DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **291-14-008**
Organization Name: **Second Story**

Date of Inspection: **02-14-2023**
Program Type/Facility Name: **14-008 Second Story**

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	Second Story This regulation was NOT MET as evidenced by: See OHR citation below:		

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
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	Second Story 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 staff admission, the provider substantiated neglect for CHRIS #A20220011. • Employee #1 failed to follow policy when they incorrectly applied prescribed Medication#1 to Individual #1, multiple times, due to making incorrect assumptions about the prescribed schedule. • The provider failed to adequately treat and protect Individual #1 from harm.	PR) 03/08/2023 Medication #1 was incorrectly applied due to conflicting instructions on the prescription and medication container, as well as overlooking instructions within medical discharge paperwork. On 10/12/22, the Compliance and Risk Management Officer retrained staff collectively on medication management, including medication administration. Additionally on this date, a program policy was created to require any non-English prescriptions to be translated by a medical professional instead of program staff. This policy will be reviewed on an annual basis by the Compliance and Risk Management Officer during their annual comprehensive review of program policies. OHR/OLR) Accepted 03/10/2023	10/12/2022

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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.

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

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