

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0050	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/12/2021
NAME OF PROVIDER OR SUPPLIER WAYLAND NURSING AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 730 LUNENBURG HIGHW KEYSVILLE, VA 23947		
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F 000	Initial Comments An unannounced biennial State Licensure Inspection was conducted 3/9/21 through 3/12/21. Corrections are required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. The census in this 90 certified bed facility was 50 at the time of the survey. The survey sample consisted of 35 Resident 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 VAC 5 - 371 - 140 - B, C Based on staff interview and facility document review, it was determined the facility staff failed to review all policy and procedures on an annual basis. The findings include: A request was made by email on 3/10/2021 at 10:02 a.m. for the documented evidence of the annual policy and procedure review. On 3/11/2021 at 1:53 p.m., an email from ASM (administrative staff member) #2, the director of nursing, was received. This email contained a document titled, "QAPI (quality assurance performance improvement) Revision Review." This document failed to evidence an annual policy and procedure review. An interview was conducted with ASM #2, on 3/12/2021 at 9:41 a.m. When asked where the	F 001		

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

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F 001	<p>Continued From page 1</p> <p>policy and procedure reviews were, ASM #2 stated they were having a quick QAPI meeting this morning, for emergent things, to review all of the policy and procedures. When asked the last time the policy and procedures were reviewed, ASM #2 stated, "I can't tell you."</p> <p>An interview was conducted with ASM #1, the administrator, on 3/12/2021 at 9:48 a.m. When asked why the annual policy and procedure review was not completed, ASM #1 stated, "It got away from us, especially with the pandemic and the frequent change in the DON (director of nursing) position.</p> <p>ASM #1 made aware of the above concern on 3/12/2021 at approximately 10:00 a.m.</p> <p>An email request was made on 3/12/2021 at 10:26 a.m. to ASM #1 and ASM #2 for a policy related to the annual policy and procedure review. On 3/12/2021 at 10:42 a.m. ASM #2 responded and stated she could not locate a policy.</p> <p>No further information was provided prior to exit.</p> <p>12 VAC 5 - 371 - 150 A - cross references to Federal Deficiency F 600</p> <p>12 VAC 5 - 371 - 150 - cross references to Federal Deficiency F 623 and F 625</p> <p>12 VAC 5 - 371 - 250 A - cross references to Federal Deficiency F 641</p> <p>12 VAC 5 - 371 - 250 F - cross references to Federal Deficiency F 656 and F 657</p> <p>12 VAC 5 - 371 - 220 A - cross references to Federal Deficiency F 698</p>	F 001		

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F 001	<p>Continued From page 2</p> <p>12 VAC 5 - 371 - 220 B - cross references to Federal Deficiency F 695</p> <p>12 VAC 5 - 371 - 330 A - cross references to Federal Deficiency F 700</p> <p>12 VAC 5 - 371 - 200 B. 3 - cross references to Federal Deficiency F 730</p> <p>12 VAC 5 - 371 - 300 B - cross references to Federal Deficiency F 761</p> <p>12 VAC 5 - 371 - 340 - cross references to Federal Deficiency F 812</p> <p>12 VAC 5 - 371 - 370 G - cross references to Federal Deficiency F 909</p> <p>12VAC5-371-140. Policies and Procedures: Staff Licenses. See below citation</p> <p>Based on staff interview and facility document review, it was determined that the facility staff failed to evidence verification of a current license or certificate or perform reference checks in accordance with the laws of the State of Virginia, for four of 25 employee records reviewed, (LPN (licensed practical nurse) #3, LPN #5, CNA (certified nursing assistant) #6 and CNA #7).</p> <p>The findings included:</p> <p>On 3/11/21 at approximately 8:00 AM, the employee records for newly hired employees within the past two years were reviewed. Review of the employee records failed to produce evidence of license verifications or reference</p>	F 001		

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F 001	<p>Continued From page 3</p> <p>checks on file for four staff members.</p> <p>The employees identified were:</p> <p>LPN (licensed practical nurse) #3's employee record was reviewed. LPN #3's employee record documented they were hired as an LPN with the facility on 10/21/20. Further review of LPN #3's employee record failed to evidence primary source license verification from the Virginia Department of Health Professionals. The nursing license for LPN #3 in the employee file expired 12/31/20.</p> <p>LPN #5's employee record was reviewed. LPN #5's employee record documented they were hired as an LPN with the facility on 3/24/20. Further review of LPN #5's employee record failed to evidence primary source license verification from the Virginia Department of Health Professionals. The nursing license for LPN #5 in the employee file expired 3/17/20.</p> <p>CNA (certified nursing assistant) #6's employee record was reviewed. CNA #6's employee record documented they were hired as a CNA with the facility on 1/23/20. Further review of CNA #6's employee record failed to evidence primary source license verification from the Virginia Department of Health Professionals. The CNA license in the employee file expired 1/31/20 and CNA #6 was terminated from facility on 2/27/20.</p> <p>CNA #7's employee record was reviewed. CNA #7's employee record documented they were hired as a CNA with the facility on 4/16/19. Further review of CNA #7's employee record failed to evidence primary source license verification from the Virginia Department of Health Professionals. The CNA license in the</p>	F 001		

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F 001	<p>Continued From page 4</p> <p>employee file expired 3/31/20 and CNA #7 was terminated from facility on 7/22/20</p> <p>An interview was conducted on 3/11/21 at 9:02 AM with OSM (other staff member) #7, the HR (human resources) coordinator. When asked who is responsible for license primary source verification, OSM #7 stated, "I only pull the original licenses after that the SDC (staff development coordinator) makes sure the licenses are current."</p> <p>An interview was conducted on 3/11/21 at 9:48 AM with ASM (administrative staff member) #2, the director of nursing. When asked to speak with the staff development coordinator (SDC), ASM #2 stated, "The SDC is on family medical leave and has not been here since November I believe." When shown that the license PSV (primary source verification) for LPN #3 had a print date of 3/11/21 at 9:10 AM, ASM #2 stated, "I knew he renewed it and I checked it on line but I didn't print the copy to put in the book. I was trying to correct that before I brought the documents to you. I was the clinical coordinator at the time I looked at this." When asked if the clinical coordinator role was similar to the ADON (assistant director of nursing), ASM #2 stated, "Yes, here the ADON and clinical coordinator are the same."</p> <p>An interview was conducted on 3/11/21 at 10:26 AM with ASM #2, the director of nursing. When asked to validate that LPN #5 had a name change and were the same person, ASM #2 stated, "Yes, they are the same person". On 3/11/21 at 10:35 AM, ASM #3, the clinical consultant brought a license PSV printed for LPN #5 at 10:30 am on 3/11/21, with expiration date of 11/30/21.</p>	F 001		

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F 001	<p>Continued From page 5</p> <p>On 3/12/21 at 11:50 AM during the exit conference with ASM #4, the regional vice president ASM #4 asked, "They were working without a license? ASM #2, the director or nursing stated they had a current license but the facility did not have a copy of this". ASM #4, was asked how the facility is verifying that the licenses are current if they do not have license primary source verification? ASM #4 state, "I guess we weren't".</p> <p>The facility's policy "Validation of Nursing License" dated 1/12/2016, documented in part, "All licenses are validated with the board of nursing at the time of hire and at time of each renewal. All nursing assistants will provide their social security number for verification with the Virginia board of nursing".</p> <p>The state regulation 12VAC5-371-140 documented "E. Personnel policies and procedures shall include, but are not limited to: 3. An accurate and complete personnel record for each employee including: a. Verification of current professional license, registration, or certificate or completion of a required approved training course; b. Criminal record check; c. Verification that the employee has reviewed or received a copy of the job description ..."</p> <p>On 3/11/21 at approximately 11:50 AM, ASM #1, the administrator was made aware of the findings.</p> <p>No further information was provided prior to exit.</p>	F 001		