

State of Virginia

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: VA0184	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 04/28/2025
NAME OF PROVIDER OR SUPPLIER PARHAM HEALTH CARE & REHAB CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 2400 E PARHAM ROAD RICHMOND, VA 23228		
(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 4-14-25 through 4-28-25. Corrections are required for compliance with the Virginia Rules and Regulations for the Licensure of Nursing Facilities.</p> <p>The census in this 180 licensed bed facility was 170 at the time of the survey. The survey sample consisted of 57 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 STANDARD is not met as evidenced by: Corrections are required for compliance with the following Virginia Rules and Regulations for the Licensure of Nursing Facilities:</p> <p>12 VAC 5-371-370 (A). Cross reference to F-584 12 VAC 5-371-140. Cross reference to F-607 12 VAC 5-371-210 (F)(1). Cross reference to F-609 12 VAC 5-371-210 (F)(1). Cross reference to F-610 12 VAC 5-371-250 (G). Cross reference to F-656 12 VAC 5-371-220 (D). Cross reference to F-677 12 VAC 5-371-220 (D). Cross reference to F-687 12 VAC 5-371-220 (C)(5). Cross reference to F-692 12 VAC 5-371-220 (A) and (B) and (D). Cross reference to F-698 12 VAC 5-371-220 (B). Cross reference to F-760 12 VAC 5-371-340 (B). Cross reference to F-809 12 VAC 5-371-370 (A). Cross reference to F-921</p>	F 001	<p>F001 Compliance</p> <p>Cross references to associated F-tags have plans of correction</p> <p>12 VAC 5-371-370 (A). Cross reference to F584 12 VAC 5-371-140. Cross reference to F-607 12 VAC 5-371-210 (F)(1). Cross reference to F609 12 VAC 5-371-210 (F)(1). Cross reference to F610 12 VAC 5-371-250 (G). Cross reference to F656 12 VAC 5-371-220 (D). Cross reference to F677 12 VAC 5-371-220 (D). Cross reference to F687 12 VAC 5-371-220 (C)(5). Cross reference to F921</p>	6/12/25

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

TITLE

(X6) DATE

Electronically Signed

06/11/25

State of Virginia

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F 001	<p>Continued From page 1</p> <p>12 VAC 5-371-370 (E). and 12 VAC 5-371-140 (G) and (H). Cross reference to F-925</p> <p>12 VAC 5-371-150 (B.1). Cross-Reference to F-550.</p> <p>12VAC5-371-180 (A, B). Infection Control. Cross reference to F-880.</p> <p>12 VAC 5-371-200 (B)(1). Nursing Director. Cross-Reference to F-658.</p> <p>12 VAC 5-371-220 (A, B, C, D, E, H). Nursing Services. Cross-Reference to F-580, F-623, F-686, F-689, F-690, F-695, F-697, F-700, F-742</p> <p>.</p> <p>12 VAC 5-371-300 (A, B). Pharmaceutical Services. Cross reference to F-761.</p> <p>12 VAC 5-371-340 (C). Dietary and food service program. Cross-Reference to F-804.</p> <p>12 VAC 5-371-220 (D) & (E) please cross ref to Resident Rights F600</p> <p>12 VAC 5-371-220 (C)(1) please cross ref to F686</p> <p>12 VAC 5-371-220 (C)(3) & (G) Please cross ref. to F690</p> <p>12 VAC 5-371-130 (A) Please cross ref to F835</p> <p>12 VAC 5-371-180 (A) Please cross ref. to F880</p> <p>12VAC5-371-370 (F) please cross ref. to F909</p>	F 001	<p>to F692</p> <p>12 VAC 5-371-220 (A) and (B) and (D). Cross reference to F-698</p> <p>12 VAC 5-371-220 (B). Cross reference to F-760</p> <p>12 VAC 5-371-340 (B). Cross reference to F-809</p> <p>12 VAC 5-371-370 (A). Cross reference to F921</p> <p>12 VAC 5-371-370 (E). and 12 VAC 5-371-140 (G) and (H). Cross reference to F-925</p> <p>12 VAC 5-371-150 (B.1). Cross-Reference to F550.</p> <p>12VAC5-371-180 (A, B). Infection Control. Cross reference to F-880.</p> <p>12 VAC 5-371-200 (B)(1). Nursing Director. Cross-Reference to F-658.</p> <p>12 VAC 5-371-220 (A, B, C, D, E, H). Nursing Services. Cross-Reference to F-580, F-623, F-686, F-689, F-690, F-695, F-697, F-700, F-742 .</p> <p>12 VAC 5-371-300 (A, B). Pharmaceutical Services. Cross reference to F-761.</p> <p>12 VAC 5-371-340 (C). Dietary and food service program. Cross-Reference to F-804.</p> <p>12 VAC 5-371-220 (D) & (E) please cross ref to Resident Rights F600</p> <p>12 VAC 5-371-220 (C)(1) please cross ref to F686</p> <p>12 VAC 5-371-220 (C)(3) & (G) Please cross ref. to F690</p> <p>12 VAC 5-371-130 (A) Please cross ref to F835</p> <p>12 VAC 5-371-180 (A) Please cross ref. to F880</p> <p>12VAC5-371-370 (F) please cross ref. to F909</p>	(X5) COMPLETE DATE

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F 001	Continued From page 2	F 001	<p>ref. to F880 12VAC5-371-370 (F) please cross ref. to F909</p> <p>Date of compliance: 6/12/2025</p>	