

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0054	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 07/01/2021
NAME OF PROVIDER OR SUPPLIER LYNCHBURG HEALTH & REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 5615 SEMINOLE AVENUE LYNCHBURG, VA 24502		
(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 6/29/21 through 7/1/21. Corrections were required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities. The census in this 180 bed facility was 150 at the time of the survey. The survey sample consisted of thirty-five current resident reviews and three 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: The facility was not in compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities: 12VAC5-371-250 A. 9 cross reference to F641 12VAC5-371-250 C cross reference to F657 12VAC5-371-220 D cross reference to F677 12VAC5-371-220 A., B. cross reference to F684 12VAC5-371-300 A. cross reference to F761 12VAC5-371-340 A. cross reference to F800 and F812	F 001	2VAC5-371-250 A. 9 cross reference to F641 12VAC5-371-250 C cross reference to F657 12VAC5-371-220 D cross reference to F677 12VAC5-371-220 A., B. cross reference to F684 12VAC5-371-300 A. cross reference to F761 12VAC5-371-340 A. cross reference to F800 and F812 12VAC5-371-360 E. cross reference to F842 12VAC5-371-180 A.		8/6/21

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

Electronically Signed

TITLE

(X6) DATE

07/23/21

State of Virginia

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F 001	Continued From page 1 12VAC5-371-360 E. cross reference to F842 12VAC5-371-180 A. cross reference to F880	F 001	cross reference to F880		