DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **3311-14-008**
Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **02-14-2023**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

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	Secure Haven Youth Services This regulation was NOT MET as evidenced by: See OHR citation below.		3/6/2023

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12VAC35-115-230. A. (2) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 2. The director of a service licensed or funded by the department shall report each allegation of abuse or neglect via the department's web-based reporting application within 24 hours of receipt of the allegation (see 12VAC35-115-175).	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: • Upon review of CHRIS entry A-20230003, the provider became aware of the incident on 1/12/2023, and the date of entry into CHRIS is 1/27/2023. As a result, the provider failed to report the allegation to the department within 24 hours of receipt.	PR) 02/28/2023 The Program Directore did notify the placing agency within 24 hours of the incident. The Program Director will enter the incident within 24 hours on the CHRIS portal. OHR/OLR) Partially Accepted 03/01/2023 OHR response: The provider's pledged plan of action fails to include specific details of the plan of action to address systematic changes that have been or will be implemented to ensure the provider remains in compliance of the regulation. The provider is requested to provide specific details of how the corrective action plan will be monitored, the frequency for monitoring, and who will be responsible for the monitoring. (Ex: monthly audits, weekly chart reviews, daily checklist). PR) 03/06/2023 The Program Director will ensure that serious incidents of Level 2 and Level 3 are entered in the CHRIS system within 24 hours of the incident. The Program Director will ensure the incident reports are sent to the placing agency within 24 hours of the incident and monitor the reports daily. OHR/OLR) Accepted 03/06/2023	3/6/2023

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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.

Andrea Milhouse, Human Rights	(Signature of Organization Representative)	Date

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