

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/18/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 49G002	(X2) MULTIPLE CONSTRUCTION A. BUILDING 15, 17, 18, 19, 23, 24, 40, 77, A2 B. WING _____		(X3) DATE SURVEY COMPLETED R 08/03/2016
NAME OF PROVIDER OR SUPPLIER CENTRAL VIRGINIA TRAINING CENT			STREET ADDRESS, CITY, STATE, ZIP CODE 521 COLONY RD MADISON HEIGHTS, VA 24572		
(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) COMPLETION DATE	
{K 000}	<p>INITIAL COMMENTS</p> <p>Description of Structure: Building 15 is a two story masonry structure with a wood framed, pitched roof. The roof area is separated from the structure by a rated concrete slab and is protected by a dry sprinkler system. The building was constructed in 1958.</p> <p>Construction Type: II (222)</p> <p>Sprinkler status: Partially Sprinklered building, Dry System in the Attic, Pre-action System in the elevator shafts, Wet System in building lobbies and lobby storage rooms on both levels.</p> <p>An unannounced Life Safety Code revisit to the standard survey conducted on 6/17/16 was conducted on 8/3/16, in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.</p> <p>Corrected deficiencies are shown on the 2567B form.</p> <p>Description of Structure: Building 17 is a two story masonry structure with a partial basement, where offices are located. The building has a wood framed, pitched roof. The roof area is separated from the structure by a rated concrete slab and is protected by a dry sprinkler system. The building was constructed in 1958.</p> <p>Construction Type: II (222)</p>	{K 000}			

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

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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{K 000}	<p>Continued From page 1</p> <p>Sprinkler status: Partially Sprinklered building, Dry System in the Attic, Pre-action System in the elevator shafts, Wet System in building lobbies and lobby storage rooms on both levels.</p> <p>An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.</p> <p>Description of Structure: Building 18 is a two story masonry structure with a partial basement, where offices are located. The building has a wood framed, pitched roof. The roof area is separated from the structure by a rated concrete slab and is protected by a dry sprinkler system. The building was constructed in 1958.</p> <p>Construction Type: II (222)</p> <p>Sprinkler status: Partially Sprinklered building, Dry System in the Attic, Pre-action System in the elevator shafts, Wet System in building lobbies and lobby storage rooms on both levels.</p> <p>An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID</p>	{K 000}			

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{K 000}	Continued From page 2 residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid. Description of Structure: Building 19 is a two story masonry structure with a partial basement, where offices are located. The building has a wood framed, pitched roof. The roof area is separated from the structure by a rated concrete slab and is protected by a dry sprinkler system. The building was constructed in 1958. Construction Type: II (222) Sprinkler status: Partially Sprinklered building, Dry System in the Attic, Pre-action System in the elevator shafts, Wet System in building lobbies and lobby storage rooms on both levels. An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.	{K 000}			
{K 000}	INITIAL COMMENTS Description of Structure: Building 8 is a one story masonry structure. The building was originally constructed in 1951 and completely remodeled in 2012. Construction Type: II (000)	{K 000}			

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{K 000}	<p>Continued From page 3</p> <p>Sprinkler status: Fully Sprinklered</p> <p>An unannounced Life Safety Code revisit to the standard survey conducted on 6/17/16 was conducted on 8/3/16, in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.</p> <p>Corrected deficiencies are shown on the 2567B form.</p> <p>Description of Structure: Building 12 is a one story masonry structure. The building was originally constructed in 1951 and completely remodeled in 2012.</p> <p>Construction Type: II (000)</p> <p>Sprinkler status: Fully Sprinklered</p> <p>An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.</p> <p>Description of Structure: Building 9 is a one story masonry structure with a partial basement.</p>	{K 000}			

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{K 000}	Continued From page 4 The building was originally constructed in 1951 and completely remodeled in 2013. Construction Type: II (000) Sprinkler status: Fully Sprinklered An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid. Description of Structure: Building 11 is a one story masonry structure. The building was constructed in 1951 and remodeled in 2008. Construction Type: II (000) Sprinkler status: Fully Sprinklered An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.	{K 000}			
{K 000}	INITIAL COMMENTS	{K 000}			

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{K 000}	<p>Continued From page 5</p> <p>Description of Structure: Building 10 is a one story masonry structure. The building was originally constructed in 1951 and completely remodeled in 2015.</p> <p>Construction Type: II (000)</p> <p>Sprinkler status: Fully Sprinklered NFPA 13 System with quick response heads.</p> <p>An unannounced recertification Life Safety Code survey was conducted 06/15/2016 through 06/17/2016 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2000 (Existing) regulations. This facility houses ICFID residents, however chooses to meet Health Care requirements. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.</p>	{K 000}			