

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0012	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 02/23/2023
NAME OF PROVIDER OR SUPPLIER AUTUMN CARE OF MADISON		STREET ADDRESS, CITY, STATE, ZIP CODE NUMBER ONE AUTUMN COURT MADISON, VA 22727			
(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 2/21/2023 through 2/23/2023. Corrections are required with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. The census in this 92 certified bed facility was 71 at the time of the survey. The survey sample consisted of 24 current resident reviews and four closed record 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: 12VAC5-371-110 (B.2), (B.3). Management and administration. Cross reference to F625. 12VAC5-371-140 (A) Policies and procedures. Cross reference to F695, F698. 12VAC5-371-150 (A), (B.1). Resident rights. Cross reference to F623 & F625. 12 VAC5-371-180 (A). Infection control. Cross reference to F880. 12VAC5-371-210 (A.2). Nurse staffing. Cross reference to F695. 12VAC5-371-210 (A.3). Nurse staffing. Cross reference to F657. 12VAC5-371-220 (A), (B). Nursing services. Cross reference to F684, F686 & F697.	F 001	12VAC5-371-75. Criminal Records Check. (1) Corrective Action(s) Human Resources has been in-serviced on the requirement of conducting a criminal background check prior to any potential employee being hired at Autumn Care of Madison. (2) Identification of Deficient Practice(s) and Corrective Action(s): Current residents have the potential to be affected by this deficient practice. A 100% audit of all employee files will be conducted. All discrepancies will be corrected at the time of discovery. (3) Systematic Change(s) The facility policy and procedure has been		3/28/23

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

Electronically Signed

TITLE

(X6) DATE

03/09/23

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F 001	<p>Continued From page 1</p> <p>12VAC5-371-220 (D). Nursing services. Cross Reference to F687.</p> <p>12VAC5-371-220 (H). Nursing services. cross reference to F580.</p> <p>12VAC5-371-250 (A), (F). Resident assessment and care planning. Cross reference to F657.</p> <p>12VAC5-371-250 (A.6) Resident assessment and care planning. Cross reference to F641.</p> <p>1) 12VAC5-371-75. Criminal Records Check.</p> <p>Based on staff interview and facility document review, it was determined that the facility staff failed to evidence criminal records check and/or sworn disclosure in accordance with the laws of the State of Virginia, for one of 25 employee records reviewed.</p> <p>The findings include:</p> <p>On 2/22/2023 at approximately 8:00 a.m., the facility provided employee records for a selected sample of 25 employees that were hired within the past two years for review. Review of the employee records failed to evidence a sworn statement and a Virginia State Police criminal background check for one of the 25 records reviewed for the most recent re-hire date.</p> <p>CNA (certified nursing assistant) #2's employee record was reviewed. CNA #2's employee record documented they were hired as a CNA on 1/28/2022. Further review of CNA #2's employee record evidenced a sworn statement dated</p>	F 001	<p>reviewed and no changes are warranted at this time. Human Resources will be in-serviced by the Administrator on the requirements of conducting background checks prior to hire.</p> <p>(4) Monitoring The Administrator will audit all new hire paperwork for 12 weeks to ensure all criminal background checks have been properly conducted in a timely manner along with paperwork.</p> <p>12VAC5-371-140 (A) (E.3). Policies and Procedures. (1) Corrective Action(s): Human Resources has been in-serviced on the policy and procedure for conducting background checks including Sams, OIG, reference checks prior to hire as well as ensuring exclusion attestation is signed properly. (2) Identification of Deficient Practice(s) and Corrective Action(s): Current residents have the potential to be affected by this deficient practice. A 100% audit of all employee files will be conducted. All discrepancies will be corrected at the time of discovery. (3) Systemic Change(s): The facility policy and procedure has been reviewed and no changes are warranted at this time. Human Resources will be in-serviced by the Administrator on the requirements of conducting background checks prior to hire. (4) Monitoing: The Administrator will audit all new hire</p>	

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F 001	<p>Continued From page 2</p> <p>7/13/2020 and a Virginia State Police background check dated 7/13/2020.</p> <p>On 2/22/2023 at 2:10 p.m., an interview was conducted with OSM (other staff member) #2, human resources/payroll. OSM #2 stated that they had been in their position for about a year and CNA #2 was re-hired by the previous human resource staff. OSM #2 stated that CNA #2 had worked at the facility previously in 2020 and had left and was re-hired on 1/28/2022. OSM #2 stated that they were unable to find the current file for the re-hire and only had access to that file. OSM #2 stated that the previous human resource staff had kept separate files and they had only been able to find the original hire file. OSM #2 stated that their process for hiring new staff was to get the application with the sworn statement completed and then interview the applicant. OSM #2 stated that after the applicant accepted the offer they obtained the background check, checked the license if applicable and obtained references the same day and made a single file that they kept in the human resource office. OSM #2 stated that they would continue to look for the 1/28/2022 employee file for CNA #2.</p> <p>On 2/22/2023 at 4:47 p.m., ASM (administrative staff member) #1, the administrator, ASM #2, the director of nursing, ASM #3, the assistant director of nursing/infection preventionist, ASM #4, the business office manager/administrator in training and ASM #5, the regional director of clinical services were asked to assist in locating the employee file with the sworn statement and background check for the re-hire of CNA #2 on 1/28/2022.</p> <p>On 2/23/2023 at 10:00 a.m., OSM #2 stated that</p>	F 001	<p>paperwork for 12 weeks to ensure all proper paperwork has been completed.</p>		

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F 001	<p>Continued From page 3</p> <p>they were unable to locate the employee file for CNA #2 for the re-hire on 1/28/2022. OSM #2 stated that they had attempted to contact the Virginia State Police to get evidence of the background check however they were told that they do not keep the checks after 90 days.</p> <p>The facility policy "Virginia Resident Abuse Policy" effective May 2008, Revised 10/03/2022, documented in part, "...It is the policy of the Facility to undertake background checks of all employees and to retain on file applicable records of current employees regarding such checks...Conduct a criminal background check in accordance with State law and Facility policy...This Facility will generally require that all potential employees certify as part of the employment application process that they have not been convicted of an offense or otherwise been found guilty of an offense that would preclude employment in a nursing facility..."</p> <p>On 2/23/2023 at 11:12 a.m., ASM #1, the administrator, ASM #2, the director of nursing, and ASM #5, the regional director of clinical services were made aware of the concern. No further information was provided prior to exit.</p> <p>2) 12VAC5-371-140 (A) (E.3). Policies and Procedures.</p> <p>Based on staff interview and facility document review, it was determined that the facility staff failed to evidence an accurate employee personnel record including a criminal record check or perform reference checks in accordance with the laws of the State of Virginia, for one of 25 employee records reviewed.</p> <p>The findings included:</p>	F 001			

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F 001	<p>Continued From page 4</p> <p>CNA (certified nursing assistant) #2's employee record was reviewed. CNA #2's employee record documented they were hired as a CNA with the facility on 1/28/2022. Further review of CNA #2's employee record evidenced a Virginia State Police background check dated 7/13/2020 and reference checks dated 7/15/2020.</p> <p>On 2/22/2023 at 2:10 p.m., an interview was conducted with OSM (other staff member) #2, human resources/payroll. OSM #2 stated that they had been in their position for about a year and CNA #2 was re-hired by the previous human resource staff. OSM #2 stated that CNA #2 had worked at the facility previously in 2020 and had left and was re-hired on 1/28/2022. OSM #2 stated that they were unable to find the current file for the re-hire and only had access to that file. OSM #2 stated that the previous human resource staff had kept separate files and they had only been able to find the original hire file. OSM #2 stated that their process for hiring new staff was to get the application with the sworn statement completed and then interview the applicant. OSM #2 stated that after the applicant accepted the offer they obtained the background check, checked the license if applicable and obtained references the same day and made a single file that they kept in the human resource office. OSM #2 stated that they would continue to look for the 1/28/2022 employee file for CNA #2.</p> <p>On 2/22/2023 at 4:47 p.m., ASM (administrative staff member) #1, the administrator, ASM #2, the director of nursing, ASM #3, the assistant director of nursing/infection preventionist, ASM #4, the business office manager/administrator in training and ASM #5, the regional director of clinical services were asked to assist in locating the</p>	F 001			

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F 001	<p>Continued From page 5</p> <p>employee file with the background check and reference checks for the re-hire of CNA #2 on 1/28/2022.</p> <p>On 2/23/2023 at 10:00 a.m., OSM #2 stated that they were unable to locate the employee file for CNA #2 for the re-hire on 1/28/2022. OSM #2 stated that they had attempted to contact the Virginia State Police to get evidence of the background check however they were told that they do not keep the checks after 90 days.</p> <p>The facility policy "Virginia Resident Abuse Policy" effective May 2008, Revised 10/03/2022, documented in part, "...The Facility will do the following prior to hiring a new employee: i. Generally attempt to obtain references from 2 prior employers for an applicant..."</p> <p>On 2/23/2023 at 11:12 a.m., ASM #1, the administrator, ASM #2, the director of nursing, and ASM #5, the regional director of clinical services were made aware of the concern. No further information was provided prior to exit.</p>	F 001			