

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>VA0279</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>08/18/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>WOODMONT CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>11 DAIRY LANE FREDERICKSBURG, VA 22405</b>
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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
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F 000	<p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 08/16/2021 through 08/18/2021. Corrections are required for compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 120 certified bed facility was 93 at the time of the survey. The survey sample consisted of 28 current resident reviews and three closed record reviews.</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:</p> <p>Resident Rights 12VAC5-371-150A cross reference F623 &amp; F625.</p> <p>Quality Assessment &amp; Assurance 12VAC5-371-170A2 cross reference F868.</p> <p>Director of Nursing 12VAC5-371-200B1 cross reference F658.</p> <p>Nursing Services 12VAC5-371-220A cross reference F695, F697, F698 &amp; F758. 12VAC5-371-220C1 cross reference F686.</p> <p>Physician Services 12VAC5-371-240 cross reference F578.</p> <p>Resident Assessment &amp; Comprehensive Care Plan 12VAC5-371-250A cross reference F641.</p>	F 001	<p>Resident Rights 12 VAC5-371-150A Cross Reference F623 &amp; F625</p> <p>Quality Assessment &amp; Assurance 12VAC5-371-170A2 Cross Reference F868</p> <p>Director of Nursing 12VAC5-371-200B1 Cross Reference F658</p> <p>Nursing Services 12VAC5-371-220 A Cross Reference F-695, F697, F698 &amp; F758 12VAC5-371-220C1 Cross Reference F686</p> <p>Physician Services 12VAC5-371-240 Cross Reference F578</p> <p>Resident Assessment &amp; Comprehensive Care Plan 12VAC5-371-250A Cross Reference F641</p>	

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

*Antonio Miller*

TITLE

*Interim Center Executive Director*

(X6) DATE

*9/8/2021*

STATE FORM

6899

FHLP11

If continuation sheet 1 of 3

State of Virginia

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F 001	<p>Continued From page 1</p> <p>12VAC5-371-250G cross reference F656.</p> <p>12VAC5-371-250F cross reference F657.</p> <p>Restraint Usage 12VAC5-371-330A, B1, C3 cross reference F700.</p> <p>Dietary &amp; Food Service Program 12VAC5-371-340A cross reference F812.</p> <p>Based on staff interview, facility document review, and employee record review, the facility staff failed to follow the Code of Virginia for pre-screening employment requirements for two of 25 state employee record reviews.</p> <p>The facility staff failed to obtain a Virginia State Police criminal background check for OSM (other staff member) #8 (a contracted laundry employee), hired on 7/12/21 and failed to obtain a license verification for CNA (certified nursing assistant) #5, hired on 5/4/21.</p> <p>The findings include:</p> <p>OSM #8 was hired on 7/12/21 by a contracted company. Review of OSM #8's employee record failed to reveal a Virginia State Police criminal background check. CNA #5 was hired on 5/4/21. Review of CNA #5's employee record failed to reveal a license verification (until 8/16/21).</p> <p>On 8/17/21 at 11:13 a.m., an interview was conducted with OSM #6 (the workforce manager). OSM #6 stated she conducts license verifications before she calls potential employees for an interview. OSM #6 stated she could not find a license verification for when CNA #5 was hired.</p>	F 001	<p>12VAC5-371-250G Cross Reference F656</p> <p>12VAC5-371-250F Cross Reference F657</p> <p>Restraint Usage 12VAC5-371-330A, B1, C3 Cross Reference F700</p> <p>Dietary &amp; Food Service Program 12VAC5-371-340A Cross Reference F812</p> <p>Criminal Background Checks</p> <ol style="list-style-type: none"> <li>1. Criminal background check for the contract employee will be completed by 9/10/2021.</li> <li>2. An audit will be performed on all employees and completed.</li> <li>3. Human Resources/Designee will verify that all potential employees pass a criminal background check prior to beginning employment. Copies of pre-employment criminal background checks will be kept on file and available in the facility.</li> <li>4. Human Resources/Designee will review the files of all potential employees to ensure that criminal background checks are performed, and the results meet the requirement for employment. Human Resources/Designee will perform a monthly assessment of employee professional licenses to ensure that licenses are current and active. Human</li> </ol>	
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F 001	<p>Continued From page 2</p> <p>On 8/17/21 at 3:12 p.m., an interview was conducted with OSM #7 (the district manager of environmental services for the contracted company). OSM #7 stated the manager is supposed to fill out requests for the Virginia State Police criminal background checks then the paperwork is processed at the corporate office. OSM #7 could not provide a Virginia State Police criminal background check for OSM #8.</p> <p>On 8/17/21 at 4:58 p.m., ASM (administrative staff member) #1 (the center executive director) and ASM #2 (the center nurse executive) were made aware of the above concern.</p> <p>The facility policy titled, "Hiring" documented, "3.2.1 Verify credentials, licenses, certificates, or other documents required for the position. 3.2.2 Request the post-hire criminal background check..."</p> <p>No further information was presented prior to exit.</p>	F 001	<p>Resources/Designee will identify any patterns or trends and report to the Quality Assurance and Performance Improvement Committee quarterly.</p> <p>5. Date of compliance: 9/10/2021</p> <p>Professional License Checks</p> <ol style="list-style-type: none"> <li>1. Professional Licenses have been verified and copies are on file in the facility for the employee.</li> <li>2. An audit will be performed on all employee professional licenses and to be completed by 9/24/2021.</li> <li>3. Human Resources/Designee will verify that employees possess required licensure upon hire and employee professional licenses will be kept on file in the facility.</li> <li>4. Human Resources/Designee will perform a monthly assessment of employee professional licenses to ensure that licenses are current and valid for all employees that are required to be professionally licensed. Human Resources/Designee will prohibit any employees not possessing a valid license from working in the position that requires a license until the time that the employee obtains a valid license. Human Resources/Designee will identify any patterns or trends and report to the Quality Assurance and Performance Improvement Committee at least quarterly.</li> </ol> <p>5. Date of compliance: 9/10/2021</p>	