DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1746-14-010**
Organization Name: **Gateway Counseling Center**

Date of Inspection: **03-29-2022**
Program Type/Facility Name: **14-010 Rock Hill Church Rd**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-70. - Each provider shall guarantee resident rights as outlined in § 37.2-400 of the Code of Virginia and in the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (12VAC35-115).	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: See multiple OHR citations below.	PR) 04/02/2022 CAO and Program Director will ensure that written policies and procedures regarding new hires is adhered to 100% of the time. Policy states that no person will work alone with children or transport a child until such time that they have received a background clearance, completed required training that includes Safe Crisis Management for physical holds when necessary, Human Rights training and all other trainings as specified on orientation/pre-employment training sheet. New hires will only be permitted to train with CAO or Program Director to ensure that policies are followed. OLR) Accepted 04/05/2022	4/4/2022

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12VAC35-115-110. C. (10) - The provider's duties. 10. Providers shall ensure that only staff who have been trained in the proper and safe use of seclusion, restraint, and time out techniques may initiate, monitor, and discontinue their use.	N	Rock Hill Church Rd CHRIS Abuse 20220002, 20220003 This regulation was NOT MET as evidenced by: • During an interview with CPS, Employee 3 reported the following: • On January 24, 2022, Employee 3 and Employee 2 placed Individual 1 in a hold by lying Individual 1 on the ground and holding Individual 1's arms. • On January 24, 2022, in response to Individual 1 attempting to harm Employee 3, Employee 2 "hugged" Individual 1 in an effort to deescalate the behaviors. • Employee 2 physically escorted Individual 1 to the car in an attempt to transport Individual 1 for an evaluation. • In an email dated March 18, 2022, Employee 1 reported providing crisis management training to Employee 2, but upon making the decision not to hire Employee 2, Employee 1 shredded all the documents that would have verified Employee 2's training. This is a violation as Employee 1 is unable to provide documentation that verifies Employee 2's training in the proper and safe use of restraints.	PR) 04/02/2022 CAO and Program Director will ensure that written policies and procedures regarding new hires is adhered to 100% of the time. Policy states that no person will work alone with children or transport a child until such time that they have received a background clearance, completed required training that includes Safe Crisis Management for physical holds when necessary, Human Rights training and all other trainings as specified on orientation/pre-employment training sheet. New hires will only be permitted to train with CAO or Program Director to ensure that policies are followed. OHR/OLR) Accepted 04/04/2022	4/4/2022

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12VAC35-115-110. C. (6) - The provider's duties. 6. Providers shall not use a restraint that places the individual's body in a prone (face down) position.	N	Rock Hill Church Rd CHRIS Abuse 20220003 This regulation was NOT MET as evidenced by: • During an interview with CPS, Employee 3 reported the following: • Employee 3 and Employee 2 placed Individual 1 in a hold by lying Individual 1 on Individual 1's side, then turning Individual 1 on Individual 1's stomach. • Using a restraint that places Individual #1's body in a prone (face down) position is not allowable. Provider substantiated this allegation.	PR) 04/02/2022 On March 29, 2022 a staff meeting/supervision was held to review all policies and procedures related to the safe implementation of therapeutic safety holds. The 'Safe Crisis Management Manual was reviewed as well as a physical demonstration of proper versus improper methods of maintaining safety while holding a child that also promotes a sense of support and safety for the child. It was reiterated that Face down, prone position is never legal, safe or permitted. OHR/OLR) Accepted 04/04/2022	3/30/2022
12VAC35-115-260. B. (2d) - Providers shall require their employees to: 2. Protect individuals from any form of abuse, neglect, or exploitation by: 2d. Reporting all suspected abuse, neglect, or exploitation to the director;	N	Rock Hill Church Rd CHRIS Abuse 20220001 This regulation was NOT MET as evidenced by: • Client log note dated 1/24/2022 documents physical altercation with peers. • Serious Incident Therapeutic Hold Report dated 1/23/22 and 1/24/22 documents Individual 1 was "angry and aggressive towards a peer" and "fighting with peer". • Staff failed to notify lead staff of the peer-to-peer incidents resulting in failure to report these incidents in CHRIS. Staff failed to report these incidents to the director/designee, resulting in failure to report these incidents in CHRIS. This is a violation of 12VAC35-115-260(B)(2)(d).	PR) 04/02/2022 In order to ensure that all incidents and allegations are reported to the Clinical Director in a timely manner so that the incidents can be reported in CHRIS appropriately and timely, the Clinical Director and both staff supervisors reviewed all policies on March 14th, related to the appropriate reporting requirements. Upon ensuring that the RYS policies and procedures were in line with state regulations, a staff training meeting was held on March 21st in order to review and reinforce all state regulations, all RYS policies and procedures and to have a chain of command assigned for reporting of all incidents. All current direct care counselors (staff) received the supervision even though some were not able to attend the meeting. OHR/OLR) Accepted 04/04/2022	4/4/2022

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12VAC35-115-60. B. (2) - The provider's duties. 2. Providers shall ensure that all services, including medical services and treatment, are at all times delivered in accordance with sound therapeutic practice. Providers may deny or limit an individual's access to services if sound therapeutic practice requires limiting the service to individuals of the same sex or similar age, disability, or legal status.	N	Rock Hill Church Rd CHRIS Abuse 20220002, 20220003 This regulation was NOT MET as evidenced by: • Employee 1 reported to the advocate that Employee 2 was under "orientation/pre-employment." • Employee 1 reported to the advocate that "orientation instruction" is when employees on orientation status should observe and determine whether the employment opportunity is a good fit. • While under orientation/pre-employment, Employee 2 engaged in crisis intervention restraints. • While under orientation/pre-employment, Employee 2 engaged in 1-on-1 transportation for Individual 1. • While under orientation/pre-employment, Employee 2 engaged in 1-on-1 service provision during an urgent care visit in an effort to receive a medical evaluation for Individual 1. This is a violation of sound therapeutic practice.	PR) 04/02/2022 A new Program Director has been hired to work full time to ensure that changes are adhered to. CAO and Program Director will ensure that written policies and procedures regarding new hires is adhered to 100% of the time. Policy states that no person will work alone with children or transport a child until such time that they have received a background clearance, completed required training that includes Safe Crisis Management for physical holds when necessary, Human Rights training and all other trainings as specified on orientation/pre-employment training sheet. New hires will only be permitted to train with CAO or Program Director to ensure that policies are followed. OHR/OLR) Accepted 04/04/2022	4/4/2022

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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.

Tonya Carr, Legal Operations Manager	(Signature of Organization Representative)	Date

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