

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0397	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/23/2022
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NAME OF PROVIDER OR SUPPLIER DINWIDDIE HEALTH AND REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 46 DIAMOND DRIVE PETERSBURG, VA 23803
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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 6/21/2022 through 6/23/2022. Corrections are required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this sixty licensed bed facility was 56 at the time of the survey. The survey sample consisted of fourteen (14) current resident reviews and two (2) 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: 12VAC5-371-250 (G) - cross reference to F656</p> <p>12VAC5-371-220 (A)&(B) - cross reference to F684</p> <p>12VAC5-371-220 (C)(1) - cross reference to F686</p> <p>12VAC5-371-340 (A) - cross reference to F814</p> <p>12VAC5-371-360 (A) - cross reference to F842</p> <p>12VAC5-371-180 (A), C - cross reference to F880</p> <p>12VAC5-371-110 (J) cross reference to F883</p> <p>12VAC5-371-150 (G) Based on facility document review and staff interview, the facility staff failed to ensure registration with the Department of State Police for notifications regarding sex offenders. The</p>	F 001	<p>12VAC5-371-250 (G) - cross reference to F656 POC</p> <p>12VAC5-371-220 (A)&(B) - cross reference to F684 POC</p> <p>12VAC5-371-220 (C)(1) - cross reference to F686 POC</p> <p>12VAC5-371-340 (A) - cross reference to F814 POC</p> <p>12VAC5-371-360 (A) - cross reference to F842 POC</p> <p>12VAC5-371-180 (A), C - cross reference to F880 POC</p> <p>12VAC5-371-110 (J) cross reference to F883 POC</p>	8/2/22

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

TITLE

(X6) DATE

Electronically Signed

07/07/22

State of Virginia

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F 001	<p>Continued From page 1</p> <p>facility was not enrolled or receiving automatic notifications regarding sex offender registrations in the area.</p> <p>The findings include:</p> <p>Review of the facility's survey documents included the admission packet for residents. This packet included information about how to access the state's sex offender registry, a requirement for screening residents prior to admission and a written acknowledgement from residents and/families of how to access the registry. There was no staff person identified as receiving automatic notification from the state's sex offender registry regarding registered sex offenders relocating to the area.</p> <p>On 6/21/22 at 4:45 p.m., the administrator was interviewed about the facility's enrollment for automatic notifications from the state's sex offender registry. The administrator stated he checked with corporate and the facility was not enrolled or receiving notifications about sex offenders moving into the area.</p> <p>This finding was reviewed with the administrator, director of nursing and the regional nurse consultant during a meeting on 6/22/22 at 1:30 p.m.</p>	F 001	<p>12VAC5-371-150 (G):</p> <p>1) Administrator enrolled in sex offender registry alerts 6/21/22</p> <p>2) Administrator receives daily notices per the sex offender registry</p>	