

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0170	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/06/2022
NAME OF PROVIDER OR SUPPLIER THE CHESAPEAKE		STREET ADDRESS, CITY, STATE, ZIP CODE 955 HARPERSVILLE RD NEWPORT NEWS, VA 23601		
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F 000	Initial Comments An unannounced biennial State Licensure Inspection was conducted 1/04/22 through 1/06/22. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. One complaint (VA00052573 was investigated during the survey. The census in this 52 certified bed facility was 48 at the time of the survey. The survey sample consisted of 22 current Resident record reviews and 3 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 VAC 5-371-220 (F). Quality of Life. ADL Care Provided for Dependent Residents Under section (F). Each resident shall receive tub or shower baths as often as needed, but not less than twice weekly. Based on resident interview, staff interviews and clinical record review the facility staff failed to provide personal care to include showers for 4 residents (Resident #3, #46, #4 and #19) who were unable to independently carry out activities of daily living (ADL) care. The findings included: 1. The facility staff failed to ensure Resident #3 was offered and received a scheduled twice-weekly showers to maintain good personal hygiene.	F 001	1. Shower schedules for residents 3,4, 46, and 19 were reviewed and updated by the Director of Nursing. ADL records were updated to mirror the shower list. Written orders were obtained for showers and placed on eTAR for charge nurses to verify showers have been provided. 2.All residents have the potential for having a shower missed. 3. A new shower policy will be implemented by the DON or designee and nursing staff will be educated on the new policy. The policy will include the following: Upon admission to the unit, if a resident is able to provide a shower schedule preference, they will be asked by the charge nurse or designee and preferences honored as able.	2/11/22

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

TITLE

(X6) DATE

Electronically Signed

01/31/22

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F 001	<p>Continued From page 1</p> <p>Resident #3 was originally admitted to the facility on 07/28/14. Diagnosis for included but not limited to Parkinson's disease and muscle weakness.</p> <p>Resident #3's Minimum Data Set (an assessment protocol) an annual assessment with an Assessment Reference Date (ARD) of 10/11/21 coded the resident's Brief Interview for Mental Status (BIMS) score 09 of a possible 15 with moderate cognitive impairment for daily decision-making. In section "G" (Physical functioning) the MDS coded Resident #3 requiring extensive assistance of two with bed mobility, extensive assistance of one with transfer, dressing, hygiene, bathing and toilet use for Activities of Daily Living (ADL) care.</p> <p>The comprehensive care plan with a start date of 10/13/20 documented Resident #3 requiring assistance with ADL's related to increase weakness, decreased mobility, impaired gait, Parkinson's, fall history and increased discomfort. The goal set for the resident by the staff is receive assistance with all ADL's as evidenced by good grooming, neat and clean appearance, and free of body odors daily. One of the interventions to manage goal include (bed/shower) staff to complete bathing care as needed requiring extensive assistance of one with bathing.</p> <p>On 01/05/22 at approximately 10:56 a.m., Resident #3 was observed sitting up in her wheel chair fully dressed. When asked if she was receiving showers, she replied, "No, showers are hard to come by around here." The resident said, I should be getting showers three times a week but I'm lucky if I get a shower once a week." When asked if she wanted showers, she replied,</p>	F 001	<p>-- Admission nurse will notify the medical assistant of the resident's shower/bathing preference and the MA will update the shower list.</p> <p>--The evening shift supervisor/designee will ensure that the ADL record and treatment orders mirror the resident's preference.</p> <p>--Bathing/shower schedules will be updated/reviewed by nursing in all care plan meetings.</p> <p>--Showers/baths will be offered twice per week, Monday through Saturday by nursing.</p> <p>--If resident refuses shower, CNA will notify charge nurse; charge nurse will speak with resident and if resident continues to refuse, nurse will document and notify resident's representative and Plan of care will be updated.</p> <p>--Residents who consistently refuse showers or showers causing increased distress, the ID team will meet and discuss plan of care with resident's representative and resident if able. Plan of care will be updated.</p> <p>--Staff will be re-educated on residents rights to include preferences; the updated shower list and expectations of documentation.</p> <p>4. ADL/treatment documentation will be monitored daily for 4 weeks by ADON or designee, then weekly x 4 for compliance.</p> <p>50% Residents scheduled for showers will be interviewed by the DON or designee randomly 3 times per week for 4 weeks and weekly x 3 months to inquire of their</p>	

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F 001	<p>Continued From page 2</p> <p>"Yes."</p> <p>Review of Resident #3's ADL Documentation Survey Report revealed the showers were not given on the following shower days:</p> <p>October 2021 (10/04, 10/11, 10/14, 10/18, 10/21 and 10/25/21). November 2021 (11/04, 11/08 and 11/18/21). December 2022 (12/16 and 12/20/21).</p> <p>A phone interview was conducted with the Assistant Director of Nursing (ADON) on 01/06/22 @ approximately 3:15 p.m., who stated, "Showers are to be offered twice a week and if the resident refuses, the nurse is to be notified of resident's refusal." She said the nurse is to speak with the resident and if they still refuse, the refusal is to be document by the Certified Nursing Assistant (CNA) and the nurse in the resident's clinical record.</p> <p>The ADL Documentation Survey Report and shower scheduled were reviewed with License Practical Nurse (LPN) #1 on 01/06/21 at approximately 5:50 p.m. The LPN said if Resident #3 refused her showers, the Certified Nursing Assistant (CNA) should leave and attempted again later. The LPN said if the resident still refuse their shower, the CNA is to report the refusal to the nurse. The nurse will speak with the resident and if the resident still refuses, the refusal is documented in the resident's clinical record and the family is notified. The LPN stated, "The CNA's have never reported that Resident #3 has ever refused her showers."</p> <p>A debriefing was conducted with the Administrator, Director of Nursing (DON) and Staff Development Coordinator/Quality Assurance</p>	F 001	<p>shower experience. Any noted non-compliance will be addressed immediately.</p> <p>--Results of all audits will be reviewed and reported at the next QAPI meeting for continued review and oversight.</p> <p>5. Completion Date: 2/11/22 and ongoing.</p> <p>1. Reference checks will be completed for 24 new hires who are still employed by the Human Resources Director, or designee.</p> <p>A copy of the original Criminal record check completed on October 6, 2021 was requested from the State Police on January 7, 2022 by the HR Assistant and received for the one missing record. Record was placed in file.</p> <p>2. All new hire employee records have the potential to have criminal background checks and pre-employment reference checks overlooked. All residents have the potential to be affected.</p> <p>3. The process of obtaining reference checks will be revised to include a new reference check form being implemented by the HR Director or designee for use with all new hires.</p> <p>-Reference checks will be added to new</p>	

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F 001	<p>Continued From page 3</p> <p>(QA) on 01/06/22 at approximately 6:38 p.m. The facility did not present any further information about the above findings.</p> <p>2. The facility staff failed to ensure Resident #46 was offered and received a scheduled twice-weekly showers to maintain good personal hygiene.</p> <p>Resident #46 was originally admitted to the facility on 06/07/19. Diagnosis for included but not limited to muscle weakness.</p> <p>Resident #46's Minimum Data Set (an assessment protocol) an annual assessment with an Assessment Reference Date (ARD) of 12/27/21 coded the resident's Brief Interview for Mental Status (BIMS) score 13 of a possible 15 with no cognitive impairment for daily decision-making. In section "G" (Physical functioning) the MDS coded Resident #46 requiring total dependence of two with transfer, total dependence of one with bathing, extensive assistance of two with dressing, hygiene and bed mobility and extensive assistance of one with eating and toilet use for Activities of Daily Living (ADL) care.</p> <p>The comprehensive care plan with a start date of 11/04/20 documented Resident #46 requiring assistance with ADL's related to Cerebrovascular Accident (CVA) with left hemiparesis, increased weakness, decreased mobility, and increased discomfort related to self-imposed bed rest. The goal set for the resident by the staff is receive assistance with all ADL's as evidenced by good grooming, neat and clean appearance, and free of body odors daily. One of the interventions to manage goal include (bed/shower) staff to</p>	F 001	<p>hire checklist by HR Director or designee to be completed.</p> <p>-Three attempts will be made to obtain Reference checks on all new hires with documented attempts being maintained in HR/UKG file.</p> <p>-Personal references may be obtained in the absence of professional reference checks.</p> <p>-HR staff will be educated on the use of the new reference check form, the revised checklist and re-educated on the requirement to obtain reference checks.</p> <p>-On-line criminal background checks via VA State Police website will continue to be completed prior to the start date for new hires.</p> <p>-A new hire checklist will continue to be completed prior to the start date, to include the date of completion for criminal background checks.</p> <p>-Administrator re-educated the HR team on the process for obtaining and filing criminal background checks on 1/25/22.</p> <p>4. New hires' personnel records will be monitored biweekly for 6 weeks and monthly x 3 by the Administrator or designee to ensure reference checks/attempts and criminal background checks are completed prior to hire. Any missing reference checks/criminal background checks will be obtained immediately.</p> <p>Results of all audits will be reviewed and reported at the next QAPI meeting for continued review and oversight.</p>	

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F 001	<p>Continued From page 4</p> <p>complete bathing care as needed requiring extensive assistance of one with bathing.</p> <p>On 01/05/22 at approximately 1:35 a.m., Resident #46 was observed lying in bed.</p> <p>When asked if she was receiving showers, she replied, "Showers are not given twice a week."</p> <p>When asked if she wanted showers, she replied, "Yes."</p> <p>Review of Resident 46's ADL Documentation Survey Report revealed the showers were not given on the following shower days:</p> <p>October 2021 (10/04, 10/14, 10/18, 10/21, 10/25, and 10/28/21).</p> <p>November 2021 (11/01, 11/04, 11/08, 11/11, 11/18, 11/22, 11/25 and 11/29/21).</p> <p>December 2021 (12/02, 12/06, 12/09, 12/13, 12/16, 12/20, 12/23 and 12/27/21).</p> <p>A phone interview was conducted with the Assistant Director of Nursing (ADON) on 01/06/22 @ approximately 3:15 p.m., who stated, "Showers are to be offered twice a week and if the resident refuses, the nurse is to be notified of resident's refusal." She said the nurse is to speak with the resident and if they still refuse, the refusal is to be document by the Certified Nursing Assistant (CNA) and the nurse in the resident's clinical record.</p> <p>The ADL Documentation Survey Report and shower scheduled were reviewed with License Practical Nurse (LPN) #1 on 01/06/21 at approximately 5:50 p.m. The LPN said if Resident #46 refused her showers, the Certified Nursing Assistant (CNA) should leave and attempted again later. The LPN said if the resident still refuse their shower, the CNA is to</p>	F 001	<p>5. Completion Date: 2/11/22 and ongoing</p> <hr/> <p>POC for F-622 (Transfer & Discharge Requirements) cross references to 12 VAC 5-371-150 (B.1) (Resident Rights).</p> <p>POC for F-602 (Free from Misappropriation/Exploitation) cross references to 12 VAC 5-371-150 (B) (Resident Rights).</p> <p>POC for F-641 (Accuracy of Assessments) cross references to 12 VAC 5-371-250 (A) (Resident Assessment and Care Planning).</p> <p>POC for F-686 (Treatment Services to Prevent/Heal Pressure Ulcers) cross references to 12 VAC 5-371-220 (C.1) (Quality of Life ADL Care).</p>	

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F 001	<p>Continued From page 5</p> <p>report the refusal to the nurse. The nurse will speak with the resident and if the resident still refuses, the refusal is documented in the resident's clinical record and the family is notified. The LPN stated, "The CNA's have never reported that Resident #46 has ever refused her showers."</p> <p>A debriefing was conducted with the Administrator, Director of Nursing (DON) and Staff Development Coordinator/Quality Assurance (QA) on 01/06/22 at approximately 6:38 p.m. The facility did not present any further information about the above findings.</p> <p>The facility policy titled Shower: Activities of Daily Living (ADL's) revision date: 01/06/22. Residents will be provided with care, treatment, and services as appropriate to maintain or improve their ability to carry out (ADL's). Resident who are unable to carry out (ADL's) independently will receive the services necessary to maintain good nutrition, rooming and personal and oral hygiene.</p> <p>-Definitions: ADL's is used to collectively describe fundamental skills required to care for oneself, such as eating, bathing, grooming, personal hygiene, toileting and mobility.</p> <p>Specific procedures/requirements: 4. (A.I.) Each resident shall receive tub or shower baths as often as needed but not less than twice weekly or as required by state law. Resident's preference and/or whose medical conditions prohibit tub or shower baths shall have a sponge bath daily.</p> <p>The facility failed to conduct a criminal</p>	F 001		

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F 001	<p>Continued From page 6</p> <p>background check in accordance to Virginia Code 32.1-126.01 and 32.1-162.9:1 of the Code of Virginia. Under section (F). Each resident shall receive tub or shower baths as often as needed, but not less than twice weekly.</p> <p>The finds included:</p> <p>Twenty-Four employees hired from 8/03/20 through 12/20/21 did not receive an Employee State Reference Checks.</p> <p>One employee did not receive a criminal record check.</p> <p>A pre-exit interview was conducted on 1/06/2022 at approximately 6:40 PM. The above findings were shared with the Administrator, Director of Nursing and Licensed Practical Nurse of Staff Development and Quality Assurance. The administrator stated that she knew the reference checks were completed but because the Human Resources Staff was out sick she didn't have assistance in getting the records.</p> <p>12 VAC 5-371-220 (F). Quality of Life. ADL Care Provided for Dependent Residents Based on resident interview, staff interviews and clinical record review the facility staff failed to provide personal care to include showers for 1 of 25 residents (Resident #4) in the survey sample who was unable to independently carry out activities of daily living (ADL's).</p> <p>The findings included:</p> <p>3.Resident #4 was originally admitted to the nursing facility on 02/09/2017. Diagnosis for</p>	F 001		

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F 001	<p>Continued From page 7</p> <p>Resident #4 included but not limited to Muscle Weakness and Type 2 Diabetes Mellitus. Resident #4's Minimum Data Set an Annual assessment with an Assessment Reference Date (ARD) of 10/11/21 coded Resident #4 a 9 out of a possible score of 15 on the Brief Interview for Mental Status (BIMS), This indicated Resident #4 cognitive abilities for daily decision making were moderately impaired. The facility staff failed to provide personal care to include showers for Resident #4 in the survey sample who was unable to independently carry out Activities of Daily Living (ADL's).</p> <p>In addition, the MDS coded Resident #4 requiring physical help of one person with bathing. Requiring extensive assistance of one person with bed mobility, transfers, dressing, toilet use and personal hygiene. The care plan dated 2/09/17 reads: Resident requires assistance with ADL's (Activities of Daily Living) related to increased weakness, increased falls, decreased mobility. Increased discomfort, and impaired gait. Resident will receive assistance with all ADL's as evidenced by good grooming, neat and clean appearance, and be free of body odors daily through next review. Intervention: Bathing: Shower/bed bath. Staff to complete bathing care as needed. Resident requires: Minimum assistance with one person assistance.</p> <p>An interview was conducted with Resident #4 on 01/05/22 at approximately 12:35 PM who stated, "I only get a shower once a week but want to have more than one shower a week." When asked when your shower days are, she stated, I don't know."</p> <p>On 1/06/22 at approximately 5:10 PM, an interview was conducted with CNA (Certified</p>	F 001		

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F 001	<p>Continued From page 8</p> <p>Nursing Assistant) #2 concerning showers. She stated, "I encourage residents to take a shower. I will re-approach them later if they refuse. If they still refuse I tell the nurse."</p> <p>A review of the December 2021 and January 2022 shower schedule show that Resident #4 should be given showers on Monday and Thursday (7A-3P). A review of Resident #4's Documentation Report for bathing reveal the following: Showers were not given on 12/06/21, 12/09/21, 12/13/21 and 1/03/22.</p> <p>Activities of Daily Living (ADLs) Policy #58-004 Dated: 01/06/22. Policy Reads: Residents will be provided with care, treatment, and services as appropriate to maintain or improve their ability to carry out activities of daily living independently will receive the services necessary to maintain good nutrition, grooming and personal and oral hygiene. Activities of Daily Living (ADLs): This term is used to collectively describe fundamental skills required to care for oneself such as eating, bathing, grooming, personal hygiene, toileting, and mobility. Specific Procedures/Requirements: Each resident shall receive tub or shower baths as often as needed, but not less than twice weekly or as required by state law.</p> <p>A pre-exit interview was conducted on 1/06/2022 at approximately 6:40 PM. The above findings were shared with the Administrator, Director of Nursing (DON) and Licensed Practical Nurse of Staff Development and Quality Assurance. The DON stated, "They should receive showers twice a week."</p> <p>4. The facility staff failed to ensure Resident #19 was offered and received a scheduled twice-weekly shower to maintain good personal hygiene.</p>	F 001		

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F 001	<p>Continued From page 9</p> <p>Resident #19 was admitted to the nursing facility on 11/8/21 with diagnoses to include but are not limited to Parkinson's Disease and Muscle Weakness.</p> <p>Resident #19's most recent comprehensive Minimum Data Set (MDS) was an Admission with an Assessment Reference Date of 11/12/21. The Brief Interview for Mental Status (BIMS) for Resident #19 was coded as the resident is rarely/never understood. Resident #19 was also coded as severely impaired for daily decision making. The MDS coded Resident #19 as total dependence with one person physical assist for bathing and showers.</p> <p>The comprehensive care plan under Activities of Daily Living (ADL) with a start date of 11/8/21 documented Resident #19 as requiring assistance with ADL's related to increased weakness, status post sepsis, Parkinson's, dementia and discomfort. The goal set for the resident by the staff is receive assistance with all ADL's as evidenced by good grooming, neat and clean appearance, and free of body odors daily. The intervention in place for bathing (bed/shower) included staff to complete bathing care as needed.</p> <p>Resident #19's ADL documentation for bathing for December and January was reviewed and indicated the resident's shower days to be Monday and Thursday. The ADL documentation for bathing for Resident #19 also revealed that the resident received no showers in December or January equalling a total of 11 missed showers.</p> <p>On 11/5/22 at 2:30 p.m. an interview was conducted with Resident #19's spouse. Resident #19's spouse was asked what 2 days of the week</p>	F 001		

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F 001	<p>Continued From page 10</p> <p>was his wife offered showers. Resident #19's spouse stated, "Well her shower days are Mondays and Thursdays on the evening shift. Usually they just take her in the bathroom and wash her up because I'm still here when they come in to bathe her. I think she may have had one shower since she has been here. I would like for her to have a shower at least once a week."</p> <p>On 11/6/22 at 3:45 p.m. an interview was conducted with Certified Nursing Assistance (CNA) #1 regarding Resident #19's ADL shower documentation for December and January and her shower schedule. CNA #1 stated, "She gets her showers on Mondays and Thursdays. I always work on those days so I do her showers. I usually take her in her bathroom and wash her down real good and use the shower cap to wash her hair. I don't know why the flowsheet is blank because I give her showers." CNA #1 was asked if bathing a resident at the bathroom sink is the same as a shower. CNA #1 stated, "Yes, because I soap her up real good, my residents are always clean. Just because I don't take them to the shower room and let water flow over them doesn't mean I didn't give them a shower."</p> <p>On 1/6/22 at 6:40 p.m. a pre-exit debriefing was held with the Administrator, the Director of Nursing and Staff Development/Quality Assurance nurse where the above information was shared. When asked what were the expectations of the facility in regards to showers the Director of Nursing stated, " They should be offered and receive showers twice a week."</p> <p>12 VAC 5-371-150 (B.1). Resident Rights. Cross-Reference to F-622.</p> <p>12 VAC 5-371-150 (B). Resident's Rights. Please</p>	F 001		

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0170	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/06/2022
NAME OF PROVIDER OR SUPPLIER THE CHESAPEAKE		STREET ADDRESS, CITY, STATE, ZIP CODE 955 HARPERSVILLE RD NEWPORT NEWS, VA 23601		
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F 001	Continued From page 11 Cross reference to F602. 12 VAC 5-371-250 (A). Resident Assessment and Care Planning Cross Reference to F-641. 12 VAC 5-371-220 (C.1). Nursing Services. Cross-Reference to F-686.	F 001		