DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **2240-14-010**
Organization Name: **Center for Discovery**

Date of Inspection: **03-06-2023**
Program Type/Facility Name: **14-010 Burke Lake Road**

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	Burke Lake Road This regulation was NOT MET as evidenced by: See OHR citation below:		5/19/2022
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	Burke Lake Road 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. • By a preponderance of evidence including witness credibility, the provider substantiated neglect for CHRIS #A20220004. • Employee #1 failed to protect Individual #1 from harm when they did not provide appropriate levels of monitoring and supervision to Individual #1.	PR) 03/22/2023 Closet Accessibility Patients will no longer have access to bedroom closets. Patients will have access to storage privacy for clothing and personal belongings. Milieu Manager submitted a work order to have all closets inaccessible. Effective 5/18/2022 Reinforcement of SIR and Human Rights	5/19/2022

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			Policies Policies were developed for the reinforcement of accurate reporting to the state. Virginia Patients Rights CONNECT Provider Portal SIR Reporting Human Rights Violations All staff have a read and verify receipt for policies in the electronic system Zavanta Director of Quality Management Effective 5/19/2022 **Staff Trainings** Intensive mandatory training on mitigating risk, facility guidelines, communications, patient care policy and procedure, managing crisis, line of sight, staff expectations, and being proactive. -Implementation of new practices: -Hygiene times	

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			-Increased visibility in hallway of facility -Assigned seating when being transported CEO Eastern Region conducted the initial training for all staff. Program Director and Milieu Manager will continue monitoring implementation of and compliance with protocols. Program Director and Milieu Manager will conduct monthly fidelity checks. Effective 5/18/2022 OHR/OLR) Partially Accepted 03/24/2023 OHR Response: Please remove ALL names from the CAP response. PR) 04/19/2023 All names have been removed from CAP response OHR/OLR) Partially Accepted 04/20/2023 OHR Response: Staff names should also be removed. CAP is open for editing. PR) 04/20/2023 All names have been removed from CAP response	

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			OHR/OLR) Accepted 04/20/2023	

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.

Ann Pascoe, Human Rights	(Signature of Organization Representative)	Date

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