

**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: 03-21-2024

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) - 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 This regulation was NOT MET as evidenced by: See OHR citation.		4/5/2024
12VAC35-115-110. C. (9a) - The provider's duties. 9. Providers shall comply with all applicable state and federal laws and regulations, certification and accreditation standards, and third party requirements as they relate to seclusion and restraint. 9a. Whenever an inconsistency exists between this chapter and federal laws or regulations, accreditation or certification standards, or the requirements of third party payers, the provider shall comply	N	VTCC Inpatient Unit Upon review of CHRIS entry, A-20240011, the provider's investigation determined a violation of the human rights regulation: - Employee #1 did not utilize the appropriate facility de-escalation training (Mandt). - Employee #1 failed to follow to VCU-HS Restraint & Seclusion Policy PC.PS.004, which outlines restraints and seclusion are not used as a means of convenience, coercion, discipline, or retaliation, as VCU-HS does not tolerate the use of intimidation, force, or threat to control patient behavior. - Employee #1 used excessive force by grabbing individual's arm and flipped Individual #1 over Employee #1's head resulting in Individual #1 landing hard on the floor.	PR) 03/21/2024OHR/OLR) Pending Response 03/21/2024 PR) 03/29/2024 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. Patient admitted on 02/25/24 with psychosis and unpredictable behaviors. At the time of the following event the patient's psychological functioning was still in acute distress. On March 1, 2024 at 0745, a patient placed the Employee in a chokehold from behind. The Employee was in the sitting position communicating patient's clinical update to nursing colleague. Patient approached Employee from behind and placed the Employee in a chokehold. The Employee performed an unapproved escape to get released from the chokehold in which resulted in the patient's body hitting the floor. The Employee failed to properly utilize the appropriate facility de-escalation training (Mandt)while managing a challenging patient which resulted in non-compliance to VCUHS Restraint & Seclusion	4/5/2024

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with the higher standard.			Policy. Include a plan of action to address systematic changes (process/protocols, etc) that have been or will be implemented to ensure you remain in compliance of the regulation PR: The Employee was removed from VTCC on 3/1/2024. The Employee's supervisor and Director met with the Employee and reviewed performance expectations around holds and restraints. The Employee reviewed policies related to restraints to include VCU-HS Restraint & Seclusion Policy PC.PS.004 to acknowledge understanding. Employee agreed to be re-trained in MANDT technique by 4/5/24. The recommendation is that when patients are standing that staff is also in the standing position. On 3/2/24, the Mandt curriculum was adjusted to include training and education on how to successfully complete a Mandt approved maneuver from the sitting position. 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 (Ex: monthly audits, weekly chart reviews, daily checklist). Behavioral Health Specialist Operations Supervisor and/or Security Leadership will conduct bi-weekly rounds to monitor safe staff/patient positioning and minimize instances	

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			of staff with their back to the patient. Audit data will be reviewed quarterly at the Behavioral Health EOC taskforce. OHR/OLR) Accepted 04/01/2024	
12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	VTCC Inpatient Unit This regulation was NOT MET as evidenced by: "Abuse" means any act or failure to act by an employee or other person responsible for the care of an individual in a facility or program operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, that was performed or was failed to be performed knowingly, recklessly, or intentionally, and that caused or might have caused physical or psychological harm, injury, or death to a person receiving care or treatment for mental illness, intellectual disability, or substance abuse. - Upon review of CHRIS entry A-20240011, the provider's investigation included eyewitness statements, video review and a review of the providers policies which determined physical abuse and Restraint Not in Compliance with Standards was substantiated. - Employee #1 did not utilize the appropriate facility de-escalation training (Mandt). - Employee #1 failed to follow to VCU-HS Restraint & Seclusion Policy PC.PS.004, which outlines restraints and seclusion are not used as a means of convenience, coercion, discipline, or retaliation, as VCU-HS	PR) 03/29/2024 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. Patient admitted on 02/25/24 with psychosis and unpredictable behaviors. At the time of the following event the patient's psychological functioning was still in acute distress. On March 1, 2024 at 0745, a patient placed the Employee in a chokehold from behind. The Employee was in the sitting position communicating patient's clinical update to nursing colleague. Patient approached Employee from behind and placed the Employee in a chokehold. The Employee performed an unapproved escape to get released from the chokehold in which resulted in the patient's body hitting the floor. The Employee failed to properly utilize the appropriate facility de-escalation training (Mandt)while managing a challenging patient which resulted in non-compliance to VCUHS Restraint & Seclusion Policy. Include a plan of action to address systematic changes (process/protocols, etc) that have been or will be implemented to ensure you remain in compliance of the regulation	4/5/2024

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		does not tolerate the use of intimidation, force, or threat to control patient behavior. Employee #1 used excessive force by grabbing individual's arm and flipped Individual #1 over Employee #1's head resulting in Individual #1 landing hard on the floor. Based on preponderance of evidence, Employee #1 failed to ensure the health and safety of Individual #1 by use of physical restraint not in compliance with provider's approved standards and use of excessive force.	PR: The Employee was removed from VTCC on 3/1/2024. The Employee's supervisor and Director met with the Employee and reviewed performance expectations around holds and restraints. The Employee reviewed policies related to restraints to include VCU-HS Restraint & Seclusion Policy PC.PS.004 to acknowledge understanding. Employee agreed to be re-trained in MANDT technique by 4/5/24. The recommendation is that when patients are standing that staff is also in the standing position. On 3/2/24, the Mandt curriculum was adjusted to include training and education on how to successfully complete a Mandt approved maneuver from the sitting position. 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 (Ex: monthly audits, weekly chart reviews, daily checklist). Behavioral Health Specialist Operations Supervisor and/or Security Leadership will conduct bi-weekly rounds to monitor safe staff/patient positioning and minimize instances of staff with their back to the patient. Audit data will be reviewed quarterly at the Behavioral Health EOC taskforce. OHR/OLR) Accepted 04/01/2024	

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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.				
_____ Andrea Milhouse, Human Rights		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				