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



License #: **3187-14-011**
Organization Name: **STARS**

Date of Inspection: **04-05-2022**
Program Type/Facility Name: **14-011**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-410. B. - Residents shall not be solely responsible for support functions including, but not necessarily limited to, food service, maintenance of building and grounds, and housekeeping. | N | This regulation was NOT MET as evidenced by:<br><br>A physical plant inspection of the provider's location was conducted on 4/6/22. During the inspection, LS observed that common area upstairs, the bathrooms, and several of the individuals' bedrooms were not adequately maintained. There was debris (pieces of paper, lint, hair, q-tips) on the carpeting (in the common area and bedrooms) and on the linoleum (bathroom). After LS inquired about the housekeeping practices of the home, Employee #1 noted that staff are supposed to support the individuals receiving services with housekeeping duties/chores. LS notes that during the last physical plant inspection of the provider's location on 8/25/21, several housekeeping concerns were observed and the provider was cited for non-compliance. Given these observations, it does not appear that the provider is appropriately supporting the individuals being served with regular housekeeping functions.<br><br>. | PR) 05/04/2022<br><br>We will discuss violations in our staff meeting on 5/11/2022. Cleanliness will be brought up to the staff development team to ensure staff will be adequately trained to help support the residents in their daily cleaning task. This will be case by case. It will also be reiterated if a resident does not choose to clean then then responsibility falls on staff to complete.<br><br>We are also searching for a good cleaning company. We used one about a month prior to inspection and they did not do an adequate job.<br><br>OLR) Partially Accepted 05/09/2022<br><br>The provider's response is PARTIALLY ACCEPTED.<br><br>Please indicate how the provider will document (in order to provide evidence of) staff training related to daily cleaning expectations.<br><br>PR) 05/31/2022<br><br>For the meeting there will be a sign in sheet. For the staff unable to make the meeting there will be another offering of the discussion, by May 25th to ensure all staff can receive the same instruction.<br><br>OLR) Accepted 07/25/2022 | 5/11/2022 |

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| 12VAC35-46-420. C. - The facility shall document annually after the initial application that buildings and equipment are maintained in accordance with the Virginia Statewide Fire Prevention Code (13VAC5-51). | N | This regulation was NOT MET as evidenced by:<br><br>A physical plant inspection of the provider's location was conducted on 4/6/22. At the time of the inspection, the provider was unable to verify that the building and equipment have been maintained in accordance with the Virginia Statewide Fire Prevention Code. Employee #1 noted that an annul fire inspection had not been completed. | PR) 05/04/2022<br><br>We are waiting for the hood cleaners to contact us back. When we call and we are told they will call us back and never do. The sprinkler system also needs to be inspected then we can schedule when the Fire Marshall can reinspect.<br><br>OLR) Not Accepted 05/09/2022<br><br>The provider's response is NOT ACCEPTED.<br><br>The Department recognizes the challenges associated with the ongoing maintenance of the hood system. The Department also recognizes the need for the sprinkler system to be inspected. However, the noted challenges do not absolve the provider from complying with the noted regulation. Please provide a response that details the steps that the provider is currently taking to correct this deficiency.<br><br>PR) 05/31/2022<br><br>The Fire Marshall inspection will be placed on the calendar. This calendar is accessible to admin and staff. The staff supervisor, maintenance, and the compliance coordinator will ensure that this is done yearly.<br><br>OLR) Accepted 07/25/2022 | 6/6/2022 |

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| 12VAC35-46-440. E. - Outside entrances and parking areas shall be lighted for protection against injuries and intruders. | N | This regulation was NOT MET as evidenced by:<br><br>A physical plant inspection of the provider's location was conducted on 4/6/22. During the inspection, LS observed that the outside light (upstairs fire escape) was not in working order. | PR) 05/04/2022<br><br>This light had a bird's nest in it with active birds and baby birds prior to the inspection. Staff will ensure to check outside lights and complete a repair/maintenance request when needed. This will also be discussed in our staff meeting on 5/11/2022.<br><br>OLR) Accepted 05/09/2022 | 5/11/2022 |

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| 12VAC35-46-540. B. - Adequate kitchen facilities and equipment shall be provided for preparation and serving of meals. | N | This regulation was NOT MET as evidenced by:<br><br>A physical plant inspection of the provider's location was conducted on 4/6/22. During the inspection, LS observed the following concerns related to the kitchen equipment:<br><br>• The oven needed to be cleaned (grease and food particles were observed in the oven).<br>• The area under the kitchen sink needed to be cleaned (debris and stains were observed under the sink). | PR) 05/04/2022<br><br>We will discuss violations in our staff meeting on 5/11/2022. Cleanliness will be brought up to the staff development team to ensure staff will be adequately trained to help support the residents in their daily cleaning task. This will be case by case. It will also be reiterated if a resident does not choose to clean then then responsibility falls on staff to complete.<br><br>OLR) Partially Accepted 05/09/2022<br><br>The provider's response is PARTIALLY ACCEPTED.<br><br>Please indicate how the provider will document (in order to provide evidence of) staff training related to daily cleaning expectations.<br><br>PR) 05/31/2022<br><br>For the meeting there will be a sign in sheet. For the staff unable to make the meeting there will be another offering of the discussion, by May 25th to ensure all staff can receive the same instruction.<br><br>OLR) Accepted 07/25/2022 | 5/11/2022 |

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**General Comments / Recommendations:**
**Please provide a DETAILED description of the corrective actions to be taken which should minimize the possibility that the violation will occur again and correct any systemic deficiencies. Also, proof that the corrective action was taken. For example, if you retrain staff, then you would submit a sign in sheet of the staff who received the training or a certificate of training (if applicable).**

**** LS notes that some facilities contract with professional cleaning services for regularly needed/scheduled housekeeping duties. This is an option that the provider could explore if needed.**

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.

| April Dovel | (Signature of Organization Representative) | Date |
|---|---|---|

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