

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0210	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/17/2019
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NAME OF PROVIDER OR SUPPLIER ROSE HILL HEALTH AND REHAB	STREET ADDRESS, CITY, STATE, ZIP CODE 110 CHALMERS COURT BERRYVILLE, VA 22611
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F 000	<p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 1/15/19 through 1/17/19. Corrections are required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. The Life Safety Code survey/report will follow.</p> <p>The census in this 120 certified bed facility was 107 at the time of the survey. The survey sample consisted of 39 current record reviews and three closed record reviews.</p>	F 000		
F 001	<p>Non Compliance</p> <p>The facility was out of compliance with the following state licensure requirements:</p> <p>This RULE: is not met as evidenced by: 12 VAC 5 - 371 - 220 B cross references to Federal deficiency F 684.</p> <p>12VAC5-371-140. Policies and Procedures. Cross reference to F755 and F759</p> <p>12VAC5-371-200. Director of Nursing. Cross reference to F755 and F759</p> <p>12VAC5-371-210. Nurse Staffing. Cross reference to F759</p> <p>12VAC5-371-220. Nursing Services. Cross reference to F759</p> <p>12VAC5-371-250. Resident Assessment and Care Planning. Cross reference to F656</p> <p>12VAC5-371-300. Pharmaceutical Services. Cross reference to F755</p>	F 001		

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

TITLE

(X6) DATE

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F 001	<p>Continued From page 1</p> <p>Employee records state citation:</p> <p>Based on staff interview and facility document review it was determined that the facility staff failed to ensure a complete prescreening of new hires was conducted for 14 of 25 employee records reviewed.</p> <p>The findings include:</p> <p>A review of 25 employee records was conducted. These were of employees hired within the last 2 years up to survey date of 1/15/19. The following concerns were identified:</p> <p>(Abbreviations utilized: RN - Registered Nurse; LPN - Licensed Practical Nurse; CNA - Certified Nursing Assistant; OSM - Other Staff Member).</p> <ol style="list-style-type: none"> 1. For OSM #4 (a housekeeper) who was hired on 7/13/17, there were no reference checks. 2. For OSM #5 (a dietary staff) who was hired on 9/12/17, there were no reference checks. 3. For OSM #6 (a cook) who was hired on 9/22/18, there were no reference checks. 4. For CNA #5, who was hired on 8/22/18, there was no criminal record check directly from the Virginia State Police Criminal Records Exchange; and there were no reference checks. 5. For CNA #6, who was hired on 10/15/18, there were no reference checks. 6. For CNA #7, who was hired on 12/10/18, there were no reference checks. 7. For OSM #1 (Director of Social Services) who was hired on 2/19/18, there was no evidence of license verification at the time of hire from the licensing board website of the state in which she was licensed at that time. 	F 001		

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F 001	<p>Continued From page 2</p> <p>8. For CNA #8, who was hired on 8/1/18, there were no reference checks.</p> <p>9. For RN #3, who was hired on 10/24/18, there were no reference checks.</p> <p>10. For OSM #7 (a physical therapy assistant), who was hired on 11/26/18, there was no employee sworn statement at the time of hire.</p> <p>11. For CNA #9, who was hired on 5/2/18, there were no reference checks. In addition, the license verification was not conducted until 6/2/18. CNA #9 was in orientation with other staff until 5/22/18 but was working with residents. As of 5/22/18 and until the licensed was verified on 6/2/18, CNA #9 was working with residents independently. This occurred on 7 occasions between 5/22/18 and 6/2/18, without her licensed being verified.</p> <p>12. For RN #4 who was hired on 5/30/18, there were no reference checks.</p> <p>13. For CNA #10 who was hired on 6/13/18, there were no reference checks.</p> <p>14. For LPN #7, who was hired on 8/8/18, there were no reference checks.</p> <p>On 1/17/18 at 2:54 PM, OSM #2 (Human Resources) stated the above items were not done.</p> <p>A review of the facility policy, "Abuse Policies and Virginia Reportable Guidance" documented, "II. Screening: Persons applying for employment with Facility will be screened for a history of abuse, neglect, or mistreating residents to include: A. References from previous or current employers. B. Criminal Background check. C. Abuse check with appropriate licensing board and registries, prior to hire. D. Sworn Disclosure Statement prior to hire. E. Verify license or registration prior to hire."</p>	F 001		

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F 001	<p>Continued From page 3</p> <p>On 1/17/18 at 3:30 PM, the Executive Director and Director of Nursing (ASM (Administrative Staff Member) #1 and #2 respectively) were notified of the concern. No further information was provided by the end of the survey.</p> <p>Regulatory references:</p> <p>12VAC5-371-140. Policies and procedures. E. Personnel policies and procedures shall include, but are not limited to:</p> <p>3. An accurate and complete personnel record for each employee including:</p> <p>a. Verification of current professional license, registration, or certificate or completion of a required approved training course;</p> <p>b. Criminal record check</p> <p>Review of the state regulation 12VAC5-371-140 documents "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."</p> <p>12VAC5-371-150. Resident rights. A. The nursing facility shall develop and implement policies and procedures that ensure resident's rights as defined in §§32.1-138 and 32.1-138.1 of the Code of Virginia.</p> <p>Virginia Nursing Home Regulation 12VAC5-371-150 states that a facility must comply with the requirements of §32.1-126.01: Employment for compensation of persons convicted of certain offenses prohibited; criminal record checks required; suspension or revocation of license. "Any person desiring to work at a</p>	F 001		

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F 001	<p>Continued From page 4</p> <p>licensed nursing home shall provide the hiring facility with a sworn statement or affirmation disclosing any criminal convictions or any pending criminal charges...A nursing home shall, within 30 days of employment, obtain for any compensated employees an original criminal record clearance with respect to convictions for offenses specified in this section or an original criminal history record from the Central Criminal Records Exchange."</p> <p>The Code of Virginia (§ 32.1-126.01. Employment for compensation of persons convicted of certain offenses prohibited; criminal records check required; suspension or revocation of license.) requires "Any person desiring to work at a licensed nursing home shall provide the hiring facility with a sworn statement or affirmation disclosing any criminal convictions or any pending criminal charges, whether within or without the Commonwealth."</p> <p>State law (§§ 32.1-126.01 and 32.1-162.9:1 Employment for compensation of persons convicted of certain offenses prohibited; criminal records check required; suspension or revocation of license.) requires that each nursing facility, home care or home health organization, and hospice obtain a criminal record background check on new hires within 30 days of employment. The law also requires that these background checks be obtained using the Central Criminal Records Exchange from the Virginia Department of State Police. See Appendix 2 for a copy of each law.</p> <p>12VAC5-371-150. Resident Rights cross reference to F550.</p>	F 001		

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F 001	<p>Continued From page 5</p> <p>12VAC5-371-150. Resident Rights cross reference to F583.</p> <p>12VAC5-371-220. Nursing Services cross reference to F580.</p> <p>12VAC5-371-220. Nursing Services cross reference to F757.</p> <p>12VAC5-371-250. Resident Assessment and Care Planning cross reference to F641.</p> <p>12VAC5-371-300. Pharmaceutical Services cross reference to F761.</p> <p>12 VAC 5-371-200 Director of Nursing 12 VAC 5-371-200 (B)(1)(ii) Cross Reference to F658</p> <p>12 VAC 5-371-210 Nurse Staffing 12 VAC 5-371-210 (E) Cross Reference to 726</p> <p>12VAC5-371-140. Policies and Procedures.</p> <p>Based on staff interview and facility documentation review it was determined that the facility staff failed to keep a written record of an annual policy review.</p> <p>Facility staff failed to provide evidence of an annual policy review.</p> <p>The findings included:</p> <p>On 1/17/19 at approximately 4:27 p.m., an interview was conducted with ASM (administrative staff member) #1, the Executive Director. ASM #1 was asked if the facility had evidence of an</p>	F 001		

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F 001	<p>Continued From page 6</p> <p>annual review and revision of its policies, ASM #1 replied, "Just emergency preparedness policy but no others."</p> <p>On 1/17/19 at approximately 4:39 p.m., an interview was conducted with ASM #3, regional director of clinical services. ASM #3 was asked if the facility had evidence of annual review of its policies including its infection control and prevention program (IPCP), ASM #3 replied "I spoke to corporate and since the DON (director of nursing) and the administrator are new they have not been through an annual review of their policies including the IPCP and we don't know if the previous administrator did the annual review."</p> <p>On 1/17/18 at approximately 4:40 this surveyor was informed the facility could not locate a policy on annual policy review. The facility policy "Antibiotic Stewardship Program (ASP)" documented in part, "This policy, including the Procedure section, will be reviewed yearly to ensure that all objectives and conditions are being met, to streamline procedures and algorithms, and to identify opportunities for enhancement of the ASP"</p> <p>On 1/17/18 at approximately 4:41 p.m., ASM #1, ASM #2, the Director of Nursing and ASM #3 were made aware of the findings.</p> <p>No further information was provided prior to exit</p> <p>12VAC5-371-220. (B) cross references with Federal deficiency 695</p> <p>12VAC5-421-240. cross references with Federal deficiency 812</p>	F 001		

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F 001	Continued From page 7 12 VAC 5-371-180 (A) cross references with Federal deficiency 880	F 001		