DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **05-13-2026**
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 statement, staff admissions, and failure to follow policy, the Provider substantiated medication-related neglect for CHRIS Report A#20250022. • It was reported that several individuals were attempting to grab Employee #1's attention by	PR) 06/01/2026 **Issue that lead to non-compliance** During medication administration, Employee #1 became distracted by multiple individuals attempting to gain attention outside the medication room. As a result, Employee #1 administered 54 mg of Medication instead of the prescribed 34 mg dose to Individual #1. The medication error was immediately identified, reported, and addressed in accordance with facility policy and physician direction. Employee Identifier #1 received disciplinary action, including a final written warning, and was re-educated on medication administration procedures, dose verification requirements, the Five Rights of Medication Administration, and strategies for maintaining focus during medication administration. Resident rights, including the right to be free from neglect and	1/5/2026

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		knocking and yelling outside of the med room door. There was attempted redirection from staff during this time. However, Employee #1 mistakenly administered 54 mg of Medication #1 instead of the prescribed 34 mg of Medication #1 for Individual #1. • Individual #1's right to be free from neglect was violated.	receive services in a safe manner, were reviewed with staff during retraining. **Systemic Corrective Action** To prevent recurrence of medication-related errors, Center for Discovery implemented the following corrective actions**:** Nursing staff were re-educated on the Five Rights of Medication Administration, with emphasis on verification of the correct medication dose prior to administration. Medication administration interruption protocols were reviewed with all nursing and direct care staff. Direct care staff responsible for line-of-sight supervision will actively redirect individuals away from the medication room area during medication administration whenever clinically appropriate. Staff have been instructed to minimize interruptions to nursing staff during medication administration except in emergency situations. When resident acuity or milieu activity creates excessive interruptions, additional staff support will be requested to assist with resident supervision and to maintain a safe medication-administration environment. Staff assigned to milieu supervision will work proactively to maintain a calm environment during medication administration and reduce unnecessary distractions. Medication administration expectations and interruption-reduction procedures have been incorporated into ongoing staff training and supervision. **Monitoring Plan** The Executive Program Director and Director of	

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			Operations will monitor compliance through ongoing supervisory oversight, random medication administration observations, review of medication variances, leadership rounds, and review of incident reports. Medication administration practices and medication-related incidents will be reviewed through the facility's Quality Assurance and Performance Improvement process on a monthly basis. Direct care staff's adherence to interruption-reduction procedures during medication administration will be monitored through routine leadership observations and coaching opportunities. Any identified deficiencies will be addressed through retraining, corrective action, or increased supervision as indicated. Monitoring began upon implementation of the corrective actions and will continue as part of ongoing quality assurance and risk management activities. **Completion Date** Employee corrective action completed: 12/5/25 Staff re-education completed: 1/5/2026 OHR/OLR) Accepted 06/15/2026	

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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