



- f. 12/22/21 had 43 CNAs for 458 residents on the day shift, required 58 CNAs.
- g. 12/23/21 had 41 CNAs for 463 residents on the day shift, required 58 CNAs.
- h. 12/24/21 had 37 CNAs for 463 residents on the day shift, required 58 CNAs.
- i. 12/24/21 had 39 total staff for 463 residents on the evening shift, required 47 total staff.
- j. 12/24/21 had 27 total staff for 463 residents on the overnight shift, required 34 total staff.
- k. 12/25/21 had 39 CNAs for 462 residents on the day shift, required 58 CNAs.
- l. 12/25/21 had 41 total staff for 462 residents on the evening shift, required 47 total staff.
- m. 12/25/21 had 25 total staff for 462 residents on the overnight shift, required 33 total staff.
- n. 12/26/21 had 23 CNAs for 461 residents on the day shift, required 58 CNAs.
- o. 12/26/21 had 38 total staff for 461 residents on the evening shift, required 47 total staff.
- p. 12/26/21 had 23 total staff for 461 residents on the overnight shift, required 33 total staff.
- q. 12/27/21 had 32 CNAs for 460 residents on the day shift, required 58 CNAs.
- r. 12/27/21 had 43 total staff for 460 residents on the evening shift, required 46 total staff.
- s. 12/27/21 had 21 total staff for 460 residents on the overnight shift, required 33 total staff.
- t. 12/28/21 had 32 CNAs for 460 residents on the day shift, required 58 CNAs.
- u. 12/28/21 had 24 total staff for 460 residents on the overnight shift, required 33 total staff.
- v. 12/29/21 had 34 CNAs for 458 residents on the day shift, required 58 CNAs.
- w. 12/29/21 had 30 total staff for 458 residents on the overnight shift, required 33 total staff.
- x. 12/30/21 had 29 CNAs for 457 residents on the day shift, required 58 CNAs.
- y. 12/30/21 had 25 total staff on the overnight shift, required 33 total staff.
- z. 12/31/21 had 28 CNAs for 455 residents on the day shift, required 57 CNAs.
- aa. 12/31/21 had 36 total staff for 455 residents on the evening shift, required 46 total staff.
- bb. 12/31/21 had 22 total staff on the overnight shift, required 33 total staff.
- cc. 01/01/22 had 31 CNAs for 453 residents on the day shift, required 57 CNAs.
- dd. 01/01/22 had 37 total staff for 453 residents on the evening shift, required 46 total staff.
- ee. 01/01/22 had 19 total staff for 453 residents on the overnight shift, required 33 total staff.

As a result of these and additional staffing shortages found later in the survey, Woodland was cited with a federal deficiency arising from the facility's failure to comply with state licensing laws, specifically N.J.S.A. 30:13-18 and N.J.A.C. 8:39-5.1(a).

On January 14, 2022, the Department issued a Directed Plan of Correction requiring the facility to submit a plan detailing its measures to hire and retain staff and to submit weekly progress reports regarding its implementation of the staffing plan. In addition, the Department ordered Woodland to curtail all new admissions to the facility.

On February 10, 2022, the Department issued a Notice of Violations, Corrective Action and State Monitoring. This notice informed the facility that the facility's 30-60-90 day plan that proposed a 10% reduction in residents to address its staffing deficiencies was not acceptable because it failed to meet the required minimum staffing ratios under applicable law, and, as a result, was insufficient to meet the needs of the resident. The notice required the facility to submit by February 21, 2022, an acceptable plan to address the staffing shortage and meet required staffing ratios by increasing staff, reducing the facility census or a combination of both. In addition, the notice notified the facility that the Department would be appointing a state monitor for a 90-day term to, among other things, assess facility operations, analyze the root causes of the current situation in the facility, and make recommendations to the facility and the Department.

In the Department's February 17, 2022, correspondence responding to the facility's 30-60-90 day plan, the Department notified the facility that staffing at the facility must meet the needs of the residents in accordance with state law and required the facility to submit an acceptable plan to address the staffing shortage and meet required staffing ratios by increasing staff, reducing the facility census or a combination of both. As noted under the Licensure Violations below, Woodland continued to fall short of the minimum statutory requirements.

**STAFFING REQUIREMENTS:**

N.J.S.A. 30:13-18, effective February 1, 2021, sets forth the minimum staffing requirements for nursing facilities, which take the form of a ratio of the minimum number of direct care staff to the number of residents as set forth below:

a. Notwithstanding any other staffing requirements as may be established by law, every nursing home as defined in section 2 of P.L.1976, c.120 (C.30:13-2) or licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall 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.

b. Upon any expansion of resident census by the nursing home, the nursing home shall be exempt from any increase in direct care staffing ratios for a period of nine consecutive shifts from the date of the expansion of the resident census.

c.

(1) The computation of minimum direct care staffing ratios shall be carried to the hundredth place.

(2) If the application of the ratios listed in subsection a. of this section results in other than a whole number of direct care staff, including certified nurse aides, for a shift, the number of required direct care staff members shall be rounded to the next higher whole number when the resulting ratio, carried to the hundredth place, is fifty-one hundredths or higher.

(3) All computations shall be based on the midnight census for the day in which the shift begins.

d. Nothing in this section shall be construed to affect any minimum staffing requirements for nursing homes as may be required by the Commissioner of Health for staff other than direct care staff, including certified nurse aides, or to restrict the ability of a nursing home to increase staffing levels, at any time, beyond the established minimum.

e. The minimum direct care staffing ratios required by this section shall not apply to any pediatric long-term care facility licensed by the Department of Health.

f. As used in this section, "direct care staff member" means any registered professional nurse, licensed practical nurse, or certified nurse aide who is acting in accordance with that individual's authorized scope of practice, and pursuant to documented employee time schedules. [N.J.S.A. 30:13-18]

In addition, N.J.A.C. 8:39-5.1(a) requires the facility to "comply with applicable Federal, State, and local laws, rules, and regulations."

## LICENSURE VIOLATIONS

Through survey findings and facility reports, the Department has identified the following staffing deficiencies in addition to those listed above:

01/02/22 had 26 CNAs for 453 residents on the day shift, required 57 CNAs. **SHORT-31**

01/02/22 had 40 total staff for 453 residents on the evening shift, required 46 total staff. **SHORT-6**

01/02/22 had 23 total staff for 453 residents on the overnight shift, required 33 total staff. **SHORT -10**

01/03/22 had 41 CNAs for 453 residents on the day shift, required 57 CNAs. **SHORT-16**

01/03/22 had 37 total staff for 453 residents on the evening shift, required 46 total staff. **SHORT-11**

01/03/22 had 23 total staff for 453 residents on the overnight shift, required 33 total staff. **SHORT-10**

01/04/22 had 42 CNAs for 449 residents on the day shift, required 57 CNAs. **SHORT-15**

01/05/22 had 45 CNAs for 449 residents on the day shift, required 57 CNAs. **SHORT-12**

01/06/22 had 44 CNAs for 449 residents on the day shift, required 57 CNAs. **SHORT-13**

01/06/22 had 29 total staff for 449 residents on the overnight shift, required 33 total staff. **SHORT-4**

01/07/22 had 37 CNAs for 449 residents on the day shift, required 57 CNAs. **SHORT-20**

01/07/22 had 29 total staff for 449 residents on the overnight shift, required 33 total staff. **SHORT 4**

01/08/22 had 44 CNAs for 448 residents on the day shift, required 56 CNAs. **SHORT-12**

01/08/22 had 30 total staff for 448 residents on the overnight shift, required 32 total staff. **SHORT-2**

01/30/22 had 34 CNAs for 442 residents on the day shift, required 56 CNAs. **SHORT-22**

01/30/22 had 40 total staff for 442 residents on the evening shift, required 45 total staff **SHORT-5**

01/30/22 had 20 total staff for 442 residents on the overnight shift, required 32 total staff. **SHORT-12**

01/31/22 had 50 CNAs for 441 residents on the day shift, required 56 CNAs. **SHORT-6**

01/31/22 had 29 total staff for 441 residents on the overnight shift, required 32 total staff. **SHORT-3**

02/01/22 had 53 CNAs for 438 residents on the day shift, required 55 CNAs. **SHORT-2**

02/01/22 had 31 total staff for 438 residents on the overnight shift, required 32 total staff. **SHORT-1**

02/02/22 had 50 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-5**

02/03/22 had 50 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-5**

02/04/22 had 41 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-14**

02/04/22 had 26 total staff for 435 residents on the overnight shift, required 32 total staff. **SHORT-6**

02/05/22 had 40 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-15**

02/05/22 had 31 total staff for 435 residents on the overnight shift, required 32 total staff. **SHORT-1**

02/06/22 had 35 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-10**

02/07/22 had 51 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-4**

02/07/22 had 31 total staff for 435 residents on the overnight shift, required 32 total staff. **SHORT-1**

02/09/22 had 44 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-11**

02/10/22 had 41 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-13**

02/11/22 had 44 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-11**

02/12/22 had 45 CNAs for 435 residents on the day shift, required 55 CNAs. **SHORT-10**

02/12/22 had 30 total staff for 435 residents on the overnight shift, required 32 total staff. **SHORT-2**

02/13/22 had 53 CNAs for 431 residents on the day shift, required 54 CNAs. **SHORT-1**

02/14/22 had 24 total staff for 431 residents on the overnight shift, required 31 total staff. **SHORT-7**

02/15/22 had 29 total staff for 431 residents on the overnight shift, required 31 total staff. **SHORT-2**

02/16/22 had 26 total staff for 431 residents on the overnight shift, required 31 total staff. **SHORT-5**

02/17/22 had 27 total staff for 434 residents on the overnight shift, required 31 total staff. **SHORT-4**

02/18/22 had 25 total staff for 432 residents on the overnight shift, required 31 total staff. **SHORT-6**

02/19/22 had 38 CNAs for 432 residents on the day shift, required 54 CNAs. **SHORT-6**

02/19/22 had 34 total staff for 432 residents on the evening shift, required 44 total staff. **SHORT-10**

02/19/22 had 18 total staff for 432 residents on the overnight shift, required 31 total staff. **SHORT-13**

02/20/22 had 49 CNAs for 432 residents on the day shift, required 54 CNAs. **SHORT-5**

02/26/22 had 47 CNAs for 427 residents on the day shift, required 54 CNAs. **SHORT-7**

02/27/22 had 42 CNAs for 427 residents on the day shift, required 54 CNAs. **SHORT 12**

02/27/22 had 29 total staff for 427 residents on the overnight shift, required 31 total staff. **SHORT 2**

03/01/22 had 49 CNAs for 427 residents on the day shift, required 54 CNAs. **SHORT 9**

03/04/22 had 52 CNAs for 429 residents on the day shift, required 54 CNAs. **SHORT 2**

03/05/22 had 45 CNAs for 429 residents on the day shift, required 54 CNAs. **SHORT 9**

03/05/22 had 29 total staff for 429 residents on the overnight shift, required 31 total staff. **SHORT 2**

03/06/22 had 34 CNAs for 429 residents on the day shift, required 54 CNAs. **SHORT 20**

03/07/22 had 51 CNAs for 429 residents on the day shift, required 54 CNAs. **SHORT 3**

03/10/22 had 45 CNAs for 426 residents on the day shift, required 54 CNAs. **SHORT 9**

03/11/22 had 51 CNAs for 426 residents on the day shift, required 54 CNAs. **SHORT 3**

03/12/22 had 45 CNAs for 426 residents on the day shift, required 54 CNAs. **SHORT 9**

03/13/22 had 41 CNAs for 426 residents on the day shift, required 54 CNAs. **SHORT 13**

03/13/22 had 25 total staff for 426 residents on the evening shift, required 31 total staff. **SHORT 6**

03/14/22 had 46 CNAs for 420 residents on the day shift, required 53 CNAs. **SHORT 7**

03/15/22 had 52 CNAs for 419 residents on the day shift, required 53 CNAs. **SHORT 1**

03/17/22 had 50 CNAs for 416 residents on the day shift, required 52 CNAs. **SHORT 2**

03/18/22 had 48 CNAs for 415 residents on the day shift, required 52 CNAs. **SHORT 4**

03/19/22 had 35 CNAs for 411 residents on the day shift, required 52 CNAs. **SHORT 17**

03/19/22 had 36 total staff for residents on the evening shift, required 42 total staff. **SHORT 6**

03/19/22 had 22 total staff for residents on the overnight shift, required 30 total staff. **SHORT 8**

03/20/22 had 35 CNAs for 411 residents on the day shift, required 52 CNAs. **SHORT 17**

03/21/22 had 51 CNAs for 410 residents on the day shift, required 52 CNAs. **SHORT 1**

03/26/22 had 48 CNAs for 404 residents on the day shift, required 51 CNAs. **SHORT 3**

03/27/22 had 47 CNAs for 404 residents on the day shift, required 51 CNAs. **SHORT 4**

03/28/22 had 47 CNAs for 404 residents on the day shift, required 51 CNAs. **SHORT 4**

03/28/22 had 27 total staff for 404 residents on the overnight shift, required 29 total staff. **SHORT 2**

03/29/22 had 50 CNAs for 404 residents on the day shift, required 51 CNAs. **SHORT 1**

03/29/22 had 28 total staff for 404 residents on the overnight shift, required 29 total staff. **SHORT 1**

04/02/22 had 37 CNAs for 401 residents on the day shift, required 51 CNAs. **SHORT 14**

04/03/22 had 42 CNAs for 401 residents on the day shift, required 51 CNAs. **SHORT 9**

04/08/22 had 45 CNAs for 394 residents on the day shift, required 50 CNAs. **SHORT 5**

04/10/22 had 38 CNAs for 394 residents on the day shift, required 50 CNAs. **SHORT 12**

04/11/22 had 48 CNAs for 394 residents on the day shift, required 50 CNAs. **SHORT 2**

**MONETARY PENALTIES:**

N.J.A.C. 8:43E-3.4(a)8 allows the Department to impose a monetary penalty for multiple deficiencies related to patient care or physical plant standards throughout a facility, and/or when such violations represent a direct risk that a patient's physical or mental health will be compromised, or where an actual violation of a resident's or patient's rights is found. A penalty of \$1,000 per violation may be assessed for each day noncompliance is found.

The Department of Health is assessing penalties pursuant to N.J.A.C. 8:43E-3.4(a) in response to ongoing and serious staffing deficiencies identified by the Department by review of facility weekly reports. The surveyors confirmed that Woodland's staffing reports reveal that the facility failed to meet staffing requirements on a minimum of 69 days (running from December 19, 2021). These multiple staffing deficiencies represented a direct risk to resident care.

In accordance with N.J.A.C. 8:43E-3.4(a)8, and because the violations of licensure regulations related to resident care or physical plant standards represented a risk to the health, safety, or welfare of the residents of a facility, the penalty assessed for each violation is \$1,000 per violation. The total penalty assessed for the 69 violations is \$69,000. In addition, the penalty shall continue to accrue at \$1,000 per day for each day the facility is out of compliance with the required staffing ratios.

The total amount of this \$69,000 penalty is required to be paid within 30 days of receipt of this letter by certified check or money order made payable to the "Treasurer of the State of New Jersey" and forwarded to Office of Program Compliance, New Jersey Department of Health, P.O. Box 358, Trenton, New Jersey 08625-0358, Attention: Lisa King. On all future correspondence related to this Notice, please refer to Control # X21034.

### **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. Facilities wishing to challenge only the assessment of penalties are not entitled to IDR review, but such facilities may request a formal hearing at the Office of Administrative Law as set forth herein below. Please note that the facility's rights to IDR and administrative hearings are not mutually exclusive and both may be invoked simultaneously. 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 supporting documentation or other papers submitted later than 10 business days prior to the scheduled IDR may not be considered at the discretion of the IDR panel. Send the above-referenced information to:

Jannelie Claudio, Office of Program Compliance  
New Jersey Department of Health  
P.O. Box 358  
Trenton, New Jersey 08625-0358

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

### **FORMAL HEARING:**

Woodland is entitled to challenge the assessment of penalties pursuant to N.J.S.A. 26:2H-134, by requesting a formal hearing at the Office of Administrative Law (OAL). Woodland may request a hearing to challenge any or all of the following: the factual survey findings and/or the assessed penalties. Woodland must advise this Department within 30 days of the date of this letter if it requests an OAL hearing.

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 Woodland is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the curtailment, Woodland 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.

Failure to submit a written request for a hearing within 30 days from the date of this notice will render this a final agency decision. The final agency order shall thereafter have the same effect as a judgment of the court. The Department also reserves the right to pursue all other remedies available by law.



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Notice of Assessment of Penalties  
April 22, 2022  
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Finally, be advised that Department staff will monitor compliance with this notice to determine whether corrective measures are implemented by Woodland 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 penalties.

Thank you for your attention to this important matter and for your anticipated cooperation. Should you have any questions concerning this notice, please contact Lisa King, Office of Program Compliance at Lisa.King@doh.nj.gov.

Sincerely,



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

DATE: April 22, 2022  
E-MAIL: mspiegel@woodlandbehavioral.com  
REGULAR AND CERTIFIED MAIL, RETURN RECEIPT REQUESTED  
Control# X21034

- C. Nursing Home Administrators Licensing Board  
Frank Skrajewski  
Donna Koller, Health Facility Survey and Field Operations  
Pamela Lebak, Health Facility Survey and Field Operations