DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **09-19-2023**
Program Type/Facility Name: **14-010 Rock Hill Church Rd**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. C. - Each full-time staff person who works with residents shall complete an additional 15 hours of annual training applicable to their job duties.	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: An inspection was completed 9/19/23 and 4 staff files reviewed. Documentation did not include evidence of any additional trainings beyond the annual retraining. JJ	PR) 09/30/2023 Through guidance from licensing inspector through this review, CAO/Director is clear on the expectation for ensuring that all staff receive 15 hours annually on a topic related to the population and services extended to the RYS program. Director will make several classes per year available so that staff can pick and choose what would best meet their needs. Director will ensure that documentation of training is provided on the 'ongoing training' page in each employees file. OLR) Accepted 10/18/2023	9/30/2023
12VAC35-46-320. (3) - The provider shall develop and implement written policies and procedures regarding the supervision of employees, volunteers, contractors, and students/interns. These policies and procedures shall include: 3. How the supervision will be documented.	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: No documentation was available to show type and frequency of staff supervision. JJ	PR) 10/18/2023 Through guidance from licensing inspector through this review, CAO/Director is clear on the expectation for ensuring that all staff supervision and training is properly documented to include type and frequency of all training/supervision contacts with employees. Director will ensure that documentation of training is provided on the 'ongoing training' page in each employees file. OLR) Accepted 10/18/2023	10/15/2023

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12VAC35-46-360. B. (2) - Case managers shall have: 2. A baccalaureate degree in social work or psychology with documented field work experience and shall be supervised by the program director or other staff employed by the provider with the same qualifications; or	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: An inspection was completed 9/19/23 and 4 staff files reviewed. 2 staff (#1 and #2) with case management responsibility had titles of Case Coordinator but did not meet the educational requirements per regulation for Case Management. Plans were not written by a QMHP. While there is one qualified staff that meets the educational requirement, that staff (#3) had not written the plans and was not identified on the plan or job description as the Case manager.JJ	PR) 10/18/2023 All Treatment Plans are developed and written by a Licensed practical Counselor (LPC). The monthly progress updates are updated by QMHPs. RYS Director will ensure that the reports clearly indicate who is generating and updating the reports so that the properly credentialed staff are documented on the reports. Director will ensure that Case Managers are properly credentialed and identified on job descriptions and reports. OLR) Accepted 10/18/2023	10/15/2023
12VAC35-46-780. B. - The provision of case management services shall be documented in each resident's record.	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: Care coordinator notes did not fully describe use of community resources; contacts with family or guardian; planning and meeting with youth. As noted earlier there is not a Case manager per regulation 360 and the Childcare Supervisors are coordinating services. JJ	PR) 10/18/2023 Director will ensure that Case Management notes are more comprehensive to include use of community resources, contacts with family and guardian, and planning and meeting with youth. Case managers will be identified at each house that have the proper credentials. (staffing has been an issue since covid and short staffing nationwide...however director will take steps to fill the positions with credentialed staff). OLR) Accepted 10/18/2023	10/15/2023

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12VAC35-46-790. - Therapy shall be provided by an individual (i) appropriately licensed by the Department of Health Professions to provide mental health therapy or counseling; or (ii) who is eligible for licensure and working under the supervision of a licensed therapist unless exempted from these requirements under the Code of Virginia.	N	Rock Hill Church Rd This regulation was NOT MET as evidenced by: Therapeutic notes were not comprehensive or signed. A staff (#4) identified as the Counselor is a QMHP and not the required LMHP. This was previously cited with another RYS home.	PR) 10/18/2023 Director will ensure that all therapy notes are comprehensive and signed by the appropriately credentialed LMHP or LMHP eligible under the direct supervision of LMHP. OLR) Accepted 10/18/2023	10/15/2023

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General Comments / Recommendations:
420 C Please submit fire Marshall inspection once completed. Reminder: Smoke detectors are required in every bedroom and outside of each separate sleeping area in Virginia. It is recommended that each living area and hallway also have a smoke detector. It is recommended to put a smoke alarm near the kitchen making sure to keep the detector at least 10 feet away from the stove or oven to reduce the number of false alerts.

450 A Please notify OL through the Portal when 2nd bathtub repairs have been completed.

625 Technical assistance given to use narrative section of Daily note/checklist to document additional details of a structured program of care including interventions, training, behavior support, individual and group psychoeducational counseling.

Thanks for all you do to provide quality services! JJ

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.

Jill James, Licensing Specialist	(Signature of Organization Representative)	Date

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