

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES  
CORRECTIVE ACTION PLAN**

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License #: 142-04-005

Organization Name: Virginia Commonwealth University Health System Authority

Date of Inspection: 02-03-2022

Program Type/Facility Name: 04-005 VTCC Inpatient Unit

| <u>Standard(s) Cited</u>                                                                                                                                                                                                              | <u>Comp</u> | <u>Description of Noncompliance</u>                                                                    | <u>Actions to be Taken</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <u>Planned Comp. Date</u> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| 12VAC35-105-150. (4)<br>- The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board; | N           | VTCC Inpatient Unit<br><br>This regulation was NOT MET as evidenced by:<br><br>See OHR citation below. | PR) 02/23/2022<br><br><b>Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation.</b><br><br><b>PR:</b> The events were discovered based on a TJC (The Joint Commission) complaint that happened in 2019. The AVP/ACNO for Women & Children's Health and Patient Relations Liaison discovered that the listed incidents were not reported back in 2019. Based on the current leadership's discovery date, the events were submitted by our patient liaison on 1/04/22.<br><br><ul style="list-style-type: none"> <li>• The patient's admission occurred in 2019. Since that time the organization has recruited and retained new leadership at both the nursing and medical director level. CHRIS reporting compliance was identified as an issue for the new leadership team in February 2021. As a result, the following steps have been implemented to ensure compliance:</li> <li>• Patient relations liaison was hired for adults and pediatrics to conduct CHRIS investigations. The role had been vacant and was being filled in by the youth case specialist from February 2021-July 2021.</li> <li>• The clinical coordinator team serves as around the clock leadership and charge RN coverage and is responsible for the timely reporting and entry of events to the CHRIS database.</li> <li>• The nurse manager and clinical coordinators were trained between April 22 - November 4, 2021. The new director of nursing, incoming nurse manager, and clinical coordinator will complete the training course, "Reporting in CHRIS: Abuse, Neglect, and Human Rights Complaints".</li> </ul><br>Systematic changes (process/protocols, etc) that | 8/30/2022                 |

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| <u>Standard(s) Cited</u> | <u>Comp</u> | <u>Description of Noncompliance</u> | <u>Actions to be Taken</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u>Planned Comp. Date</u> |
|--------------------------|-------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
|                          |             |                                     | <p><b>have been or will be implemented to ensure compliance:</b></p> <p><b>PR:</b> When an event occurs that meets reporting requirements, the clinical coordinator notifies the Nurse Manager, Nurse Manager On-Call, and the Nursing Director through a safety tele page. The event is entered into the CHRIS reporting database and an internal CHRIS tracking report on our VTCC Share Drive. The clinical coordinator also sends an e-mail notifying the patient liaison and nursing leadership the same shift as the event.</p> <p>The CHRIS tracking report logs the discovery date, submission date, type of report, brief description of event, and investigation submission date. The CHRIS tracking report is reviewed weekly on Mondays with the Patient Relations Liaison, Director of Nursing, and former Director of Nursing (June 2021 to December 2021). Follow-up action items, including clinical practice changes, are discussed at this meeting also.</p> <p>In 2021, there has been 94.11% compliance with submitting CHRIS reports. All non-compliance is related to late reporting or investigation.</p> <p><b>Include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation. Indicate the frequency for monitoring the plan including how it will be monitored.</b></p> <p><b>PR:</b> The Adolescent/Psychiatry leadership team (including AVP/ACNO, DON, Nurse Manager, Nurse Clinician, and Patient Relations Liaison) meets weekly to review all safety events and regulatory reporting. CHRIS report data will be reported out to the QAPI team monthly along with key safety themes related to the events.</p> <p>OLR) Accepted 04/13/2022</p> |                           |

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| <u>Standard(s) Cited</u>                                                                                                                                                                                                                                                                                                                                                                      | <u>Comp</u> | <u>Description of Noncompliance</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <u>Actions to be Taken</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <u>Planned Comp. Date</u> |
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| 12VAC35-115-230.<br>A. (2) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 2. The director of a service licensed or funded by the department shall report each allegation of abuse or neglect via the department's web-based reporting application within 24 hours of receipt of the allegation (see 12VAC35-115-175). | N           | <p>VTCC Inpatient Unit</p> <p>This regulation was NOT MET as evidenced by:</p> <ul style="list-style-type: none"> <li>Upon review of CHRIS entries A-20220007 and A-20220008, the provider became aware of the incident on 1/4/2022, and the date of entry into CHRIS is 1/14/2022. As a result, the provider failed to report the allegation to the department within 24 hours of receipt.</li> <li>Upon review of CHRIS entry C-20220003, the provider became aware of the incident on 9/22/2021, and the date of entry into CHRIS is 1/4/2022. As a result, the provider failed to report the allegation to the department within 24 hours of receipt.</li> <li>Upon review of CHRIS entry C-20220012, the provider became aware of the incident on 10/21/2021, and the date of entry into CHRIS is 1/4/2022. As a result, the provider failed to report the allegation to the department within 24 hours of receipt.</li> </ul> | <p>PR) 02/04/2022</p> <p><b>Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation.</b></p> <p><b>PR:</b> The events were discovered based on a TJC (The Joint Commission) complaint that happened in 2019. The AVP/ACNO for Women &amp; Children's Health and Patient Relations Liaison discovered that the listed incidents were not reported back in 2019. Based on the current leadership's discovery date, the events were submitted by our patient liaison on 1/04/22.</p> <ul style="list-style-type: none"> <li>The patient's admission occurred in 2019. Since that time the organization has recruited and retained new leadership at both the nursing and medical director level. CHRIS reporting compliance was identified as an issue for the new leadership team in February 2021. As a result, the following steps have been implemented to ensure compliance:</li> <li>Patient relations liaison was hired for adults and pediatrics to conduct CHRIS investigations. The role had been vacant and was being filled in by the youth case specialist from February 2021-July 2021.</li> <li>The clinical coordinator team serves as around the clock leadership and charge RN coverage and is responsible for the timely reporting and entry of events to the CHRIS database.</li> <li>The nurse manager and clinical coordinators were trained between April 22 - November 4, 2021. The new director of nursing, incoming nurse manager, and clinical coordinator will complete the training course, "Reporting in CHRIS: Abuse, Neglect, and Human Rights Complaints".</li> </ul> |                           |

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|                          |             |                                     | <p><b>Systematic changes (process/protocols, etc) that have been or will be implemented to ensure compliance:</b></p> <p><b>PR:</b> When an event occurs that meets reporting requirements, the clinical coordinator notifies the Nurse Manager, Nurse Manager On-Call, and the Nursing Director through a safety tele page. The event is entered into the CHRIS reporting database and an internal CHRIS tracking report on our VTCC Share Drive. The clinical coordinator also sends an e-mail notifying the patient liaison and nursing leadership the same shift as the event.</p> <p>The CHRIS tracking report logs the discovery date, submission date, type of report, brief description of event, and investigation submission date. The CHRIS tracking report is reviewed weekly on Mondays with the Patient Relations Liaison, Director of Nursing, and former Director of Nursing (June 2021 to December 2021). Follow-up action items, including clinical practice changes, are discussed at this meeting also.</p> <p>In 2021, there has been 94.11% compliance with submitting CHRIS reports. All non-compliance is related to late reporting or investigation.</p> <p><b>Include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation. Indicate the frequency for monitoring the plan including how it will be monitored.</b></p> <p><b>PR:</b> The Adolescent/Psychiatry leadership team (including AVP/ACNO, DON, Nurse Manager, Nurse Clinician, and Patient Relations Liaison) meets weekly to review all safety events and regulatory reporting. CHRIS report data will be reported out to the QAPI team monthly along with key safety themes related to the events.</p> |                           |

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|                          |             |                                     | OHR/OLR) Accepted 04/13/2022 |                           |

**General Comments / Recommendations:**

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.

\_\_\_\_\_  
Tonya Carr, Legal Operations Manager

\_\_\_\_\_  
(Signature of Organization Representative)

\_\_\_\_\_  
Date

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