State of Virginia
STATEMENT OF DEFICIENCIES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	` ′	CONSTRUCTION	(X3) DATE SURVEY COMPLETED	
AND FLAN	OF CORRECTION	IDENTIFICATION NUMBER.	A. BUILDING: _		COMPLETED	
		VA0032	B. WING		07/2	2 <mark>2/2021</mark>
NAME OF P	ROVIDER OR SUPPLIER	STREET ADD	RESS, CITY, STA	ATE, ZIP CODE		
BETH SHO	DLOM HOME OF VIRGIN	IA .	I ROLFE PARI D, VA 23233	KWAY		
(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 CROSS-REFERENCED TO THE APPROPE DEFICIENCY)	BE	(X5) COMPLETE DATE
F 000	Initial Comments		F 000			
	07/22/21. The facility the Virginia Rules and Licensure of Nursing was investigated duri The census in this 10 91 at the time of the s	ucted 07/20/21 through was not in compliance with d Regulations for the Facilities. One complaint ng the survey. 11 licensed bed facility was survey. The survey sample				
	consisted of 33 reside	ent reviews.				
F 001	Non Compliance		F 001			9/3/21
	The facility was out o following state licens					
	to F600 12 VAC 5-371-210 (F to F607 12 VAC 5-371-250 (G F656	et as evidenced by: (8) Please cross reference (9)(1) Please cross reference (9) Please cross reference to (9) (E)(F)(G) Please cross		LICENSURE DEFICIENCIES F0001 Code of Virginia 321-138.01 (A) (8) Cross reference to F600 12 VAC 5-371-210 (F)(1) Cross reference to F607 12 VAC 5-371-250 (G) Cross reference to F656		
	12VAC5-371-220(D). F677.	Please cross reference to		12 VAC 5-371-220 (D) (E) (G) (F) Cross reference to F677		
	12VAC5-271-340(J). Please cross reference to F807COV 32.1-126.01 (A)			12 VAC5-371-340(J) Cross reference to F807		
	have evidence of a si	ew and facility v, the facility staff failed to gned sworn statement, prior es, CNAA, CNAC, and CNA		COV 321-126-01 (A) Criterion #1 Correction □ The contraction	ted	

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

TITLE (X6) DATE

Electronically Signed

08/13/21

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION IDENTIFICATION NUMBER:				(X3) DATE SURVEY COMPLETED		
ANDILAN	IDENTIFICATION		A. BUILDING:		OOM! LETED	
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		VA0032	B. WING		07/22/2021	
NAME OF P	ROVIDER OR SUPPLIER	STREET ADD	RESS, CITY, STA	ATE, ZIP CODE		
	1600 JOHI		ROLFE PAR	KWAY		
BETH SHOLOM HOME OF VIRGINIA RICHMONI		D, VA 23233				
(X4) ID	SUMMARY STA	ATEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CORRECTION	(X5)	
PRÉFIX TAG		Y MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPF DEFICIENCY)		
F 001	Continued From page	e 1	F 001			
	D, in a sample of 25 e	employee records.		agency for CNA-A, CNA-D and CNA-was contacted and informed of the ne		
	The facility staff failed	I to obtain a signed, sworn		for a signed sworn statement, comple		
		CNA C, and CNA D prior to		on the identified agency staff. CNA-A		
	· ·	ide direct Resident care.		CNA-D and CNA-C will not be allowed		
				work at the nursing facility until sworn		
	The findings included	:		statements are provided.		
	On 7/22/21, a review of 25 employee files was			Criterion #2 Others Potentially Affecte	d □	
	conducted by Surveyor D and revealed the			Other contracted CNAs and licensed		
	following:			nurses may have been impacted. The		
				facility will consider all agency staff as		
		ee from a contracted staffing		potentially affected by agencies that a		
		ng at the facility on 4/29/21.		not obtaining signed sworn statement	s on	
		statement available for CNA		their staff.		
		worked in the facility and		Cuitavian #2 = Sylatom Change All		
	•	o Residents within the		Criterion #3 System Change All		
	_	ility knowing if CNA A had		contractual agencies were notified in		
	any pending chiminal	charges of barrier crimes.		writing on August 12,2021 that the state they supply must have a completed, s		
	2 CNA C an employ	ee from a contracted staffing		statement done by the agency before		
		ng at the facility on 10/20/20.		can work at Beth Sholom. The agence	·	
		statement available for CNA		will guarantee that this has been done		
	C. Therefore, CNA C	worked in the facility and		their contract with the facility.		
		o Residents within the		·		
	facility without the fac	ility knowing if CNA C had		Criterion #4 - Monitoring -On a month	у	
	any pending criminal	charges of barrier crimes.		basis x 3 months, The Human Resour	ce	
				Director or designee will request copie		
		ee from a contracted staffing		sworn disclosure statements from utili		
		ng at the facility on 5/3/21.		contract agencies, for at least one nur		
		statement available for CNA		or C.N.A. from each agency that, in or		
		worked in the facility and		to validate the agency's compliance in		
	-	o Residents within the illity knowing if CNA D had		obtaining sworn statements disclosure that are in compliance with the Code of		
		charges of barrier crimes.		Virginia.	"	
	any ponding orininal	onarges of barrier offices.		viigina.		
	On 7/22/21, Surveyor	D interviewed the Human		12 VAC 5-371 140 (E)(3)(A)		
		Employee C. Employee C		Criterion #1 Correction - The contract	ed	
confirmed the hire dates for the 3 referenced			agency for CNA-C, CNA-D and CNA-			

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DETIT SIN	DECIMITIONIE OF VINGIN	RICHMONE), VA 23233			
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F 001	Continued From page	2	F 001			
	CNAs and agreed that employee is an acknown or outstanding criminal she was aware of the and stated, "We dependently check out poor I see now that we need staff is meeting regulated don't know for sure word obtained a pre-emplorement of the control of the contr	at a sworn statement by the owledgement of any pending all charges. Employee C said missing sworn statements and on the staffing agency to stential employees, however ed to ensure that agency ated employment checks, I hether or not the agency yment sworn statement, I hem but they did not send		was contacted following the survey an informed of the need for verification of active license/certification. CNA-C, CNA-D and CNA-F will not be allowed work at the nursing facility until verification active license is provided. Criterion #2 - Others Potentially Affect Other contracted CNAs and licensed nurses may have been impacted. The facility will consider all agency staff as potentially affected by agencies that a not verifying licensure of their staff.	to ation ed -	
	The Feeilite Administra	into a constant of No.		not verifying licensure of their staff.		
	The Facility Administrator was updated. No further information was provided. 12 VAC 5-371 140 (E)(3)(A) Based on staff interview and facility documentation review, the facility staff failed to verify the employee license, prior to hire, for 3 employees, CNA C, CNA D, and CNA F, in a sample of 25 employee records.			Criterion #3 - System Change - All contractual agencies were notified in writing on August 12,2021 that the stathey supply must have had verification their licensure done by the agency be	ı of	
				they can work at Beth Sholom. The agencies were informed that Beth Shomay request copies of these documer and if the agency cannot provide an appropriate licensure verification immediately upon request, that the employee will not be eligible to work.	ıts	
		I to verify that nursing and in good standing, prior NA C, CNA D, and CNA F.		agencies will guarantee that this has be done in their contract with the facility. Criterion #4 Monitoring On a mon		
	The findings included On 7/22/21, a review conducted by Surveyor following:	of 25 employee files was		basis x 3 months, The Human Resour Director or designee will request copie licensure verification from contract agencies, for at least one nurse or C.N from each agency utilized, in order to	ce es of	
	1. CNA C, an employ agency, began workin There was no evidence	ee from a contracted staffing ng at the facility on 10/20/20. ce that the facility staff use to ensure it was active		validate the agency's compliance in obtaining verification that their staff ha licenses in good standing. Variances will be immediately investig with appropriate action taken and		

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DE I II SII	BETH SHOLOM HOME OF VIRGINIA RICHM				
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F 001	Continued From page	3	F 001		
	she was permitted to Residents.	prior to employment and provide direct care to ee from a contracted staffing		responsible staff re-educated and/or counseled. A summary of the monthly audits will be provided to the QAPI Committee.	,
	agency, began workir There was no evidend verified CNA D's licen	ng at the facility on 5/3/21. ce that the facility staff nse to ensure it was active prior to employment and		12 VAC 5-371.140 (E)(3)(B) and Cod Virginia 32.1-126.01 (A) Criterion #1 Correction The contract agency for CNA-A, CNA-C, CNA-D,	
	agency, began workir CNA F's license verifi Therefore, from 2/22/ unaware if CNA F's lice	see from a contracted staffing at the facility on 2/22/21. cation was dated 5/28/21. 21-5/28/21, facility staff was cense was active and in the was permitted to provide ints.		CNA-E, CNA-F and CNA-G was controlled for a criminal background check from the Central Criminal Record Exchange of the Virginia State Police CNA-A, CNA-C, CNA-D, CNA-E, CNA and CNA-G will not be allowed to wor the nursing facility until evidence of criminal background checks from the	the c A-F
	Resources Director, E confirmed the hire da CNAs and stated it di	D interviewed the Human Employee C. Employee C tes for the 3 referenced d not appear that a license erformed as it should have		Central Criminal Record Exchange had been obtained. Criterion #2 -Other Potential - Other contracted CNAs and licensed nurses may have been impacted. The facility consider all agency staff as potentially	S will
	Prevention, Investigat date 5/17/2021, subtit Requirements1. Scr to hire, the appropriat	reening", item B read, "Prior te state licensure and		affected by agencies that are not obtasigned criminal background checks of their staff. Criterion #3 - System Change - All	aining n
	be contacted to validate requirements and to comployee is in good so registry. The facility w	determine if the potential standing with the board or vill not hire any candidate action or other sanctions		contractual agencies were notified by of QA (quality assurance) or designed writing on August 12, 2021 that the st they supply must have had a complet criminal background check, done by t Virginia State Police Criminal Records Exchange on behalf of the agency be	e in aff eed he s

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F 001	Continued From page	: 4	F 001		
	resident".	roperty, or exploitation of a		they can work at Beth Sholom. The agencies were informed that Beth Showill request copies of these document	
	The Facility Administrator was updated. No further information was provided.			and if the agency cannot provide a complete and appropriate background check immediately upon request, that employee will not be eligible to return work. The agencies will guarantee that this has been done in their contract w	the to at
12 VAC 5-371.140 (E)(3)(B) and COV § the facility.					
	Based on staff interview and facility documentation review, the facility staff failed to obtain a Criminal Background check with the Central Criminal Records Exchange within 30 days of hire for 6 employees (CNA A, CNA C, CNA D, CNA E, CNA F, and CNA G) in a sample of 25 employee records.			Criterion #4 - Monitoring - On a month basis x 3 months, The Human Resour Director or designee will request copie criminal background checks from confagencies, for at least one nurse or C.I from each agency, to validate the age compliance in conducting background checks that are compliant with the Co Virginia.	rce es of tract N.A. ncy's
	The findings included	:		Variances will be immediately investig with appropriate action taken and	ated
	file contained a "Cons 12/7/20, from a comp Criminal Records Exc Report" contained the	/29/21. CNA A's employee sumer Report" performed on any other than the Central change. The "Consumer of following statement, s/Employees Only: The		responsible staff re-educated and/or counseled. A summary of the monthly audits will be provided to the QAPI Committee	,
	report does not guara truthfulness of the info the investigation, but copied from public rec generated as a result evidence of criminal a			12 VAC5-371-260 (B) (1-9&11) Criterion #1 - Correction- CNA B has required to complete her mandatory in-service training by September 3, 20 Criterion #2 - All resident care staff ar potentially affected when mandatory training requirements are not complet	021. e
	Surveyor D asked Em Resources Director if	nployee C, the Human a criminal background s other than the Central		The facility will do a 100% audit of cur resident care staff to identify any othe staff that have been deficient in completing their annual training	rent

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AND PLAN (AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILDING:		COMPLETED	
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BETH SHOLOM HOME OF VIRGINIA RICHMON), VA 23233			
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PREFIX	`	Y MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	PREFIX	(EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPR		
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E 004	0 " 15		F 004			
F 001	Continued From page	5	F 001			
	Criminal Records Exc	change was acceptable,		requirements for the current year.		
		No, we use the Virginia				
		mplies with the regulation		Criterion #3 - Completion of mandator		
	but the Agency does t			training will be added to each employe	ee	
		ve will be making some		position description by the Human		
	changes in the future	".		Resource department . The nursing st		
	0. ONIA OI- I-:I-t-			(RN's, LPN's and CNA's) will be provide		
		was confirmed as 10/20/20.		clear instructions by the Director Hum	l l	
	CNA C's employee file contained a "Consumer			Resources on accessing online training and clear deadlines for completion. Fa		
	Report" performed on 9/24/20, from a company other than the Central Criminal Records			to complete required training will result		
		sumer Report" contained the		personnel action.		
	following statement, "			To expand staff options for meeting ar	nnual	
		es Only: The report does not		training requirements, the facility will	indai	
		cy or truthfulness of the		accept documented completion of the		
	_	subject of the investigation,		following modalities for staff education	l l	
		rately copied from public		"The current, web-based Relias trainir	l l	
	records, and informat	ion generated as a result of		modules (preferred)		
	identity theft, including			"In person, onsite training on mandato	- 1	
		urately associated with the		topics, provided by a qualified instruct		
	consumer who is the	subject of the report".		"Participation in Skills Fairs for interac	tive	
	0. ONIA DI- 1-1 1-4			learning / training on specific topics	alina al	
		was confirmed as 5/3/21. e contained a "Consumer		"Outside training that provides for requirement	uired	
	• •	i 12/8/20, from a company		All training will be tracked in the indivi	dual	
	other than the Centra			training records of employees. At least		
		sumer Report" contained the		two weeks before each employee's ar		
	following statement, "			performance evaluation, their supervisor		
	•	es Only: The report does not		will be provided a copy of their educational		
		cy or truthfulness of the		transcript and will notify the employee		
	information as to the	subject of the investigation,		any outstanding educational requirem	ents	
	-	rately copied from public		that need to be completed in order to	meet	
		ion generated as a result of		expectations for their position.		
		g evidence of criminal				
		urately associated with the		Criterion 4 - Monitoring- On a monthly		
	consumer who is the	subject of the report".		basis x 3 months, Human Resources	WIII	
	4 ONA Flateire det			generate a report to the VP- Quality		
		was confirmed as 1/8/20.		Assurance identifying training complia		
	The employee file for	I background check being		rates for the facility staff; the report wi shared with the QAPI Committee for	ii be	
	evidence of a chilling	i backyround check being	l	Shared with the QAFI Committee lor		

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F 001	Continued From page		F 001			
	performed. Employee to find a criminal back however a she did pro	e C, stated she was not able kground report for CNA E, oduce a copy of a criminal at was dated 7/21/21.		developing additional corrective action plans if needed.	1	
	CNA F's employee file check that was perfor than the Central Crim 2/4/21. The backgrouthe following stateme obtained from a databascreening purposes in County Criminal Courup to date case status	was confirmed as 2/22/21. e contained a background rmed by a company other sinal Records Exchange on und check on file contained nt, "criminal records case search for employment must be verified with a rt Search to obtain current sThis report does not ccy or truthfulness of the				
	CNA G's employee filcheck that was perfor than the Central Crim 5/12/21. The background the following statement obtained from a databascreening purposes in County Criminal Courup to date case status	was confirmed as 6/8/21. e contained a background red by a company other sinal Records Exchange on bund check on file contained nt, "criminal records base search for employment must be verified with a rt Search to obtain current sThis report does not cy or truthfulness of the				
	Human Resources Di	D met with Employee C, the irector. The criminal record above noted employees aployee C.				
		r's policy entitled, "Abuse tion and Reporting", revision tle, "Procedure and				

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F 001	employees prior to as duties. If agency or covendor providing the or required to obtain crin staff assigned to the Facility Administr further information was 12 VAC5-371-260 (B) Development and In-service documentation reviewensure resident care sin-service training for sample of 5 employees.	eening", item C read, ks are requested on all new suming resident related ontractual staff is used, the contracted service will be ninal record checks for all Home". ator was updated. No as provided. (1-9 & 11)Staff service Training ew and facility of, the facility staff failed to staff received annual 1 employee (CNA B) in a extraining records.	F 001			
	mandated annual in-s The findings included On 7/22/21, a copy of reviewed for the selector revealed in the year 2 record of required annuareas of (1) Special N Prevention/Control, (4) Prevention, (5) Restra Confidentiality/HIPPA	facility training records was sted employee sample and 1019, CNA B did not have hual in-service training in the leeds, (2) Infection 1) Safety & Accident hint Use, (6) (7) Understanding the sabled, (8) Resident Rights, rively Impaired, (10) and (11)				

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F 001	Continued From page	e 8	F 001				
	Continued From page	, 0					
		ducted with the Human					
		Employee C] who had ning records. The HR					
		ne facility's training and					
	in-service program wa						
	monitored for staff tra						
			1			1	