

BAY POINTE REHABILITATION AND NURSING

Report ID: CCN 495086
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§ 1 Facility Identity

Facility	BAY POINTE REHABILITATION AND NURSING
CCN	495086
Location	1148 FIRST COLONIAL RD, VIRGINIA BEACH, VA, 23454
Ownership type	For profit - Limited Liability company
Certified beds	112

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	20 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
VA state average	\$20,882 (this facility is 0.0× the VA average)
National average	\$31,239 (this facility is 0.0× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 20 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	F	Standard survey
F641	Ensure each resident receives an accurate assessment.	E	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	D	Standard survey
F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey

F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F700	Try different approaches before using a bed rail. If a bed rail is needed, the facility must (1) assess a resident for safety risk; (2) review these risks and benefits with the resident/representative; (3) get informed consent; and (4) Correctly install and maintain the bed rail.	D	Standard survey
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	D	Standard survey
F840	Employ or obtain outside professional resources to provide services in the nursing home when the facility does not employ a qualified professional to furnish a required service.	D	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F732	Post nurse staffing information every day.	C	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: EASTERN HEALTHCARE GROUP (18 facilities); Owner on file: VA SNF OPERATIONS HOLDINGS LLC (organization)
Ownership chain	EASTERN HEALTHCARE GROUP (18 facilities)
Penalties vs chain average	\$0 vs \$60,411 (0.0× the chain average)
Current deficiencies vs chain average	20 vs 24.3 (0.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 2.4 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/495086
Snapshot SHA-256	bfa7c79c231536e259d73f2f683469a664bdb3899d3d2fafefc8c5b8db499fa
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 495086.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash bfa7c79c2315.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at <https://www.caregiverhelpnow.com/methodology>; the Snapshot SHA-256 above pins this record to that methodology version.

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