DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **3187-14-010**
Organization Name: **STARS**

Date of Inspection: **08-08-2023**
Program Type/Facility Name: **14-010 Orion 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	Orion House This regulation was NOT MET as evidenced by: See OHR citation below.		

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12VAC35-115-100. A. (1a) - From admission until discharge from a service, each individual is entitled to: 1. Enjoy all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. These freedoms include: 1a. Freedom to move within the service setting, its grounds, and the community;	N	Orion House This regulation was NOT MET as evidenced by: • While interviewing Employee 1, Employee 1 reported that Individual 1 and Individual 2 engaged in consensual sexual contact when Employee 1 went to unlock the kitchen for a peer. • When asked why the kitchen was locked, Employee 1 reported, "It just is." This is a violation of the individuals' rights to move about the services setting.	PR) 08/28/2023 On 8/9/23 an email came out to all staff stating that kitchen doors cannot be locked, and residents are allowed to walk throughout the house unless there is a therapeutic reason that they will not be able to. OHR/OLR) Accepted 08/28/2023	8/11/2023

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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.

Cassie Purtlebaugh, Human Rights	(Signature of Organization Representative)	Date

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