

**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: **10-03-2025**

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>
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	Kempsville Center This regulation was NOT MET as evidenced by: See OHR citations below.		11/28/2025

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

Date of Inspection: **10-03-2025**

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>
12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	Kempsville Center This regulation was NOT MET as evidenced by: "Neglect" means failure by a person, program, or facility operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, responsible for providing services to do so, including nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of an individual receiving care or treatment for mental illness, intellectual disability, or substance abuse. Employee #1 provided individual #1 with medication #1 in error as mother requested for her not to be on it.	PR) 11/07/2025 PR) Kempsville Center for Behavioral Health submits this Plan of Correction to document the actions taken to address the citation and the allegation of deficiencies with respect to compliance. Following receipt of the allegation made by the guardian, Kempsville's Chief Nursing Officer met with the Nurse involved in the error to obtain information regarding the process failure. The Nurse reported writing the guardian's concern on a sticky note, placing it on the patient's chart and informing the Attending Physician. However, the Physician denied knowledge of the concern. There is no documentation of corrective action with the nurse involved due to the nurse passing away prior to completion of the investigation. All Nurses are trained by the Nurse Educator during New Employee Orientation and annually on the Medication Consent and Education Policy as well as the Medical Orders Policy to ensure knowledge and competency of the appropriate process and procedures and ensuring guardian concerns related to medication are communicated immediately with the attending physician. The Chief Nursing Officer will re-review the identified policies and procedures will all nursing staff and have all nursing staff sign acknowledging receipt of the re-education. Medication errors, trending data (including type of errors) and corrective action for any noncompliance is reported by the Pharmacist monthly to Quality Council. OHR/OLR) Accepted 11/17/2025	11/28/2025

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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.				
_____ Latoya Wilborne, Human Rights		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				