DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **2240-14-009**
Organization Name: **Center for Discovery**

Date of Inspection: **11-19-2024**
Program Type/Facility Name: **14-009 Center for Discovery- Monterey**

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	Center for Discovery- Monterey This regulation was NOT MET as evidenced by: 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	Center for Discovery- Monterey 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. • Due to a preponderance of evidence, including witness statements, staff admissions, and failure to follow policy, the provider substantiated A#20240022. • Employee #1 and Employee #2 were preoccupied with other peers and failed to follow provider policy. As a result, Individual #1 climbed out of the bedroom window and eloped from the group home. • Individual #1's right to be free of neglect was violated.	PR) 12/10/2024 We investigated this complaint (A#20240022) per the report to Human Rights and DBHDS. We have enacted the following corrective measures as a result of this incident: 1. Motion Sensor detectors were installed in each patient bedroom and are monitored by staff on duty when patients are present in the bedroom areas. 2. The process was revised where all patients stand in the hallway with staff during hygiene times to ensure all are in line of sight for technician/on duty staff to appropriately monitor their behaviors and whereabouts. 3. One of the employees involved in this incident has since been terminated. 4. All staff were retrained regarding line of sight and proper supervision to prevent a recurrence of this type of incident. OHR/OLR) Accepted 01/07/2025	12/9/2024

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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