DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **03-06-2023**
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	This regulation was NOT MET as evidenced by: See OHR citation 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	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 admissions, the provider substantiated neglect for CHRIS #A20220004. • Employee #1 did not follow through with manager's bed check instructions for Individual #1 which may have assisted in earlier recognition that Individual #1 was missing from the program. • Employee #1 failed to adequately treat and protect Individual #1 from harm when they did not follow bed check instructions.	PR) 03/29/2023 1. Staff admitted that he did not check on youth during his overnight shift on the night the youth ran away. Program Manager met with Overnight Counselor after the resident ran away to retrain him on the importance of supervising youth through the night. 2. Retraining of all staff. Program Manager talked to all staff during regular case review/staff meeting about the importance of looking for a body part or hair as part of overnight shift responsibilities. No systemic changes were warranted, but review of current policy was completed during May 11 staff meeting. 3. Program Manager and CRMO will monitor to make sure staff stay in compliance with regulation. Program manager will monitor daily overnight checklist weekly and inform CRMO if the need arises for retraining staff. 4. Individual retraining was completed on 4/14/2022. Staff re-training was completed on May 11, 2022 OHR/OLR) Accepted 04/02/2023	5/11/2022

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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