License #: **3168-14-009**
Organization Name: **Clementine Twin Lakes, LLC**

Date of Inspection: **05-06-2025**
Program Type/Facility Name: **14-009 Clementine Fairfax**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-850. B. - All medication shall be securely locked and properly labeled.	N	Clementine Fairfax This regulation was NOT MET as evidenced by: At the time of inspection, the medication cabinet that contained syringes and other medical implements used for injecting or cutting skin were not locked.	PR) 07/10/2025 Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation: At the time of inspection, the medication cabinet was not locked. To correct this, all nursing staff will complete documented re-training by August 1, 2025, to ensure the medication cabinet is locked at all times when not in use. Include a plan of action to address systemic change (process/protocols, etc.) that have been or will be implemented to ensure you remain in compliance with the regulation: The Nurse Manager will complete documented audits on a monthly basis for the next 90 days confirming that the medication cabinet remains locked at all times when not in use. Include Staff, by Title, who will monitor the procedures implemented to ensure you stay in compliance the regulation. Indicate the frequency for monitoring the plan, including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist): The Nurse Manager will audit the nursing office on a monthly basis for the next 90 days to ensure the medication cabinet remains locked. Results of these audits will be reviewed and reported for the next 90 days to the Regional Director and Quality and Compliance Manager. Enter the Final Planned Completion date, then include the planned dates for each step of the actions to be taken in the response: The final planned completion date is August 1, 2025; Documented re-training by all nursing staff will	8/1/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			be completed by August 1, 2025; Monthly audits will begin on September 1, 2025 and continue for the next 90 days to ensure ongoing compliance. OLR) Accepted 07/23/2025	
12VAC35-46-850. F. - Medication prescribed by a person authorized by law shall be administered as prescribed.	N	Clementine Fairfax This regulation was NOT MET as evidenced by: At the time of inspection, medication prescribed by a person authorized by law was not administered as prescribed to Individual #1 on April 22nd.	PR) 07/10/2025 Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation: At the time of inspection, medications prescribed by a legally authorized individual were not administered as prescribed to Individual #1. To correct this, all nursing staff will complete documented re-training on proper medication administration by August 1, 2025. Include a plan of action to address systemic change (process/protocols, etc.) that have been or will be implemented to ensure you remain in compliance with the regulation: All nursing staff will complete documented training in medication administration by August 1, 2025. Include Staff, by Title, who will monitor the procedures implemented to ensure you stay in compliance the regulation. Indicate the frequency for monitoring the plan, including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist): The Nurse Manager will audit 100% of medical records on a monthly basis for the next 90 days to ensure medication is administered as prescribed. Results of these audits will be reviewed and reported for the next 90 days to the Regional Director and Quality and Compliance Manager. Enter the Final Planned Completion date, then include the planned dates for each step of the	8/1/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			actions to be taken in the response section as: The final planned completion date is August 1, 2025; Documented re-training for all nursing staff will be completed by August 1, 2025; Monthly audits will begin on September 1, 2025 and continue for the next 90 days to ensure ongoing compliance. OLR) Accepted 07/23/2025	
12VAC35-46-850. I. - Medication refusals shall be documented including action taken by staff.	N	Clementine Fairfax This regulation was NOT MET as evidenced by: At the time of inspection, reason for Medication refusal of Individual #1 was not documented including action taken by staff.	PR) 07/10/2025 Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation: At the time of inspection, the reason for medication refusal and action taken by staff was not documented. To correct this, all nursing staff will complete documented re-training in proper medication refusal documentation by August 1, 2025. Include a plan of action to address systemic change (process/protocols, etc.) that have been or will be implemented to ensure you remain in compliance with the regulation: All nursing staff will complete documented re-training in appropriate medication refusal documentation by August 1, 2025. Include Staff, by Title, who will monitor the procedures implemented to ensure you stay in compliance the regulation. Indicate the frequency for monitoring the plan, including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist): The Nurse Manager will audit 100% of medical records for the next 90 days to ensure medication refusals are properly documented and include reason and actions taken by staff. Results of these	8/1/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			audits will be reviewed and reported for the next 90 days to the Regional Director and Quality and Compliance Manager. Enter the Final Planned Completion date, then include the planned dates for each step of the actions to be taken in the response section as: The final planned completion date is August 1, 2025; Documented re-training for nursing staff will be completed by August 1, 2025; Monthly Audits will begin September 1, 2025 and continue for 90 days. OLR) Accepted 07/23/2025	
12VAC35-46-850. L. - Syringes and other medical implements used for injecting or cutting skin shall be locked.	N	Clementine Fairfax This regulation was NOT MET as evidenced by: At the time of inspection, the medication cabinet that contained syringes and other medical implements used for injecting or cutting skin were not locked.	PR) 07/10/2025 1. Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation: At the time of inspection, the medication cabinet was not locked. To correct this, all nursing staff will complete documented re-training by August 1, 2025 to ensure the medication cabinet is locked at all times when not in use. Include a plan of action to address systemic change (process/protocols, etc.) that have been or will be implemented to ensure you remain in compliance with the regulation: The Nurse Manager will complete documented audits on a monthly basis for the next 90 days confirming that the medication cabinet remains locked at all times when not in use. Include Staff, by Title, who will monitor the procedures implemented to ensure you stay in compliance the regulation. Indicate the frequency for monitoring the plan, including how	8/1/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist): The Nurse Manager will audit the nursing office on a monthly basis for the next 90 days to ensure the medication cabinet remains locked. Results of these audits will be reviewed and reported for the next 90 days to the Regional Director and Quality and Compliance Manager. Enter the Final Planned Completion date, then include the planned dates for each step of the actions to be taken in the response section as: The final planned completion date is August 1, 2025; Documented re-training by all nursing staff will be completed by August 1, 2025; Monthly audits will begin on September 1, 2025 and continue for the next 90 days to ensure ongoing compliance. OLR) Accepted 07/23/2025	

DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date

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.

Shani McGee, Licensing Specialist	(Signature of Organization Representative)	Date

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