DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **04-18-2025**
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.		
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 has substantiated neglect for CHRIS A#20240023.	PR) 04/28/2025 **Corrective Actions and Systemic Improvements made:** **1. Environmental Safety Upgrades Implemented 8/24/24:** a. Motion sensors have been installed in every patient's bedroom. Each sensor emits a distinct chime, allowing staff to immediately identify which room triggered the alert. b. Alarms have been secured to the exterior of each patient room window. These alarms produce a loud, audible alert when tampered with. **2. Revised Supervision Protocols Implemented 8/24/24:**	8/24/2024

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		• It was reported that Employee #1 and Employee #2 were preoccupied with other peers during this time. As a result, Individual #1 was able to create a rope from their blankets and climb out of their bedroom window to elope from home. • Individual #1's right to be free of neglect was violated.	a. During the evening hygiene and wind-down period, all patients remain in the hallway for direct line of sight. Only one patient is permitted in each bathroom at a time to complete nighttime hygiene. b. After hygiene routines are finished, staff escort patients to their bedrooms in groups by room. Once all patients are in bed staff confirm that their motion sensor is active before the next group is escorted. **3. Accountability and Ongoing Monitoring Implemented 8/24/24:** a. PM staff are now required to verify all bedroom motion sensors are on and working once on the bedroom level for windows. b. Overnight staff are responsible for confirming that all sensors remain active and operational throughout the night. c. The Milieu Manager or Program Administrator conducts weekly inspections to ensure that both motion sensors and window alarms are functioning correctly. OHR/OLR) Accepted 04/29/2025	

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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.

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

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