License #: **3187-14-009**
Organization Name: **STARS**

Date of Inspection: **11-05-2021**
Program Type/Facility Name: **14-009 Gemini House**

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	Gemini House This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 12/03/2021 Employee 3 was the staff member who the resident disclosed this relationship to. CPS was called and notified immediately and Employee 1 was immediately removed from the schedule and informed that he could not return to the property until further notice. It was later determined before the end of the CPS investigation that Employee 1 would be terminated as he had poor job performance in a few areas (documentation, following the schedule, attending shifts) and the CPS allegation was concerning. Employee 3 also stated that Individual 1 had stated that Employee 2 had been aware of the relationship. Provider removed Employee 2 from the schedule as well pending investigation. Provider cooperated with CPS and all parties throughout investigation. Individual 1 also stated Employee 3 was aware of the relationship with Employee 1 long before Employee 3 reported it to administration and to CPS. Provider removed Employee 3 from the schedule and they were not allowed on unit until they completed the investigation with CPS. The investigation took much longer than standard investigations. Provider was informed by CPS that Employee 2 and Employee 3 were cleared to return to work and both met with administration prior to returning to shifts. Individual 1 had originally stated that he never said Employee 2 was aware of the relationship during the initial investigation. When Individual 1 saw that Employee 2 was returning to the program, he stated that he had not been truthful and Employee 2 was aware. CPS was notified of this and again asked the program to remove Employee 2 from the schedule for another investigation. Employee 2 was informed he	12/6/2021

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			would again be removed from the schedule and he resigned at that time. Employee 3 asked to not return to the same home that Individual 1 worked at and she was able to work in a different home. Employee 3 eventually also resigned due to having another job. Provider checked in frequently with CPS but they had not closed the case for several months stating they were unable to get a hold of Employee 1 to meet. Provider was asked to close their internal investigation in CHRIS before CPS completed their investigation as it was taking too long. Individual 2 denied any knowledge of the incidents. Provider was not able to talk to Employee 1 or Individual 1 directly about the case due to the CPS case taking a long time, the termination of Employee 1, and the discharge of Individual 1 before the case was closed. Provider was informed by CPS that they were just closing case since Employee 1 did not respond to them. Provider was notified on October 25, 2021 that CPS had made a different finding by licensing and received a letter from CPS a few days later on the finding. Staff Supervisor completes Mandated Reporter training with all incoming staff during the onboarding training. Current staff are required to complete this during their annual training as well. Staff Supervisor reviews prohibited actions with all new staff at onboarding training and current staff during annual training in regards to no being allowed to have a sexual relationship with any resident during their time in the program or after their time in the program. Staff were advised to make sure they are documenting when they leave unit to pick up a resident from work and when they return to unit in movement log. These are reviewed by Staff Supervisor and Compliance Coordinator for any concerns.	

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			Additionally, every effort is made that residents are not transported alone in the vehicles with staff and that either another staff member is present or residents. This is not always possible depending on the type of transport but staff are to make every effort to do so for transports to and from work, school events, or other transports which are not private in nature. OLR) Partially Accepted 12/06/2021 12/06/2021: See OHR response below. PR) 12/15/2021 Uploaded documents for evidence of corrective action. OLR) Accepted 01/10/2022	
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	Gemini House This regulation was NOT MET as evidenced by: "Abuse" means any act or failure to act by an employee or other person responsible for the care of an individual in a facility or program operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, that was performed or was failed to be performed knowingly, recklessly, or intentionally, and that caused or might have caused physical or psychological harm, injury, or death to a person receiving care or treatment for mental illness, intellectual disability, or substance abuse. OHR received the disposition letter from the Albemarle County DSS CPS office on October 25, 2021, for CHRIS Abuse 20200038. The letter from DSS notes a Level 1	PR) 12/03/2021 Employee 3 was the staff member who the resident disclosed this relationship to. CPS was called and notified immediately and Employee 1 was immediately removed from the schedule and informed that he could not return to the property until further notice. It was later determined before the end of the CPS investigation that Employee 1 would be terminated as he had poor job performance in a few areas (documentation, following the schedule, attending shifts) and the CPS allegation was concerning. Employee 3 also stated that Individual 1 had stated that Employee 2 had been aware of the relationship. Provider removed Employee 2 from the schedule as well pending investigation. Provider cooperated with	12/6/2021

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		finding for the allegation of sexual abuse due to the following: • Individual 1 remained fairly consistent with the disclosure made to Employee 3 and the Albemarle County Police Department detective regarding the sexual activity between Individual 1 and Employee 1. • Individual 1 does not have a reason to fabricate the disclosure as Individual 1 did not want Employee 1 to get into trouble. • Employee 4 reported rumors regarding Employee 1's sexual relationship with people at STARS previous to Individual 1's disclosure. • Employee 1 told another resident that Employee 1 "messed up" when asked when Employee 1 would return. • Employee 1 would not meet with CPS or law enforcement to be interviewed regarding the allegation. • There is a preponderance of evidence to show Employee 1 sexually abused Individual 1. "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. OHR received the disposition letter from the Albemarle County DSS CPS office on October 25, 2021, for CHRIS Abuse 20200038. The letter from DSS notes a Level 1 finding for the allegation of physical neglect due to the following: • Individual 1 had previously told Employee 2 about	CPS and all parties throughout investigation. Individual 1 also stated Employee 3 was aware of the relationship with Employee 1 long before Employee 3 reported it to administration and to CPS. Provider removed Employee 3 from the schedule and they were not allowed on unit until they completed the investigation with CPS. The investigation took much longer than standard investigations. Provider was informed by CPS that Employee 2 and Employee 3 were cleared to return to work and both met with administration prior to returning to shifts. Individual 1 had originally stated that he never said Employee 2 was aware of the relationship during the initial investigation. When Individual 1 saw that Employee 2 was returning to the program, he stated that he had not been truthful and Employee 2 was aware. CPS was notified of this and again asked the program to remove Employee 2 from the schedule for another investigation. Employee 2 was informed he would again be removed from the schedule and he resigned at that time. Employee 3 asked to not return to the same home that Individual 1 worked at and she was able to work in a different home. Employee 3 eventually also resigned due to having another job. Provider checked in frequently with CPS but they had not closed the case for several months stating they were unable to get a hold of Employee 1 to meet. Provider was asked to close their internal investigation in CHRIS before CPS completed their investigation as it was taking too long. Individual 2 denied any knowledge of the incidents. Provider was not able to talk to Employee 1 or Individual 1 directly about the case due to the CPS case taking a long time, the termination of Employee 1, and the discharge of Individual 1 before the case was closed. Provider was informed by CPS that	

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		Individual 1's sexual relationship with Employee 1. • Although Individual 1 later denied this, Individual 1 became triggered at seeing Employee 2's name again on the schedule and admitted that Individual 1 had not been truthful because Employee 2 was a friend and Individual 1 did not want Employee 2 to get into trouble. • Employee 3 reported Individual 1 had told Employee 3 that Individual 1 had previously told Employee 2 about the sexual relationship with Employee 1. • Although Employee 2 denied the allegation, Employee 2 could not offer a valid explanation as to why Individual 1 would say Individual 1 had previously told Employee 2. • There is a preponderance of evidence to show Employee 2 physically neglected Individual 1 by knowing about the sexual abuse occurring by Employee 1 but failing to report it.	they were just closing case since Employee 1 did not respond to them. Provider was notified on October 25, 2021 that CPS had made a different finding by licensing and received a letter from CPS a few days later on the finding. Staff Supervisor completes Mandated Reporter training with all incoming staff during the onboarding training. Current staff are required to complete this during their annual training as well. Staff Supervisor reviews prohibited actions with all new staff at onboarding training and current staff during annual training in regards to no being allowed to have a sexual relationship with any resident during their time in the program or after their time in the program. Staff were advised to make sure they are documenting when they leave unit to pick up a resident from work and when they return to unit in movement log. These are reviewed by Staff Supervisor and Compliance Coordinator for any concerns. Additionally, every effort is made that residents are not transported alone in the vehicles with staff and that either another staff member is present or residents. This is not always possible depending on the type of transport but staff are to make every effort to do so for transports to and from work, school events, or other transports which are not private in nature. OHR/OLR) Partially Accepted 12/06/2021 OHR Response: Please upload evidence of corrective action - A. Ambrose PR) 12/15/2021	

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			Uploaded evidence of corrective action OHR/OLR) Accepted 01/06/2022	

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.

Tonya Carr, Legal Operations Manager | (Signature of Organization Representative) | Date

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