



**State of New Jersey**  
**DEPARTMENT OF HEALTH**  
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[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*

<p>In Re Licensure Violation:</p> <p>Hammonton Center for Rehabilitation        And Healthcare        (NJ Facility ID# NJ60113)</p>	<p>: : : : : : : : : :</p>	<p>CURTAILMENT OF        ADMISSIONS        ORDER AND        DIRECTED PLAN OF        CORRECTION</p>
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TO: Eli Goldman, Administrator  
 Hammonton Center for Rehabilitation and Healthcare  
 43 N. White Horse Pike  
 Hammonton, NJ 08037

Dear Mr. Goldman:

This letter confirms the verbal order given to you by the Department of Health (hereinafter, “the Department”) on June 11, 2023, ordering the Hammonton Center for Rehabilitation and Healthcare (hereinafter, “the Hammonton Center”) to curtail all admissions, with the exception of readmissions, and imposing a Directed Plan of Correction (DPOC) requiring Hammonton Center to retain the full-time services of a Consultant Administrator and Consultant Director of Nursing, and to immediately retain additional nursing staff and staffing agencies to help the facility meet staffing requirements. In addition, the Department ordered the facility to submit staffing agency contracts and to submit additional documentation to demonstrate the hiring of additional staff, as set forth below.

These enforcement actions are being taken in accordance with the provisions set forth at N.J.A.C. 8:43E-2.4 (Plan of Correction) and 3.1 (Enforcement Remedies Available), after Staff from the Department's Health Facility Survey and Field Operations (HFS&FO or Survey) were on-site at Hammonton Center and found significant deficiencies in nurse staffing and deficiencies in medication administration posing an immediate and serious threat of harm to residents.

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 Standards for Licensure of Long-Term Care Facilities set forth at N.J.A.C. 8:39-1.1 et seq.

## **LICENSURE VIOLATIONS:**

Staff from Survey were on-site at the Hammonton Center on June 11, 2023. Based on observations, interviews, and review of pertinent Facility documentation, it was determined that the Facility violated N.J.A.C. 8:39-29.2(d), N.J.A.C. 8:39-4.1(a)(11) and N.J.S.A. 30:13-18.

The survey team determined that the facility failed to comply with the requirements of N.J.A.C. 8:39-29.2(d) when it failed to ensure that residents were free of significant medication errors resulting from lack of licensed nursing staff. Critical medications are not being administered per the physician orders, which could lead to serious negative clinical outcomes as identified for each individual medication. Survey staff determined that an approximate total of thirty to forty residents on the first and second floors of the facility had received their medications late on the morning of June 11, 2023. Surveyors were told that B hall and D hall did not receive their a.m. meds yesterday until the 3:00-11:00 p.m. shift nurse came on duty. Survey staff determined that cardiac, diabetes and psychiatric/psychotropic medications were not being administered as ordered on the morning of June 11, 2023. The failure to administer insulin medications resulted in an immediate and serious threat to resident health and safety.

The facility has not been hiring and retaining enough nursing staff in violation of N.J.A.C. 8:39-4.1(a)(11) and has failed to maintain adequate staffing ratios in violation of N.J.S.A. 30:13-18. Section 1 of P.L. 2020, c. 112 (N.J.S.A. 30:13-18) requires nursing homes to maintain the following minimum direct care staff -to-resident ratios: (1) one certified nurse aide to every eight residents for the day shift; (2) one direct care staff member to every 10 residents for the evening shift, provided that no fewer than half of all staff members shall be certified nurse aides, and each staff member shall be signed in to work as a certified nurse aide and shall perform certified nurse aide duties; and (3) one direct care staff member to every 14 residents for the night shift, provided that each direct care staff member shall sign in to work as a certified nurse aide and perform certified nurse aide duties.

Survey staff determined that the facility had a first-floor census of 84 residents and a second-floor census of 101 residents. Survey staff determined that for the first floor on June 11, 2023, for the 7:00 a.m. to 3:00 p.m. shift, the facility had three licensed professional nurses (LPNs) on duty and five certified nurse aides (CNAs) on duty. Survey staff determined that for the first floor on June 11, 2023, for the 3:00 p.m. to 11:00 p.m. shift, the facility had one registered nurse, two LPNs and seven certified nurse aides (CNAs) on duty. Survey staff determined that for the second floor on June 11, 2023, for the 7:00 a.m. to 3:00 p.m. shift, the facility had three LPNs on duty and six CNAs on duty. Survey staff determined that for the second floor on June 11, 2023, for the 3:00 p.m. to 11:00 p.m. shift, the facility had no professional nurses on duty and six CNAs on duty. The

staffing deficiencies at Hammonton Center have led to significant medication errors, putting residents at risk of harm, impairment, or death. The facility's failure to comply with state requirements and regulations has resulted in the failure to provide adequate care for their residents.

The survey team determined that the facility's non-compliance with these requirements had caused, or was likely to cause, serious injury, harm, impairment, or death to residents.

You will receive a complete inspection report detailing all deficiencies and factual findings.

#### **CURTAILMENT:**

The Department hereby orders the continuation of curtailment of all admissions to Hammonton Center, excluding readmissions.

Please be advised that N.J.A.C. 8:43E-3.4(a)(2) provides for a penalty of \$250 per day for each resident at the facility in violation of this curtailment order.

#### **DIRECTED PLAN OF CORRECTION:**

a. The facility must retain the full-time, on-site services of an Administrator Consultant in accordance with N.J.A.C. 8:34-1.1 et seq., who shall be responsible for consultation services concerning the day-to-day operations of the facility. The Administrator Consultant must be approved by the Department. The facility shall provide the name and resume of the proposed Administrator Consultant by submitting the name and resume to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov), [Gene.Rosenblum@doh.nj.gov](mailto:Gene.Rosenblum@doh.nj.gov) and [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov) by 12:00 noon on June 14, 2023. The Administrator Consultant shall be present in the facility for no less than 40 hours per week, with documented coverage of all shifts and weekends, until further notice from the Department. The approved Administrator Consultant shall be retained no later than the close of business, June 19, 2023. The contract with the consultant shall include provisions for immediate corrective action with applicable state licensing standards. The 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 Administrator Consultant and facility shall submit weekly progress reports, beginning on June 23, 2023, and continuing each Friday thereafter. The progress reports shall be submitted to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), and [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov).

The Administrator Consultant shall:

1. Assess the facility's compliance with all applicable state licensing standards and identify areas of non-compliance;
2. Oversee the development, implementation and evaluation of corrective action plans;
3. Develop and implement compliance management systems at the facility;
4. Collaborate with facility leadership to ensure that operating procedures, systems and standards align with compliance requirements;
5. Ensure staff training needed to comply with applicable licensing standards; and,

6. Take other actions as may be necessary to ensure identification of compliance issues and implementation of timely corrective measures.

The weekly progress reports by the Administrator Consultant and the facility should be sent every Friday by 1:00 p.m. to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), and [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov). These weekly reports shall include timely status updates regarding:

1. Identified areas of non-compliance;
2. Corrective measures to address identified areas of non-compliance; and,
3. Status of corrective measures implementation.

b. Hammonton Center shall retain the full-time services of a Consultant Director of Nursing who is a Registered Nurse (RN). The Consultant DON must be approved by the Department. The facility shall provide the Department with the name and resume by 12:00 noon June 14, 2023. The resume should be sent to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov), [Gene.Rosenblum@doh.nj.gov](mailto:Gene.Rosenblum@doh.nj.gov), and [Lisa.King@doh.nj.gov](mailto:Lisa.King@doh.nj.gov). The consultant DON 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 approved Consultant Director of Nursing shall be retained no later than the close of business, June 19, 2023. They shall be responsible for ensuring that immediate corrective action is taken to ensure resident safety is not jeopardized and applicable state licensing standards are met.

c. Hammonton Center shall provide sufficient staffing in accordance with its facility assessment and shall adhere to the requirements of State staffing laws, including N.J.S.A. 30:13-18.

d. The administrator shall submit a daily report consisting of the staffing for all shifts for the previous day. The report shall include the names of the staff and their title, the shift and hours worked, indicate if a licensed staffer is assigned to perform the duties of a CNA on that shift, and the total number of staff per shift. These reports shall be emailed by 1:00 pm each day to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), and [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov).

e. The administrator shall also provide a weekly staffing report every Monday, starting June 12, 2023, which includes projected staffing for the week and actual staffing for the prior week. The administrator shall also provide contracts with the staffing agencies and document the facility's efforts to retain staff. These reports and documents shall be emailed by 1:00 pm each day to [Sophie.Xyloportas@doh.nj.gov](mailto:Sophie.Xyloportas@doh.nj.gov), [Carol.Hamill@doh.nj.gov](mailto:Carol.Hamill@doh.nj.gov), [Laura.Sagaard@doh.nj.gov](mailto:Laura.Sagaard@doh.nj.gov).

The DPOC shall remain in place until the facility is otherwise notified in writing by a representative of this Department.

Department staff will monitor facility compliance with this order to determine whether corrective measures are implemented by the facility in a timely fashion. Failure to comply with these and any other applicable requirements, as set forth in pertinent rules and regulations, may result in the imposition of additional enforcement actions, including penalties.

Please be advised that you may be subject to other enforcement remedies in addition to this order.

**FORMAL HEARING:**

Hammonton Center is entitled to contest the curtailment, pursuant to N.J.S.A. 26:2H-14, by requesting a formal hearing at the Office of Administrative Law (OAL). Hammonton Center may request a hearing to challenge any or all of the following: the factual survey findings and/or the curtailment. Hammonton Center must advise this Department within 30 days of the date of this letter if it requests an OAL hearing regarding the curtailment.

Please forward your OAL hearing request to:

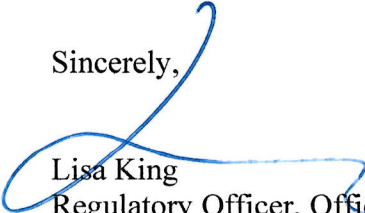
Attention: OAL Hearing Requests  
Office of Legal and Regulatory Compliance, New Jersey Department of Health  
P.O. Box 360  
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if Hammonton Center is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Hammonton Center is further required to submit a written response to each and every charge as specified in this notice, which shall accompany its written request for a hearing.

Since the surveyors have determined that an immediate and serious risk of harm is posed to the residents, please be advised that the Department will not hold the curtailment or the DPOC in abeyance during any appeal of the curtailment.

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) 376-7751.

Sincerely,



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

DATE: June 12, 2023  
FACSIMILE  
E-MAIL (E goldman@hammontoncenter.net)  
REGULAR AND CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
Control # X23023