DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **10-22-2025**
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 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	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. • Due to a preponderance of evidence, including witness statements, and staff admissions, the provider substantiated A#20250003, and #20250004. • The holds Employee #1, Employee #2, Employee #3, and Employee #4 used to attempt to separate Individual #1 and Individual #2 during a physical altercation were not completed soon enough to prevent injury. As a result, there was a delay in separating Individual #1 and Individual #2. • Individual #1 and Individual #2's right to be free of neglect was violated.	PR) 11/11/2025 1. Staff (Behavioral Health Techs/Overnight staff) have been refresher trained (by Program Director) on close supervision during evening and wind down hours, as this was found to be lacking when reviewing this case. Additional room checks are now being conducted during evening shifts. 2. To ensure that all staff are observant of possible aggressive behaviors or the possibility of interactions becoming aggressive, the treatment team will consistently review peer boundaries and interactions daily to enact preventative measures as indicated such as patient distancing, room assignment, processing and reviewing appropriate boundaries with patients as needed. Documentation of this review will be recorded in treatment team meeting notes. 3. To ensure that all staff understand clear directives, this incident and expectations going forward were reviewed with all staff during a staff meeting on 10/2/259 and during shift huddles and hand offs. OHR/OLR) Accepted 11/12/2025	11/11/2025

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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