa King in the Office of Program Compliance at [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov). For other questions, please contact the New Jersey Coronavirus and Poison Center Hotline at (800) 222-1222. For COVID-19 updates, please continue to check to the Department's website for routinely updated information at <https://www.nj.gov/health/cd/topics/ncov.shtml>.

Sincerely,

  
Lisa King, Regulatory Officer  
Office of Program Compliance  
Division of Certificate of Need

Parker at Somerset, Inc.  
Curtailement of New Admissions and Directed Plan of Correction  
February 8, 2021  
Page 6

and Licensing  
New Jersey Department of Health

LK:JLM:dj  
February 8, 2021  
Control #X21008/Event ID #33PS11  
Via Certified, Regular Mail and E-Mail  
(jzauner@parkerlife.org)

c. Nursing Home Administrators Licensing Board  
Frank Skrajewski, Long Term Care Licensing  
Donna Koller, Long Term Care Survey & Certification  
Pamela Lebak, Long Term Care Survey & Certification