

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0296	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/26/2021
NAME OF PROVIDER OR SUPPLIER CONSULATE HEALTH CARE OF WINDSOR		STREET ADDRESS, CITY, STATE, ZIP CODE 23352 COURTHOUSE HIGHWAY WINDSOR, VA 23487		
(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	Initial Comments An unannounced biennial State Licensure Inspection was conducted 03/23/21 through 03/26/21. 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. The census in this 114 licensed bed facility was 102 at the time of the survey. The survey sample consisted of 35 current Resident reviews and 5 closed record reviews.	F 000		
F 001	Non Compliance The facility was out of compliance with the following state licensure requirements: This RULE: is not met as evidenced by: 12 VAC5-371-150 (C). Resident Rights. Cross Reference F574. 12 VAC 5-371-220 (C and H). Nursing Services Cross-Reference to F-690 and F-881. 12 VAC 5-371-250 (A, D, E). Resident Assessment and Care Planning Cross-Reference to F-641. 12VAC 5-371-310 (A, B). Diagnostic Services Cross-Reference to F-773 and F775. 12VAC5-371-220 (A). Please Cross-Reference to F-758 12 VAC5-371-140. Policies and Procedures. 3. An accurate and complete personnel record for each employee including but not limited to: Criminal record check. Based on staff interview, documentation the facility staff failed ensure compliance with state licensure requirements for 1 out of 25 employee record (criminal background checks.)	F 001	1. Employee #1 hired on 1/9/2020, with background dated on 7/8/2020. No other abnormal findings noted in file. No resident affected. 2. Human Resource Coordinator will review new hires in last 30 days to ensure background checks were completed. 3. Human Resource Coordinator or Designee will be educated on obtaining background checks prior to employment by Executive Director or Designee. HRC or Designee to review new hire files prior to start date weekly for 6 weeks. 4. The results of the Quality Monitoring to be reviewed at monthly QAPI meeting for review, analysis, and further recommendations.	5/7/21

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

TITLE

(X6) DATE

Electronically Signed

04/12/21

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F 001	<p>Continued From page 1</p> <p>The findings included:</p> <p>Review of documents provided on 03/24/21 by the facility (list of 25 employees hired in the last 2 years and their criminal background check) revealed that Certified Nursing Assistant (CNA) #1 had a hire date of 01/09/20 but the criminal history check had a received date of 07/08/20. A phone interview was conducted with the Administrator on 03/25/21 at approximately 2:03 p.m. She (Administrator) there was a transition with our Human Resource Coordinator (HRC) back in June 2020. The new (HCR) completed an audit on all of the employee files which revealed missing documents from the employee files or no employee files were found." The Administrator was not able to provide evidence that CNA #1 with a hire date of 01/09/20 had a criminal background check within 30 days of her hire date.</p> <p>The Administrator and Director of Nursing (DON) was informed of the finding during a briefing on 03/25/21 at approximately 2:55 p.m. The facility did not present any further information about the findings.</p> <p>The facility's policy titled Background Checks: revision date (09/01/17) Policy include but not limited to: It is the policy of The Company to conduct background checks to include criminal background checks, state, federal of all applicants for employment in those states required by federal regulation to conduct such checks on applicants, employees, and volunteers who may have access to residents and/or where state requirements apply. Please refer to your state requirements.</p>	F 001	5. Date of completion – May 7, 2021	

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F 001	Continued From page 2 Procedure read in part. -The Executive Director and the Human Resource Representative will be responsible for ensuring compliance with state laws and company policies regarding employment of individual with criminal records. Each center or office will maintain a copy of and comply with the respective state law requiring criminal background checks.	F 001			