STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	495188	A. BUILDING _____ B. WING _____	02/03/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
APPOMATTOX HEALTH & REHABILITATON CENTER	235 EVERGREEN AVE APPOMATTOX, VA 24522

(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) COMPLETION DATE
E 000	Initial Comments An unannounced Emergency Preparedness COVID-19 Focused Infection Control Survey was conducted offsite on 2/3/2022. The facility was in compliance with E0024 of 42 CFR Part 483.73, Requirements for Long Term Care Facilities.	E 000		
F 000	INITIAL COMMENTS An unannounced COVID-19 Focused Infection Control Survey was conducted on 02/03/2022. Corrections are required for 42 CFR Part 483.80 infection control regulations. On 02/03/2022, the census in this 60 certified bed facility was 52. The survey sample consisted of five current Resident record reviews, Resident 1 through Resident #5. There were 14 positive COVID-19 cases in the facility at the time of the survey. The facility was testing residents and staff twice weekly.	F 000		
F 883 SS=D	Influenza and Pneumococcal Immunizations CFR(s): 483.80(d)(1)(2) §483.80(d) Influenza and pneumococcal immunizations §483.80(d)(1) Influenza. The facility must develop policies and procedures to ensure that- (i) Before offering the influenza immunization, each resident or the resident's representative receives education regarding the benefits and potential side effects of the immunization; (ii) Each resident is offered an influenza immunization October 1 through March 31 annually, unless the immunization is medically contraindicated or the resident has already been immunized during this time period; (iii) The resident or the resident's representative	F 883		3/7/22

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 02/07/2022

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F 883	Continued From page 1	F 883		

has the opportunity to refuse immunization; and
(iv)The resident's medical record includes documentation that indicates, at a minimum, the following:
(A) That the resident or resident's representative was provided education regarding the benefits and potential side effects of influenza immunization; and
(B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal.

§483.80(d)(2) Pneumococcal disease. The facility must develop policies and procedures to ensure that-
(i) Before offering the pneumococcal immunization, each resident or the resident's representative receives education regarding the benefits and potential side effects of the immunization;
(ii) Each resident is offered a pneumococcal immunization, unless the immunization is medically contraindicated or the resident has already been immunized;
(iii) The resident or the resident's representative has the opportunity to refuse immunization; and
(iv)The resident's medical record includes documentation that indicates, at a minimum, the following:
(A) That the resident or resident's representative was provided education regarding the benefits and potential side effects of pneumococcal immunization; and
(B) That the resident either received the pneumococcal immunization or did not receive the pneumococcal immunization due to medical contraindication or refusal.

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F 883	Continued From page 2 This REQUIREMENT is not met as evidenced by: Based on clinical record review, staff interview, and facility document review, the facility staff failed to ensure the influenza and/or pneumonia vaccine was documented in the clinical record for three of five residents, Resident # 1, # 3, and #4. Findings include: 1. Resident # 1 was admitted to the facility 11/27/21 with a readmission date of 1/11/22. Diagnoses for Resident # 1 included, but was not limited to: Covid 19, chronic respiratory failure, diabetes, and heart disease. The most recent MDS was an admission assessment dated 1/17/22 and coded Resident # 1 as having moderate impairment in cognition with a total score of 11 out of 15. On 2/3/22 at approximately 12:30 p.m. during review of the clinical record, it was noted Resident # 1 had no documentation of a pneumococcal vaccine under the "Immunization" tab of the electronic medical record (EMR). Further review of the EMR failed to reveal the resident's status for the vaccine. The admission MDS dated 12/3/21 at "Section O 0300" documented "Is the resident's pneumococcal vaccine up to date? 0. No. If pneumococcal vaccination not received, state reason: 3. Not Offered." The admission MDS dated 1/17/22 documented the same information at "Section O" that the pneumococcal vaccine was not offered. On 2/3/22 at approximately 3:00 p.m. the DON (director of nursing), who was also the Infection Preventionist, and corporate nurse consultant	F 883	The statements made in the following plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies nor the reported conversations and other information cited in support of the alleged deficiencies. The facility sets forth the following plan of correction to remain in compliance with all federal and state regulations. The facility has taken or will take the actions set forth in the plan of correction. The following plan of correction constitutes the facility□s allegation of compliance. All alleged deficiencies cited have been or will be corrected by the date or dates indicated. F883 SS= D Influenza and Pneumococcal Immunizations Resident #1 educated and offered the Pneumococcal immunization 2/4/2022. Patient in agreement to receive vaccine. Resident #3 educated and offered the Flu vaccination. Patient refused. Patient # 4 is no longer in the facility. An audit was conducted by the Director of Nursing or designee to identify residents who have not been educated and offered the flu or pneumococcal immunization for the month of January to ensure that each patient was educated and offered the flu and pneumococcal vaccinations. Unit Manager or designee will educate the	

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F 883	Continued From page 3 were interviewed. The DON was asked when a resident should be offered pneumococcal vaccine, who was responsible for follow-up, and for a policy on the pneumococcal vaccine administration. The DON stated the resident's vaccination status was determined on admission by the admissions department. The admissions department asks for the information, and it is scanned in to the EMR. The DON further stated the vaccination record is made available for nursing to then enter under the "Immunization" tab of the EMR. The DON was then asked who was ultimately responsible to ensure follow-up and documentation. She stated "I guess that's me." The DON and nurse consultant were made aware of the findings for Resident # 1. The policy "Influenza and Pneumococcal Vaccinations" was reviewed and documented the following: "Vaccination against pneumonia will be offered by the Center patients as indicated. 2. ...f. A patient Pneumococcal Vaccine Tracking Log will be maintained by the Infection Preventist. All patients' names are to be included on the Tracking Log. (sic) New patients' names will be placed on the log at the time of admission and offered the Pneumococcal vaccination if not received as indicated." No further information was provided prior to the exit conference. 2. Resident #3 was admitted to the facility on 10/27/2021, and readmitted on 01/28/2022. Her diagnoses included but not limited to: Occlusion and stenosis of bilateral carotid arteries, chronic kidney disease Stage 4, COPD (chronic obstructive pulmonary disease), vascular dementia, bipolar disorder, and most recently a	F 883	Nursing Staff about the importance of educating and offering the flu and pneumococcal vaccinations and provide documentation of acceptance or refusal of said vaccinations. Director of Nursing or designee will review the vaccination records of each patient for Flu and pneumococcal vaccinations to ensure acceptance or refusal of each vaccination offered for four (4) weeks. Any discrepancies will be brought to the attention of the QAPI meeting and addressed as needed. Date of Compliance 3-7-2022	

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F 883	Continued From page 4	F 883		

displaced intertrochanteric fracture of the left femur.

The most recent MDS (minimum data set) quarterly assessment with an ARD (assessment reference date) of 12/01/2021. Resident #3 was assessed as moderately impaired with a cognitive summary score of "10".

The clinical record was reviewed on 02/03/2022 at approximately 12:00 p.m. for flu and pneumonia vaccine status. The immunization tab in the electronic record did not contain any information regarding a flu vaccine. The most recent MDS was reviewed for vaccination status. Under section "O0250" Influenza Vaccine, for question A "Did the resident receive the influenza vaccine in this facility for this year's influenza vaccination season?" The answer was "No." Question C, "If influenza vaccine was not received, state reason," was answered, "Not Offered".

An interview with the DON (Director of nursing) and the corporate nurse consultant was conducted on 02/03/2022 at 2:00 p.m. They were asked how vaccine status was handled at the facility. Per the corporate nurse consultant and the DON, vaccines are reviewed at the time of admission and handled by the admissions office. After admission the admitting nurse follows up and the information is located under the immunization tab. They were asked where the information would be if not under that tab and who was responsible for ensuring the information was obtained. The DON stated, "I am also the infection preventionist, I tag team with the unit manager to see if the vaccines are done...we follow-up with each other and communicate about

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F 883	Continued From page 5	F 883		

who is entering it on the record."

3. Resident #4 was admitted to the facility on 01/17/2022 with the following diagnoses including but not limited to: Other specified disorders of brain, hemiplegia, heart failure, and anemia.

The most recent MDS (minimum data set) was an admission assessment with an ARD (assessment reference date) of 01/22/2022. Resident #4 was assessed as cognitively intact with a summary score of "15".

The clinical record was reviewed on 02/03/2022 at approximately 12:30 p.m. for flu and pneumonia vaccine status. The immunization tab in the electronic record did not contain any information regarding a flu or a pneumonia vaccine. The most recent MDS was reviewed for vaccination status. Under section "O0250" Influenza Vaccine for question A "Did the resident receive the influenza vaccine in this facility for this year's influenza vaccination season?" The answer was "No." Question C, "If influenza vaccine was not received, state reason," was answered, "Not Offered". Under section O0300, Pneumonia Vaccine, question A, "Is the resident's Pneumococcal vaccination up to date?" the answer was "No." Question B, "If pneumococcal vaccination not received, state reason", was answered "Not offered".

An interview with the DON (Director of nursing) and the corporate nurse consultant was conducted on 02/03/2022 at 2:00 p.m. They were asked how vaccine status was handled at the facility. Per the corporate nurse consultant and the DON, vaccines are reviewed at the time of admission and handled by the admissions office.

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F 883	Continued From page 6 After admission the admitting nurse follows up and the information is located under the immunization tab. They were asked where the information would be if not under that tab and who was responsible for ensuring the information was obtained. The DON stated, "I am also the infection preventionist, I tag team with the unit manager to see if the vaccines are done...we follow-up with each other and communicate about who is entering it on the record." The facility policy, "Influenza & Pneumococcal Vaccinations", contained the following information, "Vaccination against influenza will be offered to Center patients and staff annually....The Center will check the immunization status of patients admitted during the flu season. Those who have not had the flu shot will be offered one upon admission." Vaccination against pneumonia will be offered to Center patients as indicated. The above policy was discussed with the DON and the corporate nurse consultant at approximately 3:30 p.m.. The DON stated, "If it isn't in the immunization tab they aren't vaccinated." No further information was obtained.	F 883		
F 887 SS=D	COVID-19 Immunization CFR(s): 483.80(d)(3)(i)-(vii) §483.80(d) (3) COVID-19 immunizations. The LTC facility must develop and implement policies and procedures to ensure all the following: (i) When COVID-19 vaccine is available to the facility, each resident and staff member is offered the COVID-19 vaccine unless the	F 887		3/7/22

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F 887	Continued From page 7	F 887		

immunization is medically contraindicated or the resident or staff member has already been immunized;
(ii) Before offering COVID-19 vaccine, all staff members are provided with education regarding the benefits and risks and potential side effects associated with the vaccine;
(iii) Before offering COVID-19 vaccine, each resident or the resident representative receives education regarding the benefits and risks and potential side effects associated with the COVID-19 vaccine;
(iv) In situations where COVID-19 vaccination requires multiple doses, the resident, resident representative, or staff member is provided with current information regarding those additional doses, including any changes in the benefits or risks and potential side effects associated with the COVID-19 vaccine, before requesting consent for administration of any additional doses;
(v) The resident or resident representative, has the opportunity to accept or refuse a COVID-19 vaccine, and change their decision;
Note: States that are not subject to the Interim Final Rule - 6 [CMS-3415-IFC], must comply with requirements of 483.80(d)(3)(v) that apply to staff under IFC-5 [CMS-3414-IFC]
and
(vi) The resident's medical record includes documentation that indicates, at a minimum, the following:
(A) That the resident or resident representative was provided education regarding the benefits and potential risks associated with COVID-19 vaccine; and
(B) Each dose of COVID-19 vaccine administered to the resident; or

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F 887	Continued From page 8 (C) If the resident did not receive the COVID-19 vaccine due to medical contraindications or refusal; and (vii) The facility maintains documentation related to staff COVID-19 vaccination that includes at a minimum, the following: (A) That staff were provided education regarding the benefits and potential risks associated with COVID-19 vaccine; (B) Staff were offered the COVID-19 vaccine or information on obtaining COVID-19 vaccine; and (C) The COVID-19 vaccine status of staff and related information as indicated by the Centers for Disease Control and Prevention's National Healthcare Safety Network (NHSN). This REQUIREMENT is not met as evidenced by: Based on clinical record review, staff interview, and facility policy review, the facility staff failed to ensure the COVID vaccine was offered to one of five residents, Resident #3. Findings were: Resident #3 was admitted to the facility on 10/27/2021, and readmitted on 01/28/2022. Her diagnoses included but not limited to: Occlusion and stenosis of bilateral carotid arteries, chronic kidney disease Stage 4, COPD (chronic obstructive pulmonary disease), vascular dementia, bipolar disorder, and most recently a displaced intertrochanteric fracture of the left femur. The most recent MDS (minimum data set) quarterly assessment with an ARD (assessment reference date) of 12/01/2021. Resident #3 was assessed as moderately impaired with a cognitive summary score of "10".	F 887	F887 SS = D COVID- 19 Immunization On 2/4/2022 Resident # 3 was educated and offered the Covid 19 Immunization. The resident refused the vaccination. An audit was conducted by the Director of Nursing or designee to identify residents who have not been educated and offered the Covid 19 immunization for the month of January to ensure that each patient was educated and offered the Covid 19 vaccination. Unit Manager or designee will educate the Nursing Staff about the importance of Educating and offering the Covid 19	

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F 887	Continued From page 9 The clinical record was reviewed on 02/03/2022 at approximately 12:00 p.m. for COVID vaccine status. The immunization tab in the electronic record did not contain any information regarding a COVID vaccine. An interview with the DON (Director of nursing) and the corporate nurse consultant was conducted on 02/03/2022 at 2:00 p.m. They were asked how vaccine status was handled at the facility. Per the corporate nurse consultant and the DON, vaccines are reviewed at the time of admission and handled by the admissions office. After admission the admitting nurse follows up and the information is located under the immunization tab. They were asked where the information would be if not under that tab and who was responsible for insuring the information was obtained. The DON stated, "I am also the infection preventionist, I tag team with the unit manager to see if the vaccines are done...we follow-up with each other and communicate about who is entering it on the record." The policy regarding COVID vaccinations was requested. The facility policy was received and contained the following information, "Vaccination against COVID-19 will be offered to Center patients and employees, as indicated." The above policy was discussed with the DON and the corporate nurse consultant at approximately 3:30 p.m.. The corporate nurse consultant stated, "The family are anti-vaccination...I think the staff knew that." The DON stated, "We offer clinics twice a month for vaccines and boosters...I think it was a documentation error that we didn't write down that	F 887	immunization and provide documentation of acceptance or refusal of said vaccine. Director of Nursing or designee will review the vaccination records of each patient for Covid 19 immunization to ensure acceptance or refusal of the Covid 19 vaccination for four (4) weeks. Any discrepancies will be brought to the attention of the QAPI meeting and addressed as needed. Date of Compliance 3-7-2022	

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F 887	Continued From page 10 we disused it with the family." No further information was obtained prior to the exit conference.	F 887		