

State of Virginia

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>VA0008</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br>C<br><b>06/07/2022</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>ASHLAND NURSING AND REHABILITATION</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>906 THOMPSON STREET<br/>ASHLAND, VA 23005</b> |
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| F 000              | <p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 6/5/22 through 6/7/22. Corrections are required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 190 certified bed facility was 137 at the time of the survey. The survey sample consisted of 40 current resident reviews and 4 closed record reviews.</p>  | F 000         | <p>12VAC5-371-220 (B) Nursing services<br/>Cross reference to F759.</p> <p>12VAC5-371-370 (A) Maintenance and housekeeping<br/>Cross reference to F584.</p> <p>12VAC5-371-140 (D) Policies and procedures.<br/>Cross reference to F645 and F745.</p>  |                    |
| 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:<br/>12VAC5-371-220 (B) Nursing services<br/>Cross reference to F759.</p> <p>12VAC5-371-370 (A) Maintenance and housekeeping<br/>Cross reference to F584.<br/>12VAC5-371-140 (D) Policies and procedures.<br/>Cross reference to F645 and F745.</p> <p>12VAC5-371-270 (A) Social services.<br/>Cross reference to F645 and F745.</p> <p>12VAC5-371-150 (A) Resident rights<br/>Cross reference to F551.</p> <p>Based on staff interview and facility document review, it was determined that the facility staff failed to:</p> <ol style="list-style-type: none"> <li>Evidence criminal background checks within 30 days of hire and/or from the Virginia State Police for 5 out of 25 staff;</li> <li>Obtain sworn statement, reference checks and</li> </ol> | F 001         | <p>12VAC5-371-270 (A) Social services.<br/>Cross reference to F645 and F745.</p> <p>12VAC5-371-150 (A) Resident rights<br/>Cross reference to F551.</p> <p>See completed POC for referenced tags</p> <p>12VAC5-371-140</p> <ol style="list-style-type: none"> <li>The Sworn statement for LPN #3 was obtained and placed in the employee record. The Background check for CNA#1 and OSM#7 Was obtained and placed in the employee record. The late background checks for CNA #3 and CNA #2 is noted.</li> </ol> |                    |

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

TITLE

(X6) DATE

*Adrian Straker*

*6/24/22*

State of Virginia

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| F 001              | <p>Continued From page 1</p> <p>primary source verification of current professional license in accordance with the laws of the State of Virginia, for one of 25 employee records reviewed.</p> <p>The total employee records that failed to evidence required documentation were 5 of 25 employee records reviewed.</p> <p>The findings include:</p> <p>On 6/7/22 at approximately 7:30 AM, the employee records for newly hired employees within the past two years were reviewed. Review of the employee records failed to produce evidence of criminal background checks within 30 days of hire and/or from the Virginia State Police for five out of 25 staff; sworn statement, reference checks and primary source verification of current professional license in accordance with the laws of the State of Virginia, for one of 25 employee records reviewed, The total employee records that failed to evidence required documentation are five of 25 records reviewed.</p> <p>The employees identified were:</p> <p>1. LPN (licensed practical nurse) #3 employee record documented they were hired as a LPN with the facility on 7/7/21. Further review of LPN #3's employee record failed to evidence a sworn statement, background check done within 30 days of hire by the Virginia State Police, primary source verification from the Virginia Department of Health Professionals for a licensed practical nurse and reference checks.</p> <p>2. CNA (certified nursing assistant) #1's employee record documented they were hired as a CNA with the facility on 10/1/21. Further review of CNA #1's employee record failed to evidence a</p> | F 001         | <p>The HR manager was educated on the requirements for onboarding staff, to include receiving sworn statements, obtaining a background checks and receiving primary source verification from the VA department of health Professionals.</p> <p>2. An audit of current employee files was conducted to ensure necessary requirements for onboarding have been obtained. All files that were lacking were corrected.</p> <p>3. Education was provided to the HR manager by the executive director on ensuring that the required onboard documentation and verifications have been obtained. The HR Manager will ensure written verification is obtained</p> |                    |

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| F 001              | <p>Continued From page 2</p> <p>background check done within 30 days of hire by the Virginia State Police.</p> <p>3. CNA #2's employee record documented they were hired as a CNA with the facility on 4/1/21. Further review of CNA #2's employee record failed to evidence a background check done within 30 days of hire by the Virginia State Police. A criminal background check was done on 4/20/22.</p> <p>4. CNA #3's employee record documented they were hired as a CNA with the facility on 3/25/21. Further review of CNA #3's employee record failed to evidence a background check done within 30 days of hire by the Virginia State Police. A criminal background check was done on 4/20/22.</p> <p>5. OSM (other staff member) #7's employee record documented they were hired as a housekeeper with the facility on 2/26/20. Further review of OSM #7's employee record failed to evidence a background check done within 30 days of hire by the Virginia State Police.</p> <p>An interview was conducted on 6/7/22 at 9:10 AM with OSM #6, the human resources coordinator. When asked when she started at the facility, OSM #6 stated, "I started in September 2021. I think they had been without human resources for a while and also had been through a couple of human resources coordinators also. Some of the sister facilities had tried to do some of the paperwork and keep up with it." When asked about LPN #3's file, OSM #6 stated, "It appears she was a rehire. I cannot find an old file. Just finding some miscellaneous information on her but I have nothing on her."</p> | F 001         | <p>from contractors of required documents on contracted staff at the time of start at the center.</p> <p>4. The HR Manager or designee will complete an audit of all New Hire documentation for the presence of required onboarding documentation Weekly x 12 Weeks. Results will be forwarded to the Monthly QA meeting for review and discussion.</p> | 7/12/22            |

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| F 001              | <p>Continued From page 3</p> <p>An interview was conducted on 6/7/22 at 9:50 AM, with OSM #6. When asked about CNA #1's file, OSM #6 stated, "There was some glitch and she was terminated in the system on 9/24/21 and rehired on 10/1/21." When shown paperwork that included hire date in 2019, and asked for the criminal background check from that hire, OSM #6 stated, "We do not have one." When asked about CNA's #2 file, OSM #6 stated, "I did some audits in April 2022 and found her file did not have a criminal background check and pulled the background check then." When asked about CNA's #3 file, OSM #6 stated, "I did some audits in April 2022 and found his file did not have a criminal background check and pulled the background check then." When asked about OSM's #7 file, OSM #6 stated, "We are working with their corporate office on the date."</p> <p>An interview was conducted on 6/7/22 at 1:20 PM with OSM #6. When asked about OSM #7's criminal background check, OSM #6 stated, "The Virginia State Police check was done outside of the 30 day window, because we were waiting for corporate to get results from national background check. I will need to speak to corporate about this to figure out process flow."</p> <p>On 6/7/22 at 2:45 PM, ASM (administrative staff member) #1, the administrator and ASM #2, the assistant director of nursing were made aware of the above concerns</p> <p>According to the facility's "Abuse, Neglect, Exploitation &amp; Misappropriation" policy with a revision date of 11/28/17, "Persons applying for employment with the center will be screened for a history of abuse, neglect, exploitation or misappropriation of resident property. This includes but not limited to: employment history,</p> | F 001         |   |                    |

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| F 001              | <p>Continued From page 4</p> <p>criminal background check, abuse check with appropriate licensing board and registries prior to hire. Sworn disclosure statement prior to hire, licensure/registration prior to hire, documentation of status of any disciplinary action form licensing or registration boards and other registries and information from former employers."</p> <p>The state regulation 12VAC5-371-140 revealed "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; c. Verification that the employee has reviewed or received a copy of the job description ..."</p> <p>No further information was provided prior to exit.</p> | F 001         |   |                    |