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 #A20220009. • Employee #1 failed to follow policy when they left the cleaning closet door unlocked allowing for Individual #1 to obtain and drink Substance #1. • The provider failed to adequately protect Individual from harm.	PR) 03/08/2023 The closet containing cleaning supplies was left unlocked and unsupervised by Employee #1 during chores, which went against program policy. The issue was corrected by having the Program Manager individually retrain Employee #1 on program policy. Additionally, the Compliance & Risk Management Officer retrained staff collectively on 7/13/22. There were no systematic issues identified, and the Employee is no longer employed by the program, so no further plan of action can be created at this time. OHR/OLR) Accepted 03/10/2023	7/13/2022

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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