

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0193	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/08/2023
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NAME OF PROVIDER OR SUPPLIER RICHFIELD HEALTH CENTER - SALEM	STREET ADDRESS, CITY, STATE, ZIP CODE 3719 KNOLLRIDGE ROAD SALEM, VA 24153
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(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	<p>Initial Comments</p> <p>An unannounced biennial State Licensure Inspection was conducted 02/06/2023 through 02/08/2023. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 112 bed facility was 105 at the time of the survey. The survey sample consisted of 23 current Resident reviews and 3 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: The facility was not in compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>Infection Control 12VAC 5-371-180 (A)(B)(C.7)-cross reference to F880</p> <p>Nursing Services 12VAC 5-371-220(B)(D)-cross reference to F677 and F757</p> <p>Resident Assessment and Care Planning 12VAC 5-371-250-cross reference to F657</p> <p>Staff Development and Inservice Training 12VAC 5-371-260(F)(G)-cross reference to F947</p> <p>Diagnostic Services 12VAC 5-371-310(A)-cross reference to F770</p>	F 001	<p>Staff member #3's and #9's background checks were completed on 2/7/22, no issue was identified on either background check. HR or designee will attempt to obtain reference checks on staff members, #1, #2, #3, #6, #7, #9, #10, #16 and #17. In the event of negative reference, a referral will be sent to the Administrator and Corp. HR for review.</p> <p>STEP 2 All new hired employees have the potential to be affected by the deficient practice.</p> <p>STEP 3 The HR staff will be educated on the importance of obtaining background checks and</p>	3/22/23

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

TITLE

(X6) DATE

Electronically Signed

03/03/23

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F 001	<p>Continued From page 1</p> <p>Maintenance and Housekeeping 12VAC 5-371-370(A)(G)-cross reference to F584</p> <p>Policies and Procedures. 12 VAC 5-371-140 (E.3.a and b.) Cross reference to F tag 607</p> <p>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 2 of 25 new hires, #3 and #9 and failed to obtain a sworn statement for new hire #12.</p> <p>The findings included:</p> <p>For new hires #3 and #9 background checks were not completed until 02/07/23. New hire #3's date of employment was documented as 11/14/22 and #9's as 08/15/22. A review of the results obtained on 02/07/23 indicating there was no issue with either employees background check.</p> <p>New hire #12 was listed as a household homemaker their employee file did not include a sworn statement. A criminal background check was completed on 06/07/22 and did not include any identifiable records.</p> <p>Per the Code of Virginia § 32.1-126.01. 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 outside the Commonwealth.</p> <p>A nursing home shall, within 30 days of employment, obtain for any compensated employees an original criminal record clearance</p>	F 001	<p>reference checks per the facility policy on newly hired employees.</p> <p>STEP 4 Corporate HR or designee will audit 25% of new hired employee files to ensure background checks and reference checks were completed, prior to the start of their first assigned shift. The audits will be completed monthly x 3 months. And discrepancies noted will be corrected immediately.</p> <p>The audits will be tracked and trended and presented to QAPI for additional guidance and input. Compliance Date 3/22/23</p>	

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F 001	<p>Continued From page 2</p> <p>with respect to convictions for offenses specified in this section or an original criminal history record from the Central Criminal Records Exchange.</p> <p>02/08/23, the facility staff provided the surveyor with a copy of a document titled, Hiring Process. This document read in part, "...All candidates for employment and any new positions should proceed through the hiring process according to these guidelines ...Human Resources ...Perform Background checks and Reference check ...Unsatisfactory results of the background check, references...should be discussed with the Administrator..."</p> <p>02/08/23 11:20 a.m., HR #1 stated the employees that would have completed the employee files were no longer employed at the facility and they completed 2 criminal background checks yesterday (02/07/23) and identified these employees as new hire #3 and #9.</p> <p>02/08/23 12:25 p.m., the Administrator and DON made aware of the issues regarding employee records (new hires).</p> <p>No further information regarding this issue was provided to the survey team prior to the exit conference.</p>	F 001		