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



License #: **2240-14-008**
Organization Name: **Center for Discovery**

Date of Inspection: **05-06-2024**
Program Type/Facility Name: **14-008 Summit Drive**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-70. - Each provider shall guarantee resident rights as outlined in § 37.2-400 of the Code of Virginia and in the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (12VAC35-115). | N | Summit Drive<br><br>This regulation was NOT MET as evidenced by:<br><br>See OHR citations below. | | |

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| 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 | Summit Drive<br><br>This regulation was NOT MET as evidenced by:<br><br>"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.<br><br>• Due to a preponderance of evidence, including eyewitness statements, staff admissions, the Provider has substantiated A#20240009.<br>• Employee #1 supporting individuals in the group home was found to be intoxicated while providing services.<br>• Employee #1 was observed to have smelled strong of alcohol and mini liquor bottles had been discovered in their personal bag.<br>• The Provider failed to protect Individual #1 from potential harm. | PR) 05/22/2024<br><br>Employee #1 was required to leave the facility immediately upon discovery of their intoxication and was terminated promptly the next day. This incident was unforeseen, and facility leadership's response was urgent and enacted as quickly as possible upon notification.<br><br>Once the alcohol was discovered, the contraband was immediately locked up and destroyed by the Program Manager the next morning.<br><br>All staff are now required to lock their personal bags/belongings in the staff office upon reporting to the facility for all shifts and are prohibited from carrying them around the milieu/in the presence of patients.<br><br>OHR/OLR) Accepted 05/29/2024 | 5/22/2024 |

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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.

| Diana Atcha, Human Rights | (Signature of Organization Representative) | Date |
|---|---|---|

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