

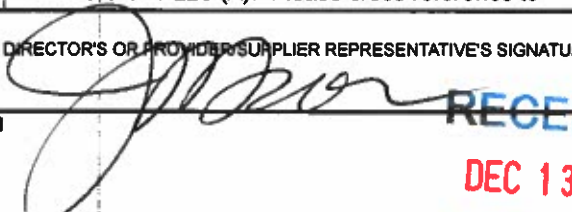
State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0258	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/29/2018
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NAME OF PROVIDER OR SUPPLIER PETERSBURG HEALTHCARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 287 EAST SOUTH BOULEVARD PETERSBURG, VA 23805
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F 000	<p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 11/27/2018 through 11/29/2018. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. No complaints were investigated during the survey.</p> <p>The census in this 120 licensed bed facility was 110 at the time of the survey. The survey sample consisted of 36 resident reviews.</p>	F 000	<p>This plan of correction is prepared and executed because it is required by the provisions of state and federal law and not because Petersburg Healthcare Center admits or denies the validity of the allegations and citations listed on the pages of this Statement of Deficiencies. CommuniCare-Petersburg Healthcare Center maintains that the alleged deficiencies do not jeopardize the health and safety of the residents, nor is of such character as to limit our capability to render adequate care.</p>	
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: 12 VAC 5-371-370 (A). Please cross reference to F584.</p> <p>COV 32.1-138.01 (A) (8). Please cross reference to F600.</p> <p>12 VAC 5-371-140 (A). Please cross reference to F607.</p> <p>12 VAC 5-371-250 (A). Please cross reference to F641.</p> <p>12 VAC 5-371-250 (G). Please cross reference to F656.</p> <p>12 VAC 5-371-220 (A). Please cross reference to F690.</p> <p>12 VAC 5-371-300 (A). Please cross reference to F755.</p> <p>12 VAC 5-371-220 (A). Please cross reference to</p>	F 001	<p>To remain in compliance with all federal and state regulations, the facility has taken or will take the actions set forth in the following plan of correction:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>State Tags</p> <p>12 VAC 5-371-370 (A)- see F584</p> <p>COV 32.1-138.01 (A) (8)- see F600</p> <p>12 VAC 5-371-140 (A)- see F607</p> <p>12 VAC 5-371-250 (A)- see F641</p> <p>12 VAC 5-371-250 (G)- see F656</p> <p>12 VAC 5-371-220 (A)- see F690</p> </div>	

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



TITLE

Executive Director 12-11-18

(X8) DATE

STATE FORM

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If continuation sheet 1 of 5

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F 001	<p>Continued From page 1</p> <p>F758.</p> <p>12 VAC 5-371-220 (B). Please cross reference to F760.</p> <p>12 VAC 5-371-300 (L). Please cross reference to F761.</p> <p>12 VAC 5-371-340 (A). Please cross reference to F812.</p> <p>COV 32.1-126.01 (A) Based on staff interview and employee record review the facility staff failed to obtain a sworn statement for 1 employee (Employee #20) and a criminal background check within 30 days for 1 employee (Employee #9) of 25 employees.</p> <p>Employee #20 did not have a sworn statement in the employee file. Employee #9's criminal background check was requested 57 days after hire.</p> <p>The findings included:</p> <p>Employee records were reviewed with Employee D during the survey. Employee D was the Human Resources staff from a sister facility. She was helping out during the survey. During the review, it was identified that Employee #20 had not signed a sworn statement. Employee D stated that she would look into the issue. On 11/29/18 at 2:45 p.m., Employee D determined</p>	F 001	<p>12 VAC 5-371-300 (A)- see F755</p> <p>12 VAC 5-371-220(A)- see F758</p> <p>12 VAC 5-371-220 (B)- see F760</p> <p>12 VAC 5-371-300 (L)- see F761</p> <p>12 VAC 5-371-340 (A)- see F812</p> <p>COV 32.1- 126.01 (A)</p> <p>1. Employee #9 had a criminal Virginia background check completed on 07/05/2017. Employee #20 never had a sworn statement completed and was terminated prior to survey.</p> <p>2. Current employees were audited to ensure they have a correct Virginia background check completed by Human Resources/ designee on 12/14/2018. Current employees were audited to ensure they have a sworn statement signed by Human Resources/ designee on 12/14/2018.</p>	

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F 001	<p>Continued From page 2</p> <p>that Employee #20 did not have a sworn statement.</p> <p>Employee #9 was hired on 7/3/17. The criminal background check was requested on 8/29/17, which was not within the allowable 30 day time period. Employee D was asked to look into the issue. She could not locate any other information in the employee file regarding a criminal background check.</p> <p>On 11/29/18 at 3:30 p.m., the issues were reviewed with the Administrator and Director of Nursing.</p> <p>12 VAC 5-371-210 (F)(1) Based on staff interview and employee record review the facility staff failed to verify certification of nursing assistants with the State nurse aide registry prior to hire for 4 nursing assistants.</p> <p>It was identified during the employee record review that the credentials of a total of 4 certified nursing staff were not verified prior to hire.</p> <p>The findings included:</p> <p>Employee records were reviewed during the survey. The following issues were identified when reviewing employee records:</p> <ol style="list-style-type: none"> Employee #13 was hired as a Certified Nursing Assistant (CNA) on 12/28/17. Her certification was verified after hire on 6/29/18. Employee #16 was hired as a CNA on 2/12/18. Her license was verified after hire on 3/19/18. 	F 001	<ol style="list-style-type: none"> Administrator/ designee educated Human Resources/ designee on proper completion of Virginia background checks and sworn statements on 12/07/2018. A Virginia background check/ sworn statement audit will be conducted on a weekly basis for 12 weeks completed by the Human Resources/designee on new hires. Results from audits will be forwarded to the Quality Assurance/ Performance Improvement committee to ensure compliance and the need for further monitoring for three (3) months. <p>12 VAC 5-371-210 (F)(1)</p> <ol style="list-style-type: none"> Employee #13 certification was completed on 12/07/18. Employee # 16 certification was completed on 12/07/2018. Employee #17 certification was completed on 12/07/2018. Employee #19 certification was completed on 12/07/2018. Current Certified Nursing Assistants certification were verified by Human Resources/ designee by 12/14/2018. Administrator/ designee educated Human Resources/ designee on proper validating certifications prior to hire on 12/07/2018. A validation of Certified Nursing Assistants certification audit will be conducted on a weekly basis for 12 weeks completed by the Human Resources/designee on new hires. 	01/07/2019
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F 001	<p>Continued From page 3</p> <p>3. Employee #17 was hired as a CNA on 5/9/17. Her certification was verified after hire on 8/7/17.</p> <p>4. Employee #19 was hired as a CNA on 6/28/17. Her certification was verified after hire on 11/28/18.</p> <p>On 11/29/18 at 3:30 p.m., the Administrator and Director of Nursing were provided the names of the staff that had a late certification verification.</p> <p>12 VAC 5- 371-210 (E) Based on staff interview and employee record review the facility staff failed to verify licensure with the State licensing board prior to hire for 2 licensed nurses.</p> <p>It was identified during the employee record review that the credentials of a total of 2 licensed nursing staff were not verified prior to hire or verified at all.</p> <p>The findings included:</p> <p>Employee records were reviewed during the survey. The following issues were identified when reviewing employee records:</p> <p>1. Employee #4 was hired as a Licensed Practical Nurse (LPN) on 4/21/17. The license was verified after hire on 7/21/17.</p> <p>2. Employee #3 was hired as a Registered Nurse (RN) on 3/13/17. Her license was never verified.</p> <p>On 11/29/18 at 3:30 p.m., the Administrator and Director of Nursing were provided the names of the nurses that had a late licensure verification.</p>	F 001	<p>12 VAC 5-371-210 (E)</p> <p>1. Employee #4's license was validated on 12/07/2018. Employee #3's license was validated on 12/07/2018.</p> <p>2. Current licensed nurses licenses were verified by Human Resources/ designee by 12/14/2018. "</p> <p>3. Administrator/ designee educated Human Resources/ designee on proper validating licenses prior to hire on 12/07/2018.</p> <p>4. A validation of licensed nurses' licenses audit will be conducted on a weekly basis for 12 weeks completed by the Human Resources/designee on new hires.</p>	01/07/2019

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