

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

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License #: 2917-14-001

Organization Name: Three Rivers Treatment Center, LLC

Date of Inspection: 10-13-2021

Program Type/Facility Name: 14-001 Three Rivers Treatment Center

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-70. - Compliance with human rights regulations	N	Three Rivers Treatment Center 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). Human Rights Regulations: 12VAC35-115-50 (B)(2): Dignity "In receiving all services, each individual has the right to be protected from harm including abuse, neglect, and exploitation". "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. This regulation was NOT MET as evidenced by: Upon review of CHRIS entries A-20210105 & A-20210106, the provider's investigation determined Employee #1 failed to follow the provider's protocol by allowing more than one individual in the restroom at a time and neglect was found.	PR) 11/04/2021 PR1: Employee #1 was physically attacked by a resident on date of incident and was placed on leave due to his injuries; no staff action was taken initially until his return. On return, staff involved in the incident received counseling and remedial training. Policies on the observation of residents were again reviewed, and procedures for rounding changed to include that all doors on a unit must be checked for their security status during resident checks. When the bathroom is accessed for a resident, staff will station themselves at the bathroom door to insure only one resident utilizes the bathroom at a time. PR2: Daily leadership rounds have been implemented, during which assignment sheets are checked for completion, current and correct observations of residents are confirmed, all precautions are confirmed to be in place at correct monitoring levels, and staff can verbalize handoff communication, code assignments received, scheduled transports and staff break times. Staff assignment sheets must now be approved by the Program Director, or the Nursing Manager in her absence, to ensure that new staff are always paired with experienced staff. Video rounds of all occupied units and classrooms continue to be made at least daily, with any deviations from procedure corrected at the time of discovery. PR3: Risk Management will continue to review the results of leadership and video rounding, reporting performance metrics to the CEO weekly. PR4: (Accounting for forms revision and any additional training) OLR) Accepted 11/18/2021 OHR Accepted 11/12/2021	11/26/2021

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General Comments / Recommendations: Inspection ID: 141 Location: Three Rivers Tx Center Please respond with acceptable corrective action to cheryl.young@dbhds.virginia.gov and tonya.carr@dbhds.virginia.gov by 11/4/2021.				
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.				
Tonya Carr, Legal Operations Manager (Signature of Organization Representative) Date				
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				