

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0282	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/29/2023
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NAME OF PROVIDER OR SUPPLIER YORK NURSING & REHABILITATION CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 113 BATTLE ROAD YORKTOWN, VA 23692
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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 6/13/23 through 6/15/23. The facility was not in compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 80 licensed bed facility was 77 at the time of the survey. The survey sample consisted of 44 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: 12 VAC 5-371-220 (H). Please cross reference to F580.</p> <p>COV 32.1-138 (A)(8). Please cross reference to F600.</p> <p>12 VAC 5-371-200 (B)(1)(ii). Please cross reference to F658.</p> <p>12 VAC 5-371-220 (D). Please cross reference to F677.</p> <p>12 VAC 5-371-300 (B). Please cross reference to F761.</p> <p>12 VAC 5-371-340 (A). Please cross reference to F812.</p> <p>12 VAC 5-371-110 (J). Please cross reference to F883.</p> <p>12 VAC 5-371-140 (A). Please cross reference to</p>	F 001	<p>Please see the corresponding F-Tags listed, if applicable, for the detailed plan of correction for each of the state licensure requirements listed below:</p> <p>12 VAC 5-371-220 (H). Please cross referenceto F580.</p> <p>COV 32.1-138 (A)(8). Please cross reference toF600.</p> <p>12 VAC 5-371-200 (B)(1)(ii). Please crossreference to F658.</p> <p>12 VAC 5-371-220 (D). Please cross referenceto F677.</p> <p>12 VAC 5-371-300 (B). Please cross referenceto F761.</p> <p>12 VAC 5-371-340 (A). Please cross referenceto F812.</p> <p>12 VAC 5-371-110 (J). Please cross referenceto F883.</p> <p>VAC 5-371-140 (A). Please cross referenceto F943.</p>	8/13/23

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

Electronically Signed

TITLE

(X6) DATE

07/18/23

State of Virginia

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F 001	<p>Continued From page 1</p> <p>F943.</p> <p>12VAC5-371-130(B)(1) Based on staff interview and facility documentation review, the facility staff failed to ensure that the facility Administrator held a current and unencumbered license, for 1 employee (Staff #5), in a sample of 25 employee records reviewed.</p> <p>The findings included:</p> <p>For Staff #5, the facility staff failed to verify with the state licensing board that Staff #5 held a current and unencumbered license to practice as a nursing home administrator prior to employment.</p> <p>On 6/14/23, a review of the employee records submitted was conducted. This review revealed that Staff #5 was hired as a nursing home administrator on 6/28/21. The facility submitted evidence that the professional license for Staff #5 was verified on 2/14/23.</p> <p>On 6/15/23 at 10:44 AM, a telephone interview was conducted with the off-site human resources representative (Employee K). Employee K stated that the recruitment department handles the verification of professional licenses prior to employment to ensure the person holds an active license. Employee K provided the cell phone number of Employee L, who is the recruitment department employee.</p> <p>On 6/15/23 at 10:58 AM, a telephone call was placed to Employee L and a voicemail was left requesting a return call. No return call was received.</p>	F 001	<p>12 VAC5-371-130(B)(1)</p> <ol style="list-style-type: none"> As part of the quality assurance process, it was found there was not printed confirmation from the state licensing board for Staff #5 in the personnel file. It was checked, printed, and placed in the file on 2/14/2023. The Staff #5's license was reverified on 7/12/2023 to ensure it was still current and unencumbered. There are no other employees that hold this license. Education on pre-employment license verification from the state licensing board was provided to multiple team members to include staffing, recruiting, human resources, and administration The Vice President of Quality/designee will review the employee files in the event there is a newly hired Administrator within the next 60 days to ensure the administrator has a current and unencumbered license from the state licensing board prior to employment and it was printed, and placed in the file. Patterns or trends will be reported to the Quality Assessment and Assurance Committee. Date of compliance will be August 13, 2023. 	

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F 001	<p>Continued From page 2</p> <p>On 6/15/23 at approximately 11:15 AM, Surveyor C met with the facility Administrator. The facility Administrator was asked to explain the purpose of professional license verification. The administrator said, "We need to do license verification to ensure they have the appropriate license or certification for the role and also because it is a regulation".</p> <p>During the above interview, the facility Administrator was made aware that the facility submitted evidence that Staff #5's professional license had not been verified prior to employment.</p> <p>On the afternoon of 6/15/23, the facility administrator provided a facility policy with regards to "Personnel Records". This policy was reviewed, and it stated, "Contents of Personnel File: ... Copy of License and Verifications (if applicable) ...".</p> <p>The facility submitted no additional information prior to the conclusion of the survey on 6/15/23 at approximately 6 PM.</p> <p>12VAC5-371-210(E) Based on staff interview and facility documentation review, the facility staff failed to ensure that nurses working were appropriately qualified to perform tasks assigned for 1 nurse (Staff #15), in a sample of 25 employee records reviewed.</p> <p>The findings included:</p> <p>For Staff #15, the facility staff failed to verify with</p>	F 001	<p>12 VAC5-371-210(E)</p> <ol style="list-style-type: none"> As part of the quality assurance process, it was found there was not printed confirmation from the state licensing board of Staff #15's license in the personnel file prior to employment. It was checked, printed, and placed in the file on 04/29/2023. Pre-employment licensure verifications were checked on 100% of currently employed RNs and LPNs that have been hired since January 1, 2023 to ensure they had a current and unencumbered license from the state licensing board. Any variances were immediately corrected. Education on pre-employment license verification from the state licensing board was provided to multiple team members to include staffing, recruiting, human resources, and administration The Assistant Administrator/designee will review 100% of all newly hired personnel files for LPN/RN's weekly for 8 weeks to ensure each new hire has a pre-employment licensure verification from the state licensing agency that confirms it is current and unencumbered. Patterns or trends will be reported to the Quality Assessment and Assurance Committee. Date of compliance will be August 13, 2023. 	

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F 001	<p>Continued From page 3</p> <p>the state licensing board that Staff #15 held a current and unencumbered license to practice as a registered nurse (RN).</p> <p>On 6/14/23, a review of the employee records submitted was conducted. This review revealed that Staff #15 was hired as a RN on 11/15/21. The facility submitted evidence that the professional nursing license for Staff #15 was verified on 4/29/23.</p> <p>On 6/15/23 at 10:44 AM, a telephone interview was conducted with the off-site human resources representative (Employee K). Employee K stated that the recruitment department handles the verification of professional licenses prior to employment to ensure the person holds an active license. Employee K provided the cell phone number of Employee L, who is the recruitment department employee.</p> <p>On 6/15/23 at 10:58 AM, a telephone call was placed to Employee L and a voicemail was left requesting a return call.</p> <p>On 6/15/23 at approximately 11:15 AM, Surveyor C met with the facility Administrator. The facility Administrator was asked to explain the purpose of professional license verification. The administrator said, "We need to do license verification to ensure they have the appropriate license or certification for the role and also because it is a regulation".</p> <p>During the above interview, the facility Administrator was made aware that the facility submitted evidence that Staff #15's professional nursing license had not been verified until 4/29/23, despite the employee being hired and having worked in the role of an RN since</p>	F 001	<p>12 VAC5-371-210(F)(1)</p> <ol style="list-style-type: none"> As part of the quality assurance process, it was found there was not printed confirmation from the state licensing board of Staff #11s license in the personnel file prior to employment. It was checked, printed, and placed in the file on 03/16/2023. Pre-employment licensure verifications were checked on 100% of currently employed CNA's that have been hired since January 1, 2023 to ensure they had a current and unencumbered license from the state licensing board. Any variances were immediately corrected. Education on pre-employment license verification from the state licensing board was provided to multiple team members to include staffing, recruiting, human resources, and administration The Assistant Administrator/designee will review 100% of all newly hired personnel files for CNA's weekly for 8 weeks to ensure each new hire has a pre-employment licensure verification from the state licensing agency that confirms it is current and unencumbered. Patterns or trends will be reported to the Quality Assessment and Assurance Committee. 	

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F 001	<p>Continued From page 4</p> <p>11/15/21.</p> <p>On the afternoon of 6/15/23, the facility administrator provided a facility policy with regards to "Personnel Records". This policy was reviewed, and it stated, "Contents of Personnel File: ... Copy of License and Verifications (if applicable) ...".</p> <p>The facility submitted no additional information prior to the conclusion of the survey on 6/15/23 at approximately 6 PM.</p> <p>12VAC5-371-210(F)(1) Based on staff interview and facility documentation review, the facility staff failed to ensure that direct care staff working were appropriately qualified to perform tasks assigned, for 1 employee (Staff #11), in a sample of 25 employee records reviewed.</p> <p>The findings included:</p> <p>For Staff #11, the facility staff failed to verify with the state licensing board that Staff #11 held a current and unencumbered certification to work as a certified nursing assistant (CNA).</p> <p>On 6/14/23, a review of the employee records submitted was conducted. This review revealed that Staff #11 was hired as a CNA on 5/31/22. The facility submitted evidence that the professional nursing certification for Staff #11 was verified on 3/16/23.</p> <p>On 6/15/23 at 10:44 AM, a telephone interview was conducted with the off-site human resources representative (Employee K). Employee K stated</p>	F 001	<p>5. Date of compliance will be August 13, 2023.</p> <p>12VAC5-371-260(B)(1-11)</p> <ol style="list-style-type: none"> Employee #28 finished 12 hours of annual inservice training 07/11/2023. A written record of this training was placed in personnel file. All current employees were audited to ensure each employee had written records confirming they had received the required annual in-service training. Any variances identified were immediately corrected and the training provided. The Director of Education in-serviced the facility management team on importance of ensuring that employees receive the required annual in-service training and maintaining a written record of the training. Director of Nursing/designee will review the Education and Training Records for 10 employees weekly for eight weeks to ensure they received the required in-service and training. Patterns or trends will be reported to the Quality Assessment and Assurance Committee. 	

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F 001	<p>Continued From page 5</p> <p>that the recruitment department handles the verification of professional licenses prior to employment to ensure the person holds an active license. Employee K provided the cell phone number of Employee L, who is the recruitment department employee.</p> <p>On 6/15/23 at 10:58 AM, a telephone call was placed to Employee L and a voicemail was left requesting a return call.</p> <p>On 6/15/23 at approximately 11:15 AM, Surveyor C met with the facility Administrator. The facility Administrator was asked to explain the purpose of professional license verification. The administrator said, "We need to do license verification to ensure they have the appropriate license or certification for the role and also because it is a regulation".</p> <p>During the above interview, the facility Administrator was made aware that the facility submitted evidence that Staff #11's CNA certification had not been verified until 3/16/23, despite the employee being hired and having worked in the role of a CNA since 5/31/22.</p> <p>On the afternoon of 6/15/23, the facility administrator provided a facility policy with regards to "Personnel Records". This policy was reviewed, and it stated, "Contents of Personnel File: ... Copy of License and Verifications (if applicable) ...".</p> <p>The facility submitted no additional information prior to the conclusion of the survey on 6/15/23 at approximately 6 PM.</p>	F 001	5. Date of compliance will be August 13, 2023.	
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F 001	<p>Continued From page 6</p> <p>12VAC5-371-260(B)(1-11) Based on staff interview and facility documentation review, the facility staff failed to ensure employees received annual in-service training for 1 employee, (Employee #28), in a sample of 5 employee training records.</p> <p>The findings included:</p> <p>For Employee #28, the facility staff failed to provide any evidence of annual in-service training.</p> <p>On 6/14/23, Surveyor C selected a sample of 5 employees to review for the annual in-service training requirements. The facility Administrator was asked to provide in-service training for each of the employees.</p> <p>On the afternoon of 6/14/23, the facility administrator submitted training records for 4 of the 5 employees being sampled. The Administrator stated they were still looking for Employee #28's records.</p> <p>On the morning of 6/15/23, the facility Administrator acknowledged they were still trying to pull together Employee #28's training records.</p> <p>On 6/15/23 at 12:15 PM, the facility administrator was asked to provide the facility policy with regards to annual training needs of staff. The Administrator let the survey team know they do not have a policy with regards to annual in-service/training of facility staff.</p> <p>No further information was provided.</p>	F 001		