



State of New Jersey
DEPARTMENT OF HEALTH
PO BOX 358
TRENTON, N.J. 08625-0358
www.nj.gov/health

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

JUDITH M. PERSICHILLI, RN, BSN, MA
Commissioner

September 22, 2022

VIA CERTIFIED MAIL RRR
Blandena Molock



**Re: Notice of Revocation for
Nurse Aide Certification**
Blandena Molock vs. New Jersey
Department of Health
NA27405
Agency Reference No. 22-13880

Dear Ms. Molock:

The Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services, under authority of federal law, imposes a requirement on state governments to ensure that nurse aides have the education and clinical skills necessary to care for residents of long term care facilities. See 42 C.F.R. Part 483. These regulations also require that each State maintain a nurse aide Registry, which, pursuant to 42 C.F.R. 483.156(c)(1)(iv), must contain all substantiated findings by the State of resident mistreatment, abuse, neglect, or misappropriation of resident property by a certified nurse aide.

The Certification Program of the New Jersey State Department of Health (Department) was notified of the results of an investigation in which there was sufficient information that you abused a vulnerable elderly resident.

You are accused of abuse of a nursing home resident that occurred on or about August 7, 2021 that stemmed from your work as a certified nurse aide at Arista Health Care, in Cherry Hill, New Jersey. Specifically, it is alleged that while you were providing care you spoke to a resident in a loud, forceful, and disrespectful tone that caused distress to the resident. The resident also showed a reporter red marks across both forearms allegedly caused by your improper aggressive treatment. Your actions were willful and constitute abuse in accordance with the federal definitions under 42 C.F.R. 483.5.

The Department issued a Right to Hearing letter on May 11, 2021. You failed to request a hearing in the allotted 30 days from the date of the Right to Hearing notice. The Department also scheduled four informal conference and sent correspondence to two separate addresses. The Department has not received any evidence that you did not receive the notice sent to an address in Collingswood, New Jersey.

Therefore, in accordance with 42 C.F.R. 483.156(c)(1)(iv), please be advised that a finding of abuse will be placed next to your name on the Registry and will remain on the Registry permanently. Please also be advised that your certification is revoked.

Please surrender your nurse aide certificate and wallet card to:

Office of Program Compliance-Reporting
25 South Stockton Street, 3rd Floor
Trenton, NJ 08625-0358

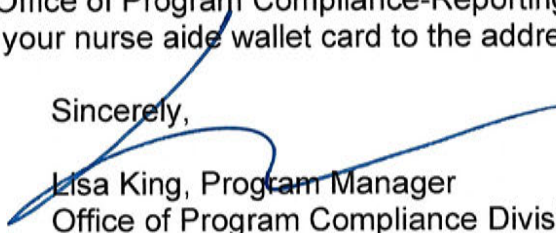
The certificate and the wallet card are no longer valid, and the status of your nurse aide certification is now revoked.

Please be advised that pursuant to N.J.A.C. 8:39-43.1(a)(1), only individuals who maintain a currently valid nurse aide certificate and are registered in good standing on the Registry are considered by the Department to be competent to work as a certified nurse aide in a licensed long term care facility. A certified nurse aide is no longer registered in good standing if a finding of abuse, neglect or misappropriation by the certified nurse aide's name is included on the Registry. Therefore, you are prohibited from employment as a certified nurse aide when a finding of abuse remains next to your name on the Registry.

In accordance with 42 C.F.R. 483.156 and N.J.A.C. 8:39-43.7, you are entitled to submit a written statement contesting the findings noted above. This statement will be maintained on the Registry. If you wish to submit such a written statement, you must do so within 20 days of the date of this letter. Your letter should reference "Notice of Revocation of Nurse Aide Certificate: Contested Findings."

Please forward this statement to the Office of Program Compliance-Reporting along with your nurse aide certification and your nurse aide wallet card to the address listed in this letter.

Sincerely,



Lisa King, Program Manager
Office of Program Compliance Division of
Certificate of Need and Licensing
New Jersey Department of Health

LK:mdj
Date: September 22, 2022
CERTIFIED MAIL:
Return Receipt Requested
US FIRST CLASS MAIL