

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>VA0106</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/12/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HERITAGE HALL BIG STONE GAP</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2045 VALLEY VIEW DRIVE BIG STONE GAP, VA 24219</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
F 000	<p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 5/4/21 through 5/12/21. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. Corrections were required.</p> <p>The census in this 180 bed facility was 135 at the time of the survey. The survey sample consisted of 27 current resident reviews and three (3) 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: The facility was not in compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities:</p> <p>Policies and Procedures 12 VAC 5-371-140 - cross reference to F607</p> <p>Infection Control 12 VAC 5-371-180 (A &amp; B) - cross reference to F886</p> <p>Nursing Services 12 VAC 5-371-220 - cross reference to F580, 692</p> <p>Pharmaceutical Services 12 VAC 5-371-300 (A) - cross reference to F755, 761</p> <p>Clinical Records 12 VAC 5-371-360 (E) - cross reference to F842 12 VAC 5-371-210 Nursing Services</p>	F 001		

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

TITLE

(X6) DATE

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F 001	<p>Continued From page 1</p> <p>12 VAC 5-371-210 (F.1)</p> <p>Based on the Code of Virginia and staff interview, the facility staff failed for one (Employee # 20) of 6 Certified Nursing Assistants (CNA) to verify a license/certification with the Department of Health Professions prior to hire.</p> <p>The findings included:</p> <p>Employee # 20 was hired on 9/25/2020 as a Certified Nursing Assistant. A copy of the license verification at the time of hire was not in the list of documents presented to the surveyor.</p> <p>Her license was not verified by the facility staff with the Department of Health Professions until 5/5/2021 at 18:39 (6:39 p.m.) during the survey.</p> <p>The issue was reviewed with the Human Resources Director on 5/10/2021 at 3:58 p.m. She stated she had been in her role as the Human Resources Director for only two months and did not see evidence that verification had been completed prior to hire. The Human Resources Director stated she could not locate the verification from prior to her hire date so she verified the license while compiling the records for review.</p> <p>The Administrator was notified of the issue at 4:30 p.m. on 5/10/2021.</p> <p>Nursing Home Licensure and Inspection. COV 32.1-126.01 (A) (Sworn Statement or CRC) Policies and Procedures 12 VAC 5-371-140 (E)(3)(A)(B) Policies and Procedures.</p> <p>Based on the Code of Virginia, employee record</p>	F 001		

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F 001	<p>Continued From page 2</p> <p>review and staff interview, the facility staff failed for one of 4 Unlicensed Nurses Aide and one of 6 Licensed Practical Nurses to obtain a Criminal Background Check prior to hire.</p> <p>1. For Employee # 22, the facility staff failed to ensure a criminal background check was completed at the time of hire.</p> <p>On 05/5/2021- 05/07/2021, Employee Record Reviews were conducted.</p> <p>Review of the personnel records revealed Employee #22 was hired on 02/10/2020 as an Unlicensed Aide and enrolled in the Certified Nursing Assistant class. According to the Human Resources Director, the entire personnel file was empty for Employee # 22.</p> <p>Further review of the facility documentation of the spreadsheet list of all employees hired since 2019 revealed Employee # 22 was hired twice and disposition listed as "termination" twice during 2020. The two dates of hire were listed as 02/10/2020 and 10/15/2020.</p> <p>An interview was conducted with the Human Resources Director on 05/10/2021 at 3:58 p.m. The Human Resources Director stated Employee # 22's Personnel file was empty and did not have any documents for the dates of employment at the facility.</p> <p>The Human Resources Director stated she had been in her position for only a couple of months. She stated she contacted the previous Human Resources Director to inquire about what happened to Employee 22's record and was informed "the entire file was sent" to their sister facility when Employee 22 transferred there.</p>	F 001		

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F 001	<p>Continued From page 3</p> <p>According to the Human Resources Director, she was informed by the sister facility's staff that there was no record of any records being sent there. The sister facility sent copies of documents from Employee 22's employment at their facility. The Human Resources Director stated she knew those forms would not suffice for the current survey but did want to show what was sent.</p> <p>The facility Administrator was informed of the findings on 5/10/2021 at 4:30 p.m.</p> <p>No further information was provided.</p> <p>2. For Employee # 24, the facility staff failed to ensure a Criminal Background Check was completed at the time of hire.</p> <p>Review of the employee file revealed that Employee # 24 was hired as a Licensed Practical Nurse on 12/31/2019.</p> <p>Employee # 24's Criminal Background Check was performed prior to hire on 12/27/2019 with the search results documented as "transaction is being processed." There was no documentation of the facility staff contacting the State Police to determine the status of the search. As of the end of survey, there was no final result of the search.</p> <p>On 5/10/2021 at 3:58 PM, an interview was conducted with the Human Resources Director who stated she double checked and found there were no other records in the personnel file about the Criminal Background Check results being finalized. The Human Resources Director stated "normally the State Police would mail a copy results to the facility." She stated she did not see a mailed copy of a result for Employee # 24.</p>	F 001		

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F 001	<p>Continued From page 4</p> <p>At the time of survey, no further documentation showing that the facility rechecked the status of Employee # 24's criminal background search was found in Employee #24's Human Resources (HR) File.</p> <p>On 05/10/2021 at 3:58 p.m., an interview was conducted with the Human Resources Director who stated she double checked the personnel file and found there were no other records about the Criminal Background Check results being finalized. The Human Resources Director stated normally the State Police would mail a copy of the results to the facility. She stated she did not see a mailed copy of a final result for Employee # 24.</p> <p>On 05/10/2021 at 4:30 p.m., an interview was conducted with the facility Administrator who was informed of the issue. A copy of the facility's policy on Hiring, Background Checks, Personnel Files and Terminations was requested. The Administrator stated he would submit a copy of the facility's policy. The Administrator stated background checks should be completed on all new employees prior to the hire date.</p> <p>The facility policy on Abuse, Neglect, Exploitation and Reporting, Revised 11/2016 was reviewed on 05/11/2021. On page 2 of 5 under the topic was written: " The components of the facility's abuse prohibition plan, The Facility Must:</p> <p>3. Not employ or otherwise engage individuals who:</p> <p>a. Have been found guilty of abuse, neglect, exploitation, misappropriation of property or mistreatment by a court of law;</p>	F 001		

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F 001	<p>Continued From page 5</p> <p>b. Have had a finding entered the State nurse aide registry concerning abuse, neglect, exploitation, misappropriation of property.</p> <p>c. Have a disciplinary action in effect against his or her professional license by a state licensure body as a result of abuse, neglect, exploitation, misappropriation of property.</p> <p>d. Background, references, and credentials' checks should be conducted on employees prior to or at the time of employment, by facility administration, in accordance with applicable state and federal regulations . Any person having knowledge that an employee's license or certification is in question should report such information to the Administrator."</p> <p>The Administrator was made aware of findings.</p> <p>During the end of day debriefing on 5/11/2021, the facility Administrator was informed there was no documentation of a final result of the Criminal Background check or evidence of the facility staff contacting the State Police to determine the status of the search.</p> <p>On 5/12/2021 at 11:05 a.m. during the end of day debriefing, the facility Administrator was again informed of the findings. The Administrator stated he had no questions about the findings.</p> <p>No further information was provided.</p> <p>12 VAC 5-371-210 Nursing Services 12 VAC 5-371-210 (E)</p> <p>Based on the Code of Virginia and staff interview, the facility staff failed to verify licensure for one (Employee # 8) Registered Nurse (RN) of 14 licensed staff prior to hire and failed to re-verify</p>	F 001		

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F 001	<p>Continued From page 6</p> <p>licensure with the Department of Health Professions for (Employee #6, #17, #19 and # 24) of 14 licensed nurses; and the facility failed to ensure one (Employee # 27) of 4 unlicensed Nurses Aides completed a competency skills checklist.</p> <p>The findings included:</p> <p>1. Employee # 8 was hired on 12/7/2020 as the Director of Nursing. Employee 8's Registered Nurse license license was not verified by the facility staff with the Department of Health Professions until 12/8/2020 at 18:39 (6:39 p.m.) after her date of hire.</p> <p>An interview was conducted with the Human Resources Director who stated the expectation was for licenses to be verified and current prior to hire. The Administrator was informed of the findings.</p> <p>No further information was provided.</p> <p>2. Employee # 6 was hired on 1/21/2020 as the Staff Development Coordinator. Her Registered license expired on 1/31/2021. Her license was not re-verified by the facility staff with the Department of Health Professions until 5/5/2021 at 18:39 (6:39 p.m.).</p> <p>The issue was reviewed with the Human Resources Manager on 5/10/2021 at 1:30 p.m. She stated that she verified the license when she compiled the list of employee records for review.</p> <p>It was reviewed with the Human Resources Manager who stated that she had been in that position for a couple of months. She stated she had developed some procedures to make sure</p>	F 001		

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F 001	<p>Continued From page 7</p> <p>the verification of all of the licenses were renewed on time.</p> <p>The Administrator was notified of the issue at 4:30 p.m. on 5/10/2021.</p> <p>3. Employee # 17 was hired on 3/27/2020 as a Registered Nurse. Her license expired on 3/31/2021. She renewed her license in a timely manner. Her license was not re-verified by the facility staff with the Department of Health Professions until 5/5/2021 at 18:39 (6:39 p.m.).</p> <p>4. Employee # 19 was hired on 3/27/2020 as a Registered Nurse. Her license expired on 4/30/2021. She renewed her license in a timely manner. Her license was not re-verified by the facility staff with the Department of Health Professions until 5/5/2021 at 18:39 (6:39 p.m.).</p> <p>The facility Administrator was informed of the findings on 5/10/2021 at 4:30 p.m.</p> <p>No further information was provided.</p> <p>5. Employee # 24 was hired on 12/31/2019 as a Licensed Practical Nurse. Her license was verified prior to hire and expired on 1/31/2021. Her license was not re-verified by the facility staff with the Department of Health Professions until 5/5/2021 at 18:49 (6:49 p.m.).</p> <p>The facility Administrator was informed of the findings on 5/10/2021 at 4:30 p.m.</p> <p>No further information was provided.</p> <p>6. For Employee # 27, the facility staff failed to complete a competency skills checklist.</p>	F 001		



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F 001	<p>Continued From page 8</p> <p>Review of the personnel file for Employee # 27 was conducted.</p> <p>Employee #27 was hired on 7/17/2020 as an "unlicensed nurses aide." Employee #27 finished the AHCA (American Health Care Association) -NCAL (National Center for Assisted Living) Temporary Nurse Aides online course on 7/15/2020. The facility staff was unable to provide a copy of the competency skills checklist for Employee # 27.</p> <p>An interview was conducted with the Human Resources Manager who stated the staff development coordinator could not find the competency skills check list for Employee 27. The Human Resources Manager stated the expectation was that a skills checklist would be completed and in the file for each unlicensed nurses aide.</p> <p>On 5/12/2021 at 11:05 a.m. during the end of day debriefing, the facility Administrator was informed of the findings. The Administrator stated he had no questions about the findings.</p> <p>No further information was provided.</p>	F 001		