

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0283	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 10/27/2021
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NAME OF PROVIDER OR SUPPLIER ACCORDIUS HEALTH AT GREENE COUNTY	STREET ADDRESS, CITY, STATE, ZIP CODE 355 WILLIAM MILLS DRIVE STANARDSVILLE, VA 22973
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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 10/26/21 through 10/27/21. Corrections were required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 90 certified bed facility was 76 at the time of the survey. The survey sample consisted of eight (8) current Resident reviews (Residents #1 through Resident #8), and two (2) closed record reviews, (Resident #9 and Resident #10).</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>12 VAC 5-371-150 (G)</p> <p>During the entrance conference on 10/26/2021 at approximately 10:45 a.m., the facility administrator was asked if the facility was registered to receive automatic notifications from the Sex Offender Registry if the offender's address was within the same or contiguous zip code as the facility. She stated, I am not sure, I will check.</p> <p>At approximately 11:45 a.m., the admission agreement given to and signed by the resident or their Responsible Party was presented. The administrator stated, "It doesn't look like we are</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>getting the notifications but we are now, we just registered for them." The admission agreement contained the following: "Section 10. SEX OFFENDER REGISTRY A. ...Pursuant to ...the Code of Virginia, the Facility has registered with the Department of State Police to receive notification of the registration or reregistration of any sex offender within the same or a contiguous zip code area in which the facility is located."</p> <p>The administrator was asked why they had not been registered. She state, "I don't know. We may have been registered and through the acquisitions of new owners the notification may be going to someone else's email and just not here to us." She was asked if anyone was forwarding that information to her. She stated, "No."</p> <p>No further information was obtained prior to the exit conference on 10/27/2021.</p>	F 001		