DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1906-14-008**
Organization Name: **The Patches Group, LLC**

Date of Inspection: **03-06-2025**
Program Type/Facility Name: **14-008 Grant Avenue**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-280. A. (3) - There shall be a written job description for each position that, at a minimum, includes the: 3. Job title of the immediate supervisor;	NS	Grant Avenue This regulation was NOT MET as evidenced by: The job description of Employee #2 included a job description , however the job description does not identify the job description of Employee #2's immediate supervisor. This citation is identified as systemic as it was previously cited during the 2024 inspection.	PR) 04/17/2025 Provider The Patches Group (TPG) did not include immediate supervisor in the *Job Description* forms provided in Employee #2's personnel files reviewed by Licensing Specialist on March 6, 2025. This occurred due monthly audits not being completed consistently as a result of the Quality Assurance Manager position being vacant and the Executive Director communicating chain of command verbally to personnel but not including the information documented expressly on the *Job Description* form. Additionally, this has been systematic error due to vacancies in the Quality Assurance Manager position. Corrective action taken place will include employing and maintaining a Quality Assurance Manager task with ensuring regulatory compliance. Additionally, TPG will update the current *Child Care Staff Job Description* form to include job titles of the immediate supervisor as well as hiring and maintaining a Quality Assurance Manager. Job descriptions will be reviewed orally and in writing during ***Employee Orientation*** by the Quality Assurance Manager **(See the attached updated Child Care Staff Job Description form).** The Quality Assurance Manager will be responsible for performing monthly personnel file reviews to ensure that the *Job Description* forms	4/30/2025

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			are updated to reflect the job title of the immediate supervisor and signed by each employee. OLR) Accepted 05/16/2025	
12VAC35-46-300. B. (3) - The records of each employee shall include: 3. Written references or notations of oral references;	N	Grant Avenue This regulation was NOT MET as evidenced by: At the time of the inspection, no reference checks were located in the personnel file of Employee #2.	PR) 04/17/2025 Provider The Patches Group (TPG) did not provide evidence of written references or notations of oral references in personnel file for Employee #2. This error occurred as a result the Executive Director conducting verbal reference checks and failing to document interactions in their file. Corrective action taken place will include using the ***Reference Check Form*** and included it in each employee's file during the ***Employee Orientation***. This error will be rectified by ensuring the agency maintains a Quality Assurance Manager on staff who will conduct monthly resident file reviews to ensure agency's compliance with 12VAC35-46-300 B. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the ***Reference Check Form*** has been completed and signed by the Executive Director. OLR) Accepted 05/16/2025	5/31/2025

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12VAC35-46-310. B. (1a) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1a. Alerting emergency personnel and sounding alarms;	N	Grant Avenue This regulation was NOT MET as evidenced by: The medication management training located in the personnel file of Employee #1 was last completed 10/18/2023. It appears Employee #2 has not completed the annual refresher.	PR) 04/17/2025 Provider The Patches Group (TPG) did not include a record of medication management training in the personnel file of employee #1 nor did the personnel file for employee #2 show evidence of an annual medication refresher being completed during an inspection on March 6, 2025. This error occurred as a result of the provider failing to implement an effective onboarding and auditing process that reviews required trainings. This error will be rectified by provider TPG ensuring required 32-hour medication training and annual medication refreshers for TPG personnel handling medication have been completed. This will be accomplished through monthly audits. A Quality Assurance Manager will be responsible for performing monthly personnel file reviews to ensure required *32-hour medication training and annual medication refreshers* are completed and in each the personnel file. OLR) Accepted 05/16/2025	4/30/2025

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12VAC35-46-660. I. - Entries in a resident's record shall be current, dated, and authenticated by the person making the entry. Errors shall be corrected by striking through and initialing. If records are electronic, the provider shall develop and implement a policy and procedure to identify how corrections to the record will be made.	N	Grant Avenue This regulation was NOT MET as evidenced by: Each Individual record reviewed included progress notes, but the progress notes did not include the signature of the person completing the documentation.	PR) 04/17/2025 During resident record reviews provider, The Patches Group (TPG) did not include evidence of progress notes that included the signature of the person completing the documentation. This occurred due monthly audits of resident files not being completed consistently as a result of the Quality Assurance Manager position being vacant. This error will be rectified by ensuring the agency maintains a Quality Assurance Manager on staff who will conduct weekly ***progress note*** reviews as well as documentation training provided to all staff to cover 12VAC35-46-660. I. TPG provider will actively seek out additional electronic documentation software with digital signatures to assist with daily progress notes and reports. A Quality Assurance Manager will be responsible for performing weekly progress note reviews to ensure daily progress notes are accurate and signed by the staff member responsible. OLR) Accepted 05/16/2025	4/30/2025

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12VAC35-46-670. - Complete written policies and procedures for record reviews shall be developed and implemented that shall evaluate records for completeness, accuracy, and timeliness of documentation. Such policies shall include provisions for ongoing review to determine whether records contain all required service documentation, and release of information documents required by the provider.	N	Grant Avenue This regulation was NOT MET as evidenced by: There is an Abuse History document in the record of Individual #1. Portions of the document were left incomplete with no explanation why. The provider has an authorization of psychotropic medication in the record of Individual #2. The form is not signed by the parent or legal guarding as required.	PR) 04/17/2025 Provider The Patches Group (TPG) left portions of the document titled *Abuse History* blank in the resident file for Individual #1 as well as a form titled *Authorization of Psychotropic Medication* in the resident file for Individual # 2. This was an oversight due to monthly audits not being completed consistently as a result of the Quality Assurance Manager position being vacant. This error will be rectified by provider TPG conducting monthly audits on all resident files. More specifically, resident files for individual #1 and individual #2 will be updated to reflect appropriate signatures. Additionally, with regards to 12VAC35-46-670, training to be completed for all staff as well as policy and procedure updated to reflect resident's records to be audited monthly. A Quality Assurance Manager will be responsible for performing monthly resident file reviews to ensure completeness, accuracy and timeliness of documentation OLR) Accepted 05/16/2025	4/30/2025

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12VAC35-46-720. B. - Each resident's record shall contain, prior to a routine admission, a completed placement agreement signed by a facility representative and the parent, legal guardian, or placing agency.	N	Grant Avenue This regulation was NOT MET as evidenced by: The service record of Individual #1 contained a signed document that did not include all information required to be included in a written placement agreement.	PR) 04/17/2025 Provider The Patches Group (TPG) did not include evidence of a written placement agreement indicating all the required information in the resident file of Individual #1. This too was an oversight due to monthly audits not being completed consistently as a result of the Quality Assurance Manager position being vacant. This error will be rectified by provider TPG conducting monthly audits on all resident files. More specifically, resident files for individual #1 and individual #2 will be updated to reflect appropriate signatures. Additionally, with regards to 12VAC35-46-720, placement agreement training to be completed for all ***House Managers*** completing admissions. A Quality Assurance Manager will be responsible for performing monthly resident file reviews to ensure that the attached updated ***Placement Agreement*** is signed by all parties. OLR) Accepted 05/16/2025	4/30/2025

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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.

Elaine Moser, Regional Manager	(Signature of Organization Representative)	Date

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