

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0191	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/09/2017
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NAME OF PROVIDER OR SUPPLIER RAPPAHANNOCK WESTMINSTER CANTE	STREET ADDRESS, CITY, STATE, ZIP CODE 132 LANCASTER DRIVE IRVINGTON, VA 22480
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
F 000	<p>Initial Comments</p> <p>An unannounced Medicare/Medicaid standard and licensure survey was conducted 3/7/17 through 3/9/17. Corrections are required for compliance with 42 CFR Part 483 Federal Long Term Care requirements. The Life Safety Code survey/report will follow. No complaints were investigated during the survey.</p> <p>The census in this 42 certified bed facility was 39 at the time of the survey. The survey sample consisted of 9 current Resident reviews (Residents #1 through #9) and 2 closed record reviews (Residents #10 through #11).</p>	F 000		
F 001	<p>Non Compliance</p> <p>The facility was out of compliance with the following state licensure requirements:</p> <p>This RULE: is not met as evidenced by: The facility was not in compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities:</p> <p>12 VAC 5-371-240 Physician Services 12 VAC 5-371-240 (E,F) Cross Reference to F-386</p> <p>12 VAC 5-371-240 Physician Services 12 VAC 5-371-240(F) Cross Reference to F-387</p>	F 001	<p>F386</p> <p>The statements made in this Plan of Correction are not an admission to and do not constitute an agreement with the alleged deficiencies herein.</p> <p>To remain in compliance with all federal and state regulations, the facility has taken or will take the actions set forth in this plan of correction. The plan constitutes the center's allegation of compliance such that all alleged deficiencies cited have been or will be corrected by the date or dates included.</p> <p>Immediate Corrective Actions: 03/17/17 All current resident charts were audited to</p>	4/17/17

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

03/20/17

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F 001	Continued From page 1	F 001	<p>assure that physician visits are on the schedule and in compliance with F386 Physician Visits and all Physician Order Sheets are signed and dated.</p> <p>Systemic Changes: 4/17/17 All Nurses will be in-serviced on F386 Physician Visits and will be taught how to access and print the Physician Order Sheets for physician visits.</p> <p>Physicians will receive a letter from the Administrator and CEO explaining this Survey outcome as well as the requirements of F386 Physician Visits. In the letter, Physicians will also be invited to meet with the CEO, Administrator, and DON to discuss physician service requirements and work through any obstacles that the physicians face while visiting and recertifying their patients.</p> <p>All required Physician Visits and Physician Order Sheets will be documented in a spreadsheet by the Unit Secretary or Designee. The Unit Secretary will assure that all physicians are informed in writing of due dates 14 days and then 7 days prior to the due date. The Unit Secretary will follow up with the DON (or Administrator) if the visit has not taken place by the due date. The DON (or Administrator) will contact the Physician directly if the visit has not taken place by the due date. The DON will encourage physicians to sign Physician Order Sheets while visiting the facility instead of taking them to their offices.</p> <p>Monitoring: Ongoing</p>	

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F 001	Continued From page 2	F 001	<p>The DON will monitor the Physician Visit and Physician Order Sheet spreadsheet for compliance. The Director of Quality and Compliance will audit 100% of all Physician Visits and Physician Order Sheets every month and inform the DON and Administrator of compliance concerns.</p> <p>The DON and/or Administrator will discuss due dates with the Primary Care Physicians and Medical Director as needed to assure compliance with F386.</p> <p>A Physician not in compliance with F386 will be informed in writing by the Administrator and CEO that his or her facility privileges may be revoked for non-compliance with State and Federal regulations.</p> <p>F387</p> <p>The statements made in this Plan of Correction are not an admission to and do not constitute an agreement with the alleged deficiencies herein.</p> <p>To remain in compliance with all federal and state regulations, the facility has taken or will take the actions set forth in this plan of correction. The plan constitutes the center's allegation of compliance such that all alleged deficiencies cited have been or will be corrected by the date or dates included.</p> <p>Immediate Corrective Actions: 03/17/17 All current resident charts were audited to assure that physician visits are on the</p>	

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F 001	Continued From page 3	F 001	<p>schedule and in compliance with F387 Frequency of Physician Visits.</p> <p>Systemic Changes: 4/17/17 All Nurses will be in-serviced on F387 Frequency of Physician Visits.</p> <p>Physicians will receive a letter from the Administrator and CEO explaining this Survey outcome as well as the requirements of F387 Frequency of Physician Visits. In the letter, Physicians will also be invited to meet with the CEO, Administrator, and DON to discuss physician service requirements and work through any obstacles that the physicians face while visiting and recertifying their patients.</p> <p>Due dates for all required Physician Visits will be documented in a spreadsheet by the Unit Secretary or Designee. The Unit Secretary will assure that all physicians are informed in writing of due dates 14 days and then 7 days prior to the due date. The Unit Secretary will follow up with the DON (or Administrator) if the visit has not taken place by the due date. The DON (or Administrator) will contact the Physician directly if the visit has not taken place by the due date. The DON will encourage physicians to complete and sign re-certifications and Physician Order Sheets while visiting the facility instead of taking them to their offices.</p> <p>Monitoring: Ongoing The DON will monitor the Physician Visit and Physician Order Sheet spreadsheet for compliance. The Director of Quality</p>	

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F 001	Continued From page 4	F 001	<p>and Compliance will audit 100% of all Physician Visits and Physician Order Sheets every month and inform the DON and Administrator of compliance concerns.</p> <p>The DON and/or Administrator will discuss due dates with the Primary Care Physicians and Medical Director as needed to assure compliance with F387.</p> <p>A Physician not in compliance with F387 will be informed in writing by the Administrator and CEO that his or her facility privileges may be revoked for non-compliance with State and Federal regulations.</p>	