

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

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License #: **1906-14-009**
Organization Name: **The Patches Group, LLC**

Date of Inspection: **11-01-2024**
Program Type/Facility Name: **14-009 Garfield**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-280. 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;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employees #1 and #2's job descriptions did not include the job title of the immediate supervisor. Please address how the provider will update the job descriptions to include the job title of the immediate supervisor for each employee.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include immediate supervisor in the <i>Job Description</i> forms provided in Employee #1 and Employee #2's personnel files reviewed by Licensing Specialist on 11/1/24. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include updating the current <i>Employee File Checklist</i> to be used during audits and file reviews (see attachment #1). <i>Job Description</i> forms have been updated to include job titles of the immediate supervisor	1/1/2025

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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>
			(see Attachment #2). A Quality Assurance Manager or Executive Director will be responsible for performing weekly personnel file reviews to ensure that the updated <i>Job Description</i> forms are signed and updated to reflect the job title of their immediate supervisor each staff is tasked with reporting to and signed by each employee. OLR) Accepted 12/16/2024	
12VAC35-46-300. B. (3) - The records of each employee shall include: 3. Written references or notations of oral references;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #1's file did not contain written references or notation of oral references. Please address how the provider will ensure all employee files will contain written references or notation of oral references.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include written references or notation of oral reference in Employee #1's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder . The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role	1/1/2025

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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>
			of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include updating the current <i>Employee File Checklist</i> to be used during audits and file reviews (see attachment #1). Employees will complete a job application with written references provided. The <i>Employee File Checklist</i> will include <i>The Patches Group, LLC Application</i> (see attachment #3) for employment during reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly personnel file reviews to ensure that the written <i>references</i> are provided, or a <i>notation of oral references</i> has been recorded. OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (2a) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2a. Alerting emergency personnel and sounding alarms;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed emergency preparedness training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive emergency preparedness training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of an Emergency Preparedness for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether Emergency Preparedness training included "alerting emergency personnel and sounding alarms". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner:	1/1/2025

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Date of Inspection: **11-01-2024**

Program Type/Facility Name: **14-009 Garfield**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include updating the current <i>Employee File Checklist</i> to be used during audits and file reviews (see attachment #1). This issue will be rectified by completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the Emergency Preparedness training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually	

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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>
			for existing staff and has been recorded to include documentation of completion and alerting emergency personnel and sounding alarms. OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (2b) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2b. Implementing evacuation procedures, including evacuation of residents with special needs (i.e., deaf, blind, nonambulatory);	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed emergency preparedness training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive emergency preparedness training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of an Emergency Preparedness for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether Emergency Preparedness training included "evacuation of residents with special needs". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder . The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify	1/1/2025

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			DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the Emergency Preparedness training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to include documentation of residents with special needs (ie deaf, blind, non-ambulatory). OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (2c) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2c. Using,	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed emergency preparedness training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive emergency preparedness training within 14 days of their hire date and how documentation will be maintained	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of an Emergency Preparedness for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether Emergency Preparedness training included "using and maintaining and operating emergency equipment". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established	1/1/2025

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maintaining, and operating emergency equipment;		in each employees file.	policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the Emergency Preparedness training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to	

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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>
			include documentation of training addressing using, maintaining and operating emergency equipment. OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (2d) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2d. Accessing emergency information for residents including medical information;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed emergency preparedness training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive emergency preparedness training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of an Emergency Preparedness for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether Emergency Preparedness training included "assessing emergency information for residents including medical information". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder . The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child	1/1/2025

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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>
			Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the Emergency Preparedness training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to include documentation of training addressing "assessing emergency information for residents including medical information". OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (2e) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2e. Utilizing community support services.	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed emergency preparedness training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive emergency preparedness training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of an Emergency Preparedness for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether Emergency Preparedness training included "utilizing community support services". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing	1/1/2025

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			Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the Emergency Preparedness training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to include documentation of training addressing	

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			"utilizing community support services". OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (3a) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3a. The objectives of the facility;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed objectives and philosophy training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive objectives and philosophy training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of orientation training for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether orientation training included addressing "objectives of the facility". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder . The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an	1/1/2025

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			<i>Employee Orientation (see attachment #4)</i> once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log (see attachment #5)</i> will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the required training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to include documentation of training addressing "objectives of the facility". OLR) Accepted 12/16/2024	
12VAC35-46-310. A. (3c) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3c. The decision-making plan;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Employee #2's file did not contain documentation showing the employee completed The decision making plan training within 14 days of the hire of 9/12/21. Please address how the provider will ensure all employees receive the decision making plan training within 14 days of their hire date and how documentation will be maintained in each employees file.	PR) 12/06/2024 Provider The Patches Group (TPG) did include a record of orientation training for Employee #2 who did not complete the required training within the (14) days after being hired on 9/12/21, nor was it made clear in Employee #2's file whether orientation training included addressing "the decision-making plan". This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to employee file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than	1/1/2025

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			24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include completing an <i>Employee Orientation</i> (see attachment #4) once every quarter per calendar year in January, March, September and December. The attached <i>TPG Training Log</i> (see attachment #5) will be included in each personnel file outlining the employee's name, title of the training, and when each training was completed. A Quality Assurance Manager or Executive Director will be responsible for performing monthly personnel file reviews to ensure that the required training has been completed during <i>Employee Orientation</i> and within (14) days of new hires as well as annually for existing staff and has been recorded to include documentation of training addressing "the decision-making plan". OLR) Accepted 12/16/2024	
12VAC35-46-720. A. (1) - The facility, except a facility that	N	Garfield	PR) 12/06/2024 Provider The Patches Group (TPG) did not	1/1/2025

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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>
accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 1. Authorizes the resident's placement;		This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	include evidence of a "written placement agreement" authorizing placement in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist</i> (see attachment #6) form during weekly audits and reviews.	

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Organization Name: The Patches Group, LLC

Date of Inspection: 11-01-2024

Program Type/Facility Name: 14-009 Garfield

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements authorizing placement are signed by youth and their guardians. This will be recorded and documented on <i>Resident File Checklist</i>. OLR) Accepted 12/16/2024	
12VAC35-46-720. A. (2) - The facility, except a facility that accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 2. Addresses acquisition of and consent for any medical treatment needed by the resident;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include evidence of a "written placement agreement" addressing "consent for medical treatment needed by the resident" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive	1/1/2025

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License #: 1906-14-009

Organization Name: The Patches Group, LLC

Date of Inspection: 11-01-2024

Program Type/Facility Name: 14-009 Garfield

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached Resident File Checklist (see attachment #6) form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements addressing consent for medical treatment needed by the resident are signed by youth and their guardians. This will be recorded and documented on Resident File Checklist OLR) Accepted 12/16/2024	
12VAC35-46-720. A. (3) - The facility, except a facility that accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 3. Addresses the rights and responsibilities of each party involved;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include evidence of a "written placement agreement" addressing "the rights and responsibilities of each party involved" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing	1/1/2025

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License #: **1906-14-009**

Organization Name: **The Patches Group, LLC**

Date of Inspection: **11-01-2024**

Program Type/Facility Name: **14-009 Garfield**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist (see attachment #6)</i> form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements addressing "the rights and responsibilities of each party involved". This will be recorded and documented on <i>Resident File Checklist</i>. OLR) Accepted 12/16/2024	
12VAC35-46-720. A.	N	Garfield	PR) 12/06/2024	1/1/2025

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Organization Name: The Patches Group, LLC

Date of Inspection: 11-01-2024

Program Type/Facility Name: 14-009 Garfield

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
(4) - The facility, except a facility that accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 4. Addresses financial responsibility for the placement;		This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	Provider The Patches Group (TPG) did not include evidence of a "written placement agreement" addressing "the financial responsibility for the placement" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist</i> (see	

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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>
			attachment #4) form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements the "financial responsibility for the placement" by the resident are signed by youth and their guardians. This will be recorded and documented on <i>Resident File Checklist</i> OLR) Accepted 12/16/2024	
12VAC35-46-720. A. (5) - The facility, except a facility that accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 5. Addresses visitation with the resident;	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include evidence of a "written placement agreement" addressing "visitation with the resident" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2)	1/1/2025

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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>
			interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist (see attachment #4)</i> form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements addressing "visitation with the resident" are signed by youth and their guardians. This will be recorded and documented on <i>Resident File Checklist</i>. OLR) Accepted 12/16/2024	
12VAC35-46-720. A. (6) - The facility, except a facility that accepts admission only upon receipt of the order of a court of competent jurisdiction, shall develop a written placement agreement that: 6. Addresses the education plan for the resident and the responsibilities of all	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include evidence of a "written placement agreement" addressing "education of the resident and the responsibilities of all parties" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed.	1/1/2025

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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>
parties.			This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist</i> (see attachment #6) form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements addressing "education of the resident and the responsibilities of all parties" are signed by youth and their guardians. This will be recorded and documented on <i>Resident File Checklist</i>.	

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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>
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	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a written placement agreement. Please address how the provider will ensure all individual's files will contain a written placement agreement and how it will be maintained in the file.	OLR) Accepted 12/16/2024 PR) 12/06/2024 Provider The Patches Group (TPG) did not include evidence of a " completed written placement agreement "signed by a parent, legal guardian or placing agency" in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result of the provider failing to implement an effective employee orientation or onboarding process that covered required trainings. Employee #2's file did not include appropriate "date" orientation was completed. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews.	1/1/2025

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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>
			Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. This error will be rectified by utilizing the attached <i>Resident File Checklist (see attachment #6)</i> form during weekly audits and reviews. A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that placement agreements are fully completed and are signed by youth, their guardians or a placing agency. This will be recorded and documented on <i>Resident File Checklist</i>. OLR) Accepted 12/16/2024	
12VAC35-46-730. A. - At the time of admission, each resident's record shall include a completed face sheet that contains (i) the resident's full name, last known residence, birth date, birthplace, gender, race, social security number or other unique identifier, religious preference, and admission date; and (ii) names, addresses, and telephone numbers of the resident's legal guardians, placing agency, emergency contacts, and parents, if appropriate.	N	Garfield This regulation was NOT MET as evidenced by: During the course of this inspection, it was determined that Individual #2's file did not contain a face sheet. Please address how the provider will ensure all individual's files will contain a face sheet and how it will be maintained in the file.	PR) 12/06/2024 Provider The Patches Group (TPG) did not include a <i>Face Sheet</i> in individual #2 resident's file reviewed by Licensing Specialist on 11/1/24. This error occurred as a result the agency failing to fill Quality Assurance Manager vacancies in a timely manner leading to the agency's failure to adhere to established policies related to resident's file audits and reviews. Corrective action taken place will include TPG addressing Quality Assurance Manager vacancies in the following manner: Once notice is provided that the Quality Assurance Manager position has become vacant, recruitment shall take place no later than 24-hours of notice. The agency will use online tools such as <i>Zip Recruiter.com</i> and <i>Indeed.com</i> to actively assist with identifying potential candidates for the position. The Executive Director shall schedule a minimum of (2) interviews a week until the position is filled. These efforts shall be recorded, documented and kept in the Quality Assurance Binder. The	1/1/2025

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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>
			Quality Assurance Manager vacancy shall not remain open past (45) calendar days. In the event the vacancy has not been filled within (45) days, the Executive Director will assume the role of Quality Assurance Manager and utilize Child Care staff to assist in File Reviews. Additionally, Executive Director shall notify DBHDS licensing specialist of failure to fill vacancy. Corrective action taken place will also include updating the current <i>Resident File Checklist</i> to be used during audits and file reviews (see attachment #6). <i>Face Sheet</i> shall include resident's full name, last known residence, birth date, birthplace, gender, race, social security number, or other unique identifier, religious preference, admission date, name, addresses, and telephone numbers of legal guardians, placing agencies, emergency contacts and parents if appropriate. (see attachment #7) A Quality Assurance Manager or Executive Director will be responsible for performing weekly resident file audits to ensure that each resident file has a face sheet that include. This will be recorded and documented on <i>Resident File Checklist</i>. OLR) Accepted 12/16/2024	

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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>
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.				
_____ Darragh Walker, Licensing Specialist		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				