State of Virginia STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B. WING VA0002 04/07/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 8830 VIRGINIA STREET AMELIA REHABILITATION AND HEALTHCARE AMELIA, VA 23002 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE **PREFIX** TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) F 000 **Initial Comments** 4/19/22 F 000 An unannounced biennial State Licensure Inspection was conducted 4/5/22 through 4/7/22. Corrections are required for compliance with the F-001 Virginia Rules and Regulations for the Licensure of Nursing Facilities. The statements made on this plan of correction are not an admission to and do not constitute an agreement within the alleged deficiencies cited herein. To remain The census in this 100 certified bed facility was in compliance with all federal and state regulations, 95 at the time of the survey. The survey sample the center has taken or will take the actions set forth in consisted of 32 current resident reviews and 4 the following plan of correction constitutes the center's closed record reviews. allegation of compliance. All alleged deficiencies cited have been or will be corrected by the date or dates indicated F 001 Non Compliance F 001 It is the intended practice of the facility to maintain The facility was out of compliance with the complete and accurate employee records to include sworn statements, criminal record background checks, following state licensure requirements: license verifications and references, in accordance with the laws of the State of Virginia. 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: RECEIVED 12VAC5-371-140. Policies and procedures A. D. 2. APR 27 2022 cross reference to F 623 VDH/OLC 12VAC5-371-220. Nursing services cross reference to F 677, F695, 698 12VAC5-371-340 Dietary and Food Service Program. cross reference to F812 Policies and Procedures 12VAC5-371-140 Based on staff interview and facility document review, it was determined that the facility staff failed to evidence that sworn statements, criminal

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

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If continuation sheet 1 of 5

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State of Virginia STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: _ C B. WING VA0002 04/07/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 8830 VIRGINIA STREET AMELIA REHABILITATION AND HEALTHCARE AMELIA, VA 23002 SUMMARY STATEMENT OF DEFICIENCIES (X5) COMPLETE PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) 4/19/22 F 001 Continued From page 1 F 001 record background checks. license verifications Upon notification from surveyor regarding and references were obtained in accordance with incomplete employee records for CNA #3, the laws of the State of Virginia, for seven of 25 CNA #4, CNA #5, RN #2, OSM #5, OSM #6, employee records reviewed. and OSM #7 on 4/6/22, the Business Office Manager was educated on maintaining The findings included: complete and accurate employee files regarding to sworn statements, criminal record background checks, license On 04/06/2022 at approximately 11:00 a.m., the verifications & obtaining current license employee records for newly hired employees and/or references in accordance with the within the past two years were reviewed. Review laws of the State of Virginia. of the employee records failed to evidence that 2. Residents who reside in the facility and staff either/or sworn statements, criminal record who are employed at the facility have the background checks, license verifications, current potential to be affected. license and/or references were obtained in Admin and/or designee will re-educate accordance with the laws of the State of Virginia. **Business Office Manager and Business** Office Staff on maintaining complete and The employees identified were: accurate employee files. 1. CNA (certified nursing assistant) #3. Hire date Business Office Manager and/or designee 02/03/2021. No evidence of a sworn statement, will audit 5 new employee hires within the Virginia State Police criminal background check, facility 3 days a week x 4 weeks and then license verification and references. monthly x 2 months. The results of the random audits will be reported to the QAA 2. CNA # 4. Hire date 12/08/2020. No evidence Committee for review and follow up of a sworn statement, Virginia State Police recommendations as indicated. criminal background check, license verification 5 The facility's alleged date of compliance will and references. be 5/12/2022. 3. CNA # 5. Hire date 11/11/2021, No evidence that a license verification was obtained prior to RN (registered nurse) # 2. Hire date 10/20/2021. No evidence that a license verification was obtained prior to hire. 5. OSM (other staff member) # 5, receptionist. Hire date 11/09/2021. No evidence of a Virginia State Police criminal background check.

6. OSM #6, ST (speech therapist). Hire date

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED	
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F 001	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) Continued From page 2 05/08/2021. No evidence that a license verification was obtained prior to hire. 7. OSM # 7, PT (physical therapist). Hire date 05/01/2021. No evidence that a license verification was obtained prior to hire. On 04/06/2022 at approximately 11:42 a.m. an interview was conducted with OSM # 1, business office manager. When asked to describe the prescreening procedures for new employees OSM # 1 stated that the license verification is obtained before they are hired, background checks within the 30 days of hire. When asked about the missing documentation for CNA #3 and CNA #4 OSM # 1 stated that they were unable to locate the employee records. OSM # 1 further stated the they did not save the original license verification for RN # 2, did not obtain the license verification prior to hire for CNA #3, OSM # 6 and OSM # 7 and unable to locate the criminal background check for OSM # 5. The facility's policy "Background Screening Investigations" documented in part, "Policy Interpretation Implementation. 2. The director of personnel, or designee, conducts background checks, reference checks and criminal conviction checks (including fingerprinting as may be required by state law) on all potential direct access employees and contractors. Background and criminal checks are initiated within 30 days of an offer of employment or contract agreement, and completed prior to employment. 3. For an individual applying for a position as a certified		F 001	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIAT DEFICIENCY)		4/19/22	
	OSM # 1 stated the obtained before the checks within the 3 about the missing CNA #4 OSM # 1 slocate the employe stated the they did verification for RN verification prior to OSM # 7 and unabbackground check The facility's policy Investigations" doc Interpretation Imple personnel, or design checks, reference checks (including frequired by state la access employees and criminal check an offer of employr and completed prior individual applying nursing assistant, to contacted to determ neglect, mistreatment of property have be	at the license verification is any are hired, background and documentation for CNA #3 and stated that they were unable to be records. OSM # 1 further not save the original license # 2, did not obtain the license hire for CNA #3, OSM # 6 and alle to locate the criminal for OSM # 5. "Background Screening tumented in part, "Policy tementation. 2. The director of gnee, conducts background checks and criminal conviction ingerprinting as may be aw) on all potential direct and contractors. Background is are initiated within 30 days of ment or contract agreement, or to employment. 3. For an					

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State of Virginia

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED							
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	On 04/06/2022 at approximately 5:00 p.m., ASM (administrative staff member) # 1, administrator, and ASM # 2, director of nursing, were made aware of the above findings.					8					
	No further information was provided prior to exit.										
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