

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

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License #: **2172-04-005**

Organization Name: **Kempsville Center for Behavioral Health**

Date of Inspection: **05-09-2025**

Program Type/Facility Name: **04-005 Kempsville Center**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-160. D. (2) - The provider shall collect, maintain, and report or make available to the department the following information: 2. Level II and Level III serious incidents shall be reported using the department's web-based reporting application and by telephone or email to anyone designated by the individual to receive such notice and to the individual's authorized representative within 24 hours of discovery. Reported information shall include the information specified by the department as required in its web-based reporting application, but at least the following: the date, place, and circumstances of the serious incident. For serious injuries and deaths, the reported information shall also include the nature of the individual's injuries or circumstances of the	N	Kempsville Center This regulation was NOT MET as evidenced by: CHRIS Number: 20250008 Date/Time of Discover: 04/19/2025 10:00AM Enter Date/Time: 04/21/2025 11:28AM Reporting Delay: 25:28:00 Location Name: Kempsville Center	PR) 06/02/2025 PR) The Administrator on Call was reminded by the CEO of the process for notification to the Director of Risk Management of all Level II and Level III serious incidents over evenings and weekends to ensure timely reporting to the Office of Human Rights and Licensing. On evenings and weekends, the Administrator on Call is responsible for contacting the Director of Risk Management to provide information regarding serious incidents within a timely manner to ensure entry into CHRIS within the required timeframe. Compliance will be monitored by the Director of Risk Management and direct supervisor will address with individual on any further violations. The Director of Risk Management will report monthly to Quality Council compliance on serious incidents being reported in a timely manner to ensure compliance with reporting to Human Rights and Licensing within the required timeframe. OLR) Accepted 06/24/2025	6/2/2025

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death and any treatment received. For all other Level II and Level III serious incidents, the reported information shall also include the consequences that resulted from the serious incident. Deaths that occur in a hospital as a result of illness or injury occurring when the individual was in a licensed service shall be reported.				

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.

Lakesha Steele, Incident Management
Unit

(Signature of Organization Representative)

Date

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