

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0069	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/28/2022
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NAME OF PROVIDER OR SUPPLIER COLONIAL HEIGHTS REHABILITATION AND NI	STREET ADDRESS, CITY, STATE, ZIP CODE 831 ELLERSLIE AVE CHESTERFIELD, VA 23834
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F 000	<p>Initial Comments</p> <p>An unannounced State Licensure Inspection was conducted 10/25/22 through 10/28/22. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. Three complaints were investigated during the survey as follows:</p> <p>VA00056556--Substantiated VA00056103--Substantiated VA00055763--Substantiated</p> <p>The census in this 196 licensed bed facility was 179 at the time of the survey. The survey sample consisted of 55 resident 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: 12VAC5-371-110 (B)(2) cross reference to F695 & F887 12VAC5-371-110 (J) cross reference to F883 12VAC5-371-220 (A) cross reference to F689 & F744 12VAC5-371-220 (D) cross reference to F677 12VAC5-371-250 (A)(12) cross reference to F641 12VAC5-371-200 (B)(1)(ii) cross reference to F658 12VAC5-371-200 (C)(4) cross reference to F677 12VAC5-371-220 (C)(1) cross reference to F686 12VAC5-371-220 (B) cross reference to F760 12VAC5-371-300 (B) cross reference to F761 12VAC5-371-340 (A) cross reference to F812</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>12VAC5-371-75(B)(1)</p> <p>Based on staff interview and facility documentation review, the facility staff failed to evidence a signed sworn statement, on or prior to hire, for 15 employees, Staff #2, #4, #6, #7, #8, #10, #12, #15, #16, #17, #19, #21, #23, #24, and #25, in a sample of 25 employee records reviewed.</p> <p>The findings included:</p> <p>The facility staff failed to obtain a sworn statement for Staff #2, #4, #6, #7, #8, #10, #12, #15, #16, #17, #19, #21, #23, #24, and #25.</p> <p>On 10/27/2022, a review of 25 employee personnel records was conducted and revealed the following:</p> <ol style="list-style-type: none"> Staff #2, a Certified Occupational Therapy Assistant (COTA) was hired on 6/16/2021. There was no sworn statement provided for Staff #2. Staff #4, Director of Social Services, was hired on 11/8/2021. There was no sworn statement provided for Staff #4. Staff #6, RN (registered nurse), was hired on 1/1/2021. There was no sworn statement provided for Staff #6. Staff #7, CNA (certified nursing assistant), was hired on 4/1/2021. There was no sworn statement provided for Staff #7. Staff #8, RN, was hired on 1/1/2021. There was no sworn statement provided for Staff #8. Staff #10, RN, was hired on 3/1/2022. There was no sworn statement provided for Staff #10. Staff #12, Dietitian, was hired on 1/2/2022. There was no sworn statement provided for Staff #12. Staff #15, CNA, was hired on 3/1/2022. There 	F 001		

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F 001	<p>Continued From page 2</p> <p>was no sworn statement provided for Staff #15.</p> <p>9. Staff #16, LPN (licensed practical nurse), was hired on 3/23/2022. There was no sworn statement provided for Staff #16.</p> <p>10. Staff #17, LPN, was hired on 7/25/2022. There was no sworn statement provided for Staff #17.</p> <p>11. Staff #19, RN, was hired on 12/6/2021. There was no sworn statement provided for Staff #19.</p> <p>12. Staff #21, RN, was hired on 1/3/2022. There was no sworn statement provided for Staff #21.</p> <p>13. Staff #23, LPN was hired on 1/1/2022. There was no sworn statement provided for Staff #23.</p> <p>14. Staff #24, LPN, was hired on 10/1/2022. There was no sworn statement provided for Staff #24</p> <p>15. Staff #25, CNA, was hired on 9/1/2021. There was no sworn statement provided for Staff #25.</p> <p>On 10/27/2022, the Human Resources (HR) Director was interviewed and stated she was newly hired at the facility two weeks prior to the beginning of the survey. The HR Director stated she was unable to find some of the documentation for the new hires. The HR Director confirmed the hire dates for the referenced facility staff members and stated, "I am unable to provide a sworn statement for those employees at this time".</p> <p>On 10/27/22, the Facility Administrator was informed of the findings. She stated, "Sworn statements are supposed to be obtained before a person is hired because they are saying that they do not have any criminal or legal issues that would keep them from working with the elderly."</p> <p>No further information was provided.</p>	F 001		

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F 001	<p>Continued From page 3</p> <p>12VAC5-371-75(B)(3)</p> <p>Based on staff interview and facility documentation review, the facility staff failed to obtain a criminal record report from the Virginia Department of State Police within 30 days of hire for 15 employees, Staff #2, #4, #6, #7, #8, #10, #12, #15, #16, #17, #19, #21, #23, #24, and #25, in a sample of 25 employee records reviewed.</p> <p>The facility staff failed to obtain a criminal background check within 30 days of hire for Staff #2, #4, #6, #7, #8, #10, #12, #15, #16, #17, #19, #21, #23, #24, and #25, in a sample of 25 employee records reviewed.</p> <p>The findings included:</p> <p>On 10/27/22, a review of 25 employee personnel records was conducted and revealed the following:</p> <ol style="list-style-type: none"> Staff #2, a Certified Occupational Therapy Assistant (COTA) was hired on 6/16/2021. There was no criminal background check provided for Staff #2. Staff #4, Director of Social Services, was hired on 11/8/2021. There was no criminal background check provided for Staff #4. Staff #6, RN (registered nurse), was hired on 1/1/2021. There was no criminal background check provided for Staff #6. Staff #7, CNA (certified nursing assistant), was hired on 4/1/2021. There was no criminal background check provided for Staff #7. Staff #8, RN, was hired on 1/1/2021. There was no criminal background check provided for Staff #8. Staff #10, RN, was hired on 3/1/2022. There was no criminal background check provided for 	F 001		

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F 001	<p>Continued From page 4</p> <p>Staff #10. 7. Staff #12, Dietitian, was hired on 1/2/2022. There was no criminal background check provided for Staff #12. 8. Staff #15, CNA (certified nursing assistant), was hired on 3/1/22. There was no criminal background check provided for Staff #15. 9. Staff #16, LPN (licensed practical nurse), was hired on 3/23/2022. There was no criminal background check provided for Staff #16. 10. Staff #17, LPN, was hired on 7/25/2022. There was no criminal background check provided for Staff #17. 11. Staff #19, RN, was hired on 12/6/2021. There was no criminal background check provided for Staff #19. 12. Staff #21, RN, was hired on 1/3/2022. There was no criminal background check provided for Staff #21. 13. Staff #23, LPN was hired on 1/1/2022. There was no criminal background check provided for Staff #23. 14. Staff #24, LPN, was hired on 10/1/2022. There was no criminal background check provided for Staff #24. 15. Staff #25, CNA, was hired on 9/1/2021. There was no criminal background check provided for Staff #25.</p> <p>On 10/27/2022, the Human Resources (HR) Director was interviewed and stated she was newly hired at the facility two weeks prior to the beginning of the survey. The HR Director stated she was unable to find some of the documentation for the new hires. The HR Director confirmed the hire dates for the referenced facility staff members and stated, "I am unable to provide a copy of the criminal background checks for those employees at this time".</p>	F 001		

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F 001	<p>Continued From page 5</p> <p>The Administrator was informed of the findings during the end of day debriefing.</p> <p>No further information was provided.</p> <p>12 VAC 5-371-210 (F)(1)</p> <p>Based on staff interview and facility documentation review, the facility staff failed to verify the professional license, prior to providing direct resident care, for 2 certified nursing assistants (CNAs), Staff #15 and #25, in a sample of 7 staff CNA personnel records reviewed.</p> <p>The facility staff failed to verify the CNA license was active and in good standing with the state licensing board for Staff #15, and #25, prior to allowing them to provide direct resident care.</p> <p>The findings included:</p> <p>On 10/27/22, a review of 7 staff CNA personnel records was conducted with the Human Resources Director and revealed the following:</p> <ol style="list-style-type: none"> Staff #15 was hired on 4/21/22. Staff #15's CNA license verification was not verified by the facility dated 8/21/22. Therefore, from 4/21/22 through 8/21/22, facility staff was unaware if Staff #15 was an active, licensed CNA and in good standing with the state licensing board. Staff #15 was permitted to provide direct care to Residents. Staff #25 was hired on 9/1/21. There was no CNA license verification provided by facility staff. Therefore, from 9/1/21 through the date of 	F 001		

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F 001	<p>Continued From page 6</p> <p>survey, facility staff was unaware if Staff #25 was an active, licensed CNA and in good standing with the state licensing board. Staff #25 was permitted to provide direct care to Residents.</p> <p>On 10/27/22, the Facility Administrator was informed of the findings. She stated, "We obtain verifications for anyone who holds a professional license, to be sure they are qualified to provide the proper care to our residents and that their license is free from any disciplinary actions by the State [licensing board]."</p> <p>No further information was provided.</p> <p>12VAC5-371-210 (E)</p> <p>Based on staff interview and facility documentation review, the facility staff failed to verify the professional license, prior to providing direct resident care, for 4 nurses, Staff #10 (RN), Staff #19 (RN) and Staff #21 (RN) and Staff #16 (LPN), in a sample of 11 staff nurse personnel records reviewed.</p> <p>The findings included:</p> <p>The facility staff failed to verify the professional license was active and in good standing for 4 nurses, Staff #10 (RN (registered nurse), Staff #19 (RN) and Staff #21 (RN) and Staff #16 (LPN (licensed practical nurse) prior to allowing them to provide direct resident care.</p> <p>On 10/27/22, a review of staff nursing records was conducted with the Human Resources Director with the following results:</p>	F 001		

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F 001	<p>Continued From page 7</p> <ol style="list-style-type: none"> 1. Staff #10 (RN) was hired on 3/1/22. There was no professional license verification for Staff #10 until 8/12/2022. 2. Staff #19 (RN) was hired on 12/6/21. There was no professional license verification for Staff #19 until 8/12/2022. 3. Staff #21 (RN) was hired on 1/3/22. There was no professional license verification for Staff #21 even at the time of survey. 4. Staff #16 (LPN) was hired on 3/23/22. There was no professional license verification for Staff #16 until 8/12/2022. <p>The Human Resources (HR) Director who confirmed the findings. The HR Director stated, "The purpose of obtaining a license verification is to make sure that we are hiring qualified people to take care of our residents and to ensure there is no disciplinary action on their license."</p> <p>On 10/27/22, the Facility Administrator was informed of the findings. She stated, "We obtain verifications for anyone who holds a professional license, to be sure they are qualified to provide the proper care to our residents and that their license is free from any disciplinary actions by the State [licensing board]."</p> <p>No further information was provided.</p>	F 001		