

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>VA0208</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>04/08/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>PHEASANT RIDGE NURSING &amp; REHAB CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4355 PHEASANT RIDGE ROAD, SW ROANOKE, VA 24014</b>		
(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 04/06/21 through 04/08/21. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. Corrections were required.  The census in this 101 bed facility was 84 at the time of the survey. The survey sample consisted of 19 current 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: The facility was not in compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities.  Nursing Services 12 VAC 5-371-220 (B) - cross reference to F684  12 VAC 5-371-220 (A) (B) - cross reference to F689  Policies and Procedures 12 VAC 5-371-140 (E.3.b) Based on staff interview, facility document review, employee record review, and the Code of Virginia the facility staff failed to complete employee criminal background checks within 30 days of employment through the Virginia State Police for 9 of 25 new hires #2, #3, #5, #9, #10, #11, #12, #13, and #14.  The findings included:	F 001	1. All agency staff were immediately suspended and removed from the schedule. Background checks were begun and no agency staff were permitted to return to the facility until the background check was returned to the facility.  2. A review of all full time and part time employees was conducted on April 29, 2021 by the Human Resource Coordinator (HRC) and the Executive Director. No other employees were identified as being affected by the deficient practice.  3. The HRC or designee will complete a background check by the Virginia State Police for all agency employees prior to their scheduled work date.  4. The HRC or designee will monitor the agency employee hire records for 2 months. The findings will be discussed	4/30/21

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

Electronically Signed

TITLE

(X6) DATE

04/30/21

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F 001	<p>Continued From page 1</p> <p>The facility failed to obtain criminal background checks on agency staff employed at the facility through the Virginia State Police as required by the Code of Virginia.</p> <p>Excerpt from the Code of Virginia "Criminal Records-Employment Barrier Crimes-State law (§32.1-126.01 and 32.1-162.9:1 of the Code of Virginia) requires that each...nursing home...obtain a criminal record background check on new hires within 30 days of employment. The law requires that these background checks be obtained using the Central Criminal Records Exchange from the Virginia State Police."</p> <p>On 04/07/2021, (HR) human resource employee #1 stated that the agency used a third party vendor to obtain background checks and not the Virginia State Police.</p> <p>On 04/07/2021 at approximately 4:30 p.m., the (DON) director of nursing, (ADON) assistant director of nursing, and administrator were made aware of the issue regarding employee background checks not being completed through the Virginia State Police per the Code of Virginia.</p> <p>On 04/08/2021, the agency policy regarding screening of new employees was shared with the surveyor. This policy titled "New Hire Policy" read in part, "...This Policy and Procedure applies to all regular full time and part-time ____ employees. Where state or local law is stricter or conflicts with this policy, the state or local law will apply. Purpose- To properly maintain sufficient employment records for each clinical employee, consistent with state mandates and contract terms...Upon application, the following documents are reviewed and signed...Background Screening</p>	F 001	<p>and reviewed at the monthly QAPI Committee meeting.</p> <p>5. April 30, 2021.</p>	

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F 001	Continued From page 2  Information form..."  No further information regarding this issue was provided to the survey team prior to the exit conference.	F 001		