DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1122-14-008**
Organization Name: **Divinely Directed Services, Inc.**

Date of Inspection: **11-19-2024**
Program Type/Facility Name: **14-008 Arcadia Ave**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-250. B. (2) - Tuberculosis evaluation: 2. Each individual shall annually submit the results of a screening assessment, documenting that the individual is free of tuberculosis in a communicable form as evidenced by the completion of a form containing, at a minimum, the elements of a current screening form published by the Virginia Department of Health.	N	Arcadia Ave This regulation was NOT MET as evidenced by: Individual #1 initiated a TB skin test on 6/15/2024. The results were read 6/19/2024, outside of the allowable 48–72-hour window for TB skin test results to be read. Ensure annual TB assessment are completed. If a skin test is completed the results must be reviewed during required time period.	PR) 01/15/2025 All individuals will have TB screenings read/reviewed within 48 hours of test for all yearly screenings. OLR) Accepted 01/17/2025	1/15/2025
12VAC35-46-310. B. (2) - Required annual retraining: 2. All staff who administer medication shall complete annual refresher medication training.	N	Arcadia Ave This regulation was NOT MET as evidenced by: Employee #2 did not have documentation to support completion of medication refresher training within the past 12 months. Last documented training was dated 1/6/2023. Medication refresher training must be completed annually. Schedule medication refresher training immediately for Employee #2 if not already completed.	PR) 01/14/2025 Employee had updated medication refresher training which was provided at time of inspection. All employees complete medication refresher yearly and updated documentation will be filed upon completion. OLR) Accepted 01/17/2025	1/14/2025

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12VAC35-46-590. B. - The interior and exterior of all buildings shall be safe, properly maintained, clean, and in good working order. This includes, but is not limited to, required locks, mechanical devices, indoor and outdoor equipment, and furnishings.	N	Arcadia Ave This regulation was NOT MET as evidenced by: During inspection on 11/19/2024, Licensing Specialist saw a handrail in the recreation area on the second floor that was damaged. The handrail had unsecured and missing spindles. Licensing Specialist saw two holes in the walls during the inspection. One hole was located on wall on the back stairs and there was a hole in wall in Individual #2's bedroom. Repair the damaged handrail and holes in the walls. Check for damaged items regularly; document damages. Make repairs in a timely manner.	PR) 01/15/2025 Damages are documented on daily shift change briefing and overnight inspection checklist. Handrails will be fixed with different construction material. Contractor has been contacted and we are awaiting final completion. Holes in walls are to be fixed within 7-10 days of occurrence. OLR) Accepted 01/17/2025	2/1/2025
12VAC35-46-710. B. (11a) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 11. Medication and drug use profile, which shall include: 11a. History of prescription, nonprescription, and illicit drugs that were taken over the six months prior to admission;	N	Arcadia Ave This regulation was NOT MET as evidenced by: The intake/initial assessment being used by Divinely Direct Services, Inc. (Initial Assessment Form #650) fails to address illicit drugs use. This item was not addressed for Individual #1 or Individual #2. Review the assessment currently being utilized and update to address all elements of 12VAC35-46-710.1-11.	PR) 01/15/2025 Our Initial Assessment covers required criteria for admission for individuals according to 12VAC35-46-710.1-11. The form has been corrected to reflect the appropriate 710 code and not 650. Illicit drug use is documented under Substance Abuse section on page 2 of the Initial Assessment page. The 740 form is attached. OLR) Accepted 01/17/2025	1/14/2025

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12VAC35-46-710. B. (6) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 6. The behavior support needs of the prospective resident;	N	Arcadia Ave This regulation was NOT MET as evidenced by: The intake/initial assessment being used by Divinely Direct Services, Inc. (Initial Assessment Form #650) fails to address the behavior support needs of the prospective resident. This item was not addressed for Individual #1 or Individual #2. Review the assessment currently being utilized and update to address all elements of 12VAC35-46-710.1-11.	PR) 01/15/2025 Our Initial Assessment covers required criteria for admission for individuals according to 12VAC35-46-710.1-11. The form has been corrected to reflect the appropriate 710 code and not 650. The Initial Assessment form 710 is attached. OLR) Accepted 01/17/2025	1/14/2025
12VAC35-46-850. E. - A program of medication, including over-the-counter medication, shall be initiated for a resident only when prescribed in writing by a person authorized by law to prescribe medication.	N	Arcadia Ave This regulation was NOT MET as evidenced by: Written order for medication #1 was unavailable. All medications must have written orders. Ensure each medication has a current physician's order available. The orders must be consistent with the medication administration orders (MARs) and the medications on hand.	PR) 01/15/2025 Medication #1 came with a newly placed individual. Once the individual completes the initial PCP or Psychiatrist appointment within the first 30 days, a new medication order is received for all medications prescribed. The orders are then filed. The order in question had not arrived yet as the client was placed on 10/18/24 and the inspection was completed on 11/19/24. The order in question has been received and filed. OLR) Accepted 01/17/2025	1/15/2025

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General Comments / Recommendations:
Provider does not use volunteers or contractors.

Review the current intake/initial assessment being used by Divinely Direct Services, Inc. and update to ensure it complies with all elements of 12VAC35-46-710.B.1-11 Childrens Residential Facilities Regulations. The initial assessment currently being used lists Reg 650.E and appears to follow 12VAC35-105-650.E General Regulation which are not applicable to Divinely Direct Services, Inc.

Review your emergency plan. Have emergency food, water, and supplies available.

Human Rights test must be completed annually and graded per Human Rights Regulations.

Compliance with initial trainings is to be completed based on specific timeframes. Save original documentation of trainings to demonstrate training were completed and completed based on required timelines.

CPR and first aid training for Employee #2 has an issue date of 1/24/2025 and a renewal date of 01/2027. Please contact the trainer and have this corrected.

I understand it is my right to request a conference with the reviewer and the reviewer's supervisor should I desire further discussion of these findings. By my signature on the Corrective Action Plan, I pledge that the actions to be taken will be completed as identified by the date indicated.

Byron Nagle, Licensing Specialist	(Signature of Organization Representative)	Date

C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined