BIRCHWOOD PARK REHABILITATION

Report ID: CCN 495150
Generated: 2026-07-23T19:22:55.884Z

§ 1 Facility Identity

Facility	BIRCHWOOD PARK REHABILITATION
CCN	495150
Location	340 LYNN SHORES DRIVE, VIRGINIA BEACH, VA, 23452
Ownership type	For profit - Limited Liability company
Certified beds	150

§ 2 CMS Federal Record

Civil money penalties on file	$131,178
Deficiency citations — current cycle	46 (254% vs prior 24 months (13))
Deficiency citations — prior 24 months	13
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	4
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$131,178
VA state average	$20,882 (this facility is 6.3× the VA average)
National average	$31,239 (this facility is 4.2× 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 46 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	Standard survey
F697	Provide safe, appropriate pain management for a resident who requires such services.	G	Standard survey
F603	Protect each resident from separation (from other residents, his/her room, or confinement to his/her room).	G	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Complaint
F679	Provide activities to meet all resident's needs.	F	Standard survey
F680	Ensure the activities program is directed by a qualified professional.	F	Standard survey
F839	Employ staff that are licensed, certified, or registered in accordance with state laws.	F	Standard survey
F850	Hire a qualified full-time social worker in a facility with more than 120 beds.	F	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.	F	Complaint
F880	Provide and implement an infection prevention and control program.	F	Complaint
F645	PASARR screening for Mental disorders or Intellectual Disabilities	E	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	E	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	E	Standard survey

	must be stored in locked compartments, separately locked, compartments for controlled drugs.		
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	E	Standard survey
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	E	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	E	Standard survey
F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Standard survey
F946	Provide training in compliance and ethics.	E	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	E	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	E	Standard survey
F565	Honor the resident's right to organize and participate in resident/family groups in the facility.	E	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Complaint
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	E	Complaint
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Complaint
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	E	Complaint

F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F560	Protect a residents' right to refuse some types of non-requested transfers within the nursing home.	D	Standard survey
F586	Not prohibit or in any way discourage a resident from communicating with federal, state, or local officials.	D	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey
F637	Assess the resident when there is a significant change in condition	D	Standard survey
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	D	Standard survey
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F583	Keep residents' personal and medical records private and confidential.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F623	Provide timely notification to the resident, and if applicable to the resident representative and	D	Complaint

	ombudsman, before transfer or discharge, including appeal rights.		
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint
F760	Ensure that residents are free from significant medication errors.	D	Complaint
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	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Complaint
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: EASTERN HEALTHCARE GROUP (18 facilities); Owner on file: JJ UNITED TR (organization)
Ownership chain	EASTERN HEALTHCARE GROUP (18 facilities)
Penalties vs chain average	$131,178 vs $60,411 (2.2× the chain average)
Current deficiencies vs chain average	46 vs 24.3 (1.9× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 2.4 · US avg 2.9)
Quality measures (QM)	3 / 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/495150
Snapshot SHA-256	665fc300bf025c9ffe5270d338db5131a4f3790a69c792c7d798a59b48855224
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 495150.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 665fc300bf02.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.