DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-280. A. (1) - There shall be a written job description for each position that, at a minimum, includes the: 1. Job title;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review, including a written job description that includes the job title. Please submit a detailed plan to ensure that future employee records include written job descriptions that include job titles and that they are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The job description was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee records are available for review at the time of inspection. Employee 1 has a written job description that includes a job title in his employee file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-280. A. (2) - There shall be a written job description for each position that, at a minimum, includes the: 2. Duties and responsibilities of the incumbent;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review, including a written job description that includes duties and responsibilities. Please submit a detailed plan to ensure that future employee records include written job descriptions that include duties and responsibilities and that they are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The job description to include duties and responsibilities was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee files are available for review at the time of the inspection. Employee 1 has a written job description that include duties and responsibilities in his employees file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-280. A. (3) - There shall be a written job description for each position that, at a minimum, includes the: 3. Job title of the immediate supervisor;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review, including a written job description that includes the job title of the immediate supervisor. Please submit a detailed plan to ensure that future employee records include written job descriptions that include job title of the immediate supervisor and that they are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The job description that included the title of the immediate supervisor was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee files are available for review at the time of the inspection. Employee 1 has a written job description that include job title of immediate supervisor and it is placed in his employee file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-280. A. (4) - There shall be a written job description for each position that, at a minimum, includes the: 4. Minimum education, experience, knowledge, skills, and abilities required for entry-level performance of the job.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review, including a written job description that includes minimum education, experience, knowledge, skills, and abilities required for entry-level performance of the job. Please submit a detailed plan to ensure that future employee records include written job descriptions that include minimum education, experience, knowledge, skills, and abilities required for entry-level performance of the job and that they are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The job description was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee files are available for review at the time of the inspection. Employee 1 has a written job description that include include minimum education, experience, knowledge, skills, and abilities required for entry-level performance of the job and that they are available for review. These items are placed in his employee file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (1) - The records of each employee shall include: 1. A completed employment application form or other written material providing the individual's name, address, phone number, and social security number or other unique identifier;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included a completed employment application form or other written material providing the individual's name, address, phone number, and social security number or other unique identifier. Please submit a detailed plan to ensure that future employees' personnel records include a completed employment application form or other written material providing the individual's name, address, phone number, and social security number or other unique identifier and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The employment resume was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee file is available for review at the time of the inspection to include a completed written material providing the individual's name, address, phone number, and unique identifier. These items are in Employee 1 personnel file. OLR) Accepted 07/07/2025	2/27/2025

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12VAC35-46-300. B. (10) - The records of each employee shall include: 10. A current job description.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included a current job description. Please submit a detailed plan to ensure that future employees' personnel records include a current job description and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The job description was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 has a current job description in his personnel file to review. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (2) - The records of each employee shall include: 2. Educational background and employment history;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included educational background and employment history. Please submit a detailed plan to ensure that future employees' personnel records include educational background and employment history and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The educational background and history was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee files are available for review at the time of inspection. Employee 1 did receive a background check and employment history is in in his employee file for review. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (3) - The records of each employee shall include: 3. Written references or notations of oral references;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included written references or notations of oral references. Please submit a detailed plan to ensure that future employees' personnel records include written references or notations of oral references and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The references was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee file is available to review at the time of the inspection. The CEO did check written references on Employee 1 and the references are in his personnel file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (4) - The records of each employee shall include: 4. Reports of required health examinations;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included reports of required health examinations. Please submit a detailed plan to ensure that future employees' personnel records include reports of required health examinations and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The TB screening was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file is available at the time of the inspection. Employee 1 did receive the required health examinations and they are located in his employee file. OLR) Accepted 07/07/2025	2/27/2025
12VAC35-46-300. B. (5) - The records of each employee shall include: 5. Annual performance evaluations;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual performance evaluations. Please submit a detailed plan to ensure that future employees' personnel records include annual performance evaluations and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The annual reviews was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the employee file is available at the time of the inspection. Employee 1 recevied an annual review and it is documented in his employee file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (6) - The records of each employee shall include: 6. Date of employment for each position held and separation;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included date of employment for each position held and separation. Please submit a detailed plan to ensure that future employees' personnel records include date of employment for each position health and separation and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The date of employment was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (7) - The records of each employee shall include: 7. Documentation of compliance with requirements of Virginia laws regarding child protective services and criminal history background investigations;	N	**HEALTH AND SAFETY VIOLATION** Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of compliance with requirements of Virginia laws regarding child protective services and criminal history background investigations. Please submit a detailed plan to ensure that future employees' personnel records include documentation of compliance with requirements of Virginia laws regarding child protective services and criminal history background investigations and are available for review. Please submit the background check documentation for Employee #1 for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The child registry investigation and criminal background history is in the employee file OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received a criminal background check and child protective services check at the time of employment. This information can be researched on the DBHDS website. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (8) - The records of each employee shall include: 8. Documentation of educational degrees and of professional certification or licensure;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of educational degrees and of professional certification or licensure. Please submit a detailed plan to ensure that future employees' personnel records include documentation of educational degrees and of professional certification or licensure and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The education record was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 education has been documented in his personnel file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (9) - The records of each employee shall include: 9. Documentation of all training required by these regulations and any other training received by individual staff;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of all training required by these regulations and any other training received by individual staff. Please submit a detailed plan to ensure that future employees' personnel records include documentation of all training required by these regulations and any other training received by individual staff and are available for review.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. All the required training and annual training was in the employee file. The inspector reviewed other employee files and saw no discrepancies. This employee has been with my agency since 2019. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training and it is in his personnel file for review. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (1) - Required initial training: 1. Within seven days following their begin date, each staff member responsible for supervision of children shall receive basic orientation to the facility's behavior intervention policies, procedures, and techniques regarding less restrictive interventions, timeout, and physical restraint.	NS	Secure Haven Youth Services This regulation was NOT MET (SYSTEMIC) as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included training documentation of basic orientation to the facility's behavior intervention policies, procedures, and techniques regarding less restrictive interventions, timeout, and physical restraint. Please submit a detailed plan to ensure that future employees' personnel records include training documentation of basic orientation to the facility's behavior intervention policies, procedures, and techniques regarding less restrictive interventions, timeout, and physical restraint and are available for review. Previously cited on June 23, 2023.	PR) 02/27/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The training was completed and documented and was placed in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include the facility's behavior interventions policies, procedures, and techniques regarding less restriction interventions, timeout, and physical restraint. All documentation is placed in the personnel file. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (2a) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2a. Alerting emergency personnel and sounding alarms;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of emergency preparedness and response training regarding alerting emergency personnel and sounding alarms. Please submit a detailed plan to ensure that future employees' personnel records include documentation of emergency preparedness and response training regarding alerting emergency personnel and sounding alarms and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required emergency preparedness and response training regarding alerting emergency personnel and sounding alarms. The documentation in in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (2b) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2b. Implementing evacuation procedures, including evacuation of residents with special needs (i.e., deaf, blind, nonambulatory);	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of emergency preparedness and response training regarding implementing evacuation procedures, including evacuation of residents with special needs. Please submit a detailed plan to ensure that future employees' personnel records include documentation of emergency preparedness and response training regarding implementing evacuation procedures, including evacuation of residents with special needs, and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include evacuation procedures including evacuation of residents with special needs. The documentation is in the employess personnel file. OLR) Accepted 07/07/2025	2/28/2025

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12VAC35-46-310. A. (2c) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2c. Using, maintaining, and operating emergency equipment;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of emergency preparedness and response training regarding using, maintaining, and operating emergency equipment. Please submit a detailed plan to ensure that future employees' personnel records include documentation of emergency preparedness and response training regarding using, maintaining, and operating emergency equipment and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1received the required training within 14 days of employment. The provider will ensure that the employee will have documentation to show that employee 1 is in his personnel record for using, maintaining, and operating emergency equipment. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (2d) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2d. Accessing emergency information for residents including medical information;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of emergency preparedness and response training regarding accessing emergency information for residents including medical information. Please submit a detailed plan to ensure that future employees' personnel records include documentation of emergency preparedness and response training regarding accessing emergency information for residents including medical information and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 has received the requied traiing to include emergency preparedness and response regarding accessing emergency information for residents including medical information. The documentation is in the employee file. OLR) Accepted 07/07/2025	2/28/2025

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12VAC35-46-310. A. (2e) - Required initial training: 2. Within 14 days following an individual's begin date, and before an individual is alone supervising children, the provider shall conduct emergency preparedness and response training that shall include: 2e. Utilizing community support services.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included documentation of emergency preparedness and response training regarding utilizing community support services. Please submit a detailed plan to ensure that future employees' personnel records include documentation of emergency preparedness and response training regarding utilizing community support services and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include emergency preparedness and response regarding utilizing community support services. The documentation is in the personnel file. OLR) Accepted 07/07/2025	2/28/2025

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12VAC35-46-310. A. (3a) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3a. The objectives of the facility;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included orientation and training regarding the objectives of the facility. Please submit a detailed plan to ensure that future employees' personnel records include orientation and training regarding the objectives of the facility and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include orientation and objectives of the facility. The documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (3b) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3b. Practices of confidentiality;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included orientation and training regarding practices of confidentiality. Please submit a detailed plan to ensure that future employees' personnel records include orientation and training regarding practices of confidentiality and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include orientation and training regarding practices of confidentiality. The documentation is placed in the employee file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (3c) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3c. The decision-making plan;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included orientation and training regarding the decision-making plan. Please submit a detailed plan to ensure that future employees' personnel records include orientation and training regarding the decision-making plan and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include orientation and decision making plan. The documentation is placed in the employee file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (3d) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3d. These regulations including the prohibited actions as outlined in this regulation;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included orientation and training regarding these regulations included the prohibited actions as outlined in this regulation. Please submit a detailed plan to ensure that future employees' personnel records include orientation and training regarding these regulations included the prohibited actions as outlined in this regulation and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training to include orientation regarding regulation of prohibited actions as outlined in the regulations. Documentation has been placed in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (3e) - Required initial training: 3. Within 14 days following their begin date, new employees, employees transferring from other facilities operated by the same provider, relief staff, volunteers, and students/interns shall be given orientation and training regarding: 3e. Other policies and procedures that are applicable to their positions, duties, and responsibilities.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included orientation and training regarding other policies and procedures that are applicable to their positions, duties, and responsibilities. Please submit a detailed plan to ensure that future employees' personnel records include orientation and training regarding other policies and procedures that are applicable to their positions, duties, and responsibilities and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required training that are applicable to their positions, duties, and responsibilities. The documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (4) - Required initial training: 4. Within 30 days following their begin date, all staff working with residents shall be enrolled in a standard first aid class and in a cardiopulmonary resuscitation class facilitated by the American Red Cross or other recognized authority, unless the individual is currently certified in first aid and cardiopulmonary resuscitation.	N	**HEALTH AND SAFETY VIOLATION** Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included current first aid and CPR certification. Please submit a detailed plan to ensure that future employees' personnel records include current first aid and CPR certification and are available for review. Please submit the first aid and CPR certification for Employee #1 for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The CPR training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 did receive the required CPR and First Aid training and documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (5) - Required initial training: 5. Within 30 days following their begin date, all staff working with residents shall be trained in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included training in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention. Please submit a detailed plan to ensure that future employees' personnel records include training in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the rquired trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (6) - Required initial training: 6. Within 30 days following their begin date, all staff shall be trained on the facility's policies and procedures regarding standard precautions.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included training on the facility's policies and procedures regarding standard precautions.. Please submit a detailed plan to ensure that future employees' personnel records include training on the facility's policies and procedures regarding standard precautions and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the rquired trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **12-13-2024**
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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (7) - Required initial training: 7. Within 30 days following their begin date, all staff shall be trained on appropriate siting of children's residential facilities, and good neighbor policies and community relations.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included training on appropriate siting of children's residential facilities and good neighbor policies and community relations. Please submit a detailed plan to ensure that future employees' personnel records include training in appropriate siting of children's residential facilities and good neighbor policies and community relations and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the rquired trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (8) - Required initial training: 8. Before administering medication, all staff responsible for medication administration shall have successfully completed a medication training program approved by the Board of Nursing or be licensed by the Commonwealth of Virginia to administer medications.	N	**HEALTH AND SAFETY VIOLATION** Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included evidence of a completed medication training program as staff responsible for medication administration. Please submit a detailed plan to ensure that future employees' personnel records include evidence of completion of a medication training program for staff responsible for medication administration and are available for review. Please submit evidence of the completion of medication administration training for Employee #1 for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the Medication Administraing trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (9) - Required initial training: 9. All staff shall be trained in any area of quality improvement as identified from the results of the quality improvement plan.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included training in any area of quality improvement as identified from results of the quality improvement program. Please submit a detailed plan to ensure that future employees' personnel records include training in any area of quality improvement as identified from results of the quality improvement program and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required trainging for quility implrovement and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **12-13-2024**
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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (1a) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1a. Alerting emergency personnel and sounding alarms;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher emergency preparedness and response training regarding alerting emergency personnel and sounding alarms. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher emergency preparedness and response training regarding alerting emergency personnel and sounding alarms and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (1b) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1b. Implementing evacuation procedures, including evacuation of residents with special needs (i.e., deaf, blind, nonambulatory);	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher emergency preparedness and response training regarding implementing evacuation procedures including evacuation of residents with special needs. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher emergency preparedness and response training regarding implementing evacuation procedures including evacuation of residents with special needs and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (1c) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1c. Using, maintaining, and operating emergency equipment;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher emergency preparedness and response training regarding using, maintaining, and operating emergency equipment. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher emergency preparedness and response training regarding using, maintaining, and operating emergency equipment and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required annual trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (1d) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1d. Accessing emergency information for residents including medical information;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher emergency preparedness and response training regarding accessing emergency information for residents including medical information. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher emergency preparedness and response training regarding accessing emergency information for residents including medical information and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required annual training and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (1e) - Required annual retraining: 1. All employees, contractors, students/interns, and volunteers shall complete an annual refresher emergency preparedness and response training that shall include: 1e. Utilizing community support services.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher emergency preparedness and response training regarding utilizing community support services. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher emergency preparedness and response training regarding utilizing community support services and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/20/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required annual retraining and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (2) - Required annual retraining: 2. All staff who administer medication shall complete annual refresher medication training.	N	**HEALTH AND SAFETY VIOLATION** Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher medication training. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher medication training for all staff who administer medications and are available for review. Please submit annual refresher medication training documentation for Employee #1 for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required annual refresher trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (3) - Required annual retraining: 3. All child care staff shall receive annual retraining on the provider's behavior supports and timeout policies and procedures.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher training on provider's behavior supports and timeout policies and procedures. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher training on the provider's behavior supports and timeout policies and procedures and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the rquired trainging and the documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (4) - Required annual retraining: 4. All staff working with residents shall receive annual retraining in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher training in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, interaction among staff and residents, and suicide prevention. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher training in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, interaction among staff and residents, and suicide prevention and are available for review.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employee 1 received the required annual training for child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, interaction among staff and residents, and suicide prevention. The documentation is in his personnel file. OLR) Accepted 07/07/2025	2/28/2025

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Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. B. (5) - Required annual retraining: 5. All staff shall receive annual retraining on the provider's policies and procedures regarding standard precautions.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, personnel records for Employee #1 were not available for review. Provider failed to ensure that personnel records for Employee #1 were available for review and included annual refresher training on the provider's policies regarding standard precautions.. Please submit a detailed plan to ensure that future employees' personnel records include annual refresher training on the provider's policies and procedures regarding standard precautions.	PR) 02/28/2025 Dispute. The inspector declined to meet with the provider at the time of the inspection. The provider was 1 hour away at a meeting. The required training was in the employee file. OLR) Not Accepted 05/19/2025 This citation is being upheld. Please respond with a Corrective Plan. PR) 06/18/2025 The CEO/provider will ensure that the personnel file are available to review at the time of the inspection. Employye 1 received annual medication administration training and the documentation is placed in his personnel file. OLR) Accepted 07/07/2025	2/28/2025
12VAC35-46-590. A. - The facility's grounds shall be safe, properly maintained, and free of clutter and rubbish. The grounds include, but are not limited to, all areas where residents, staff, and visitors may reasonably be expected to have access, including roads, pavements, parking lots, open areas, stairways, railings, and potentially hazardous or dangerous areas.	N	**HEALTH AND SAFETY VIOLATION** Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, the house was cluttered with broken furniture and was generally unclean. One of the residents' rooms had multiple pieces of broken furniture that had been broken by a previous resident who had been discharged a few months prior. The kitchen was not properly cleaned, the baseboards where covered in dust, and one of the showers had a large insect in a cobweb in the corner. One doorknob was not properly affixed in the door and the shower head was installed in an open hole in the wall. One of the living room windows was full of broken glass, also broken by a previous resident from months before, another window had a bullet hole in it, and outside in the yard underneath the same window was a pile of	PR) 02/28/2025 The provider has ensured the building and grounds are properly maintained. An inspector came unannounced and saw the conditions of the facility. OLR) Partially Accepted 05/20/2025Please submit details regarding the repairs initiated and completed. PR) 06/18/2025 The CEO/provider will ensure that the grounds is free of clutter and in working order. Quality assurance will be conducted weekly to ensure we are in compliance. OLR) Partially Accepted 07/07/2025There were items inspected that required repair, including a	2/28/2025

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Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
		broken glass. Provider failed to ensure that the interior and exterior of all buildings were safe, properly maintained, clean, and in good working order. Please submit a detailed plan to ensure that the interior and exterior of all buildings are safe, properly maintained, clean, and in good working order.	doorknob not properly affixed to the door, a shower head without a flange, and two broken living room windows. Please submit details regarding the repairs initiated and completed. PR) 07/09/2025 The CEO and staff will ensure that the interior and exterior of the house is safe and properly maintained and in good working order by doing daily checks and fixing anything that is broken. OLR) Partially Accepted 07/29/2025Please submit evidence of repairs completed on the specific items mentioned in the citation. Please include dates of repair, copies of work orders, photos of repairs, or any other documentation that the repairs have been completed. PR) 08/07/2025 Thank you for taking the time to outline the concerns and expectations in the Corrective Action Plan. I appreciate the opportunity to reflect on my performance and take meaningful steps toward improvement. I understand the areas that require attention, particularly [briefly mention the key issue(s) identified-e.g., cleanliness, broken furniture, kitchen etc.], and I take full responsibility for addressing them. I am committed to meeting the outlined expectations and have already begun implementing the following steps: [Step 1]: [e.g., Adjusting my workflow to ensure deadlines are consistently met] [Step 2]: [e.g., Participating in additional training or seeking mentorship to strengthen specific skills]	

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Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **12-13-2024**
Program Type/Facility Name: **14-008 Secure Haven Youth Services**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			[Step 3]: [e.g., Establishing regular check-ins to ensure alignment and transparency] I value my role within the team and remain dedicated to contributing positively to our shared goals. Please let me know if there are additional resources or feedback that would support my progress. I welcome continued dialogue and am open to any further guidance you may have. Please note due to the conditions of the house and the landlord not addressing my concerns, we have temporarily moved to another location until I find permanent residence for the them. We moved out as of July 9, 2025. The broken furniture was removed and the entire house was cleaned prior to our departure including removal of the broken glass. Thank you again for your support and for providing a clear path forward. OLR) Accepted 09/03/2025	

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Date of Inspection: **12-13-2024**
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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-80. B. - The provider shall submit to the department and implement a written corrective action plan for each regulation for which the provider is found to be in noncompliance.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: Upon review of the documents, it was discovered that the provider had been previously cited for not demonstrating that within seven days of hire, Employee #1 received basic orientation regarding behavior intervention policies and procedures, techniques regarding less restrictive interventions, timeout, and physical restraint or basic orientation regarding child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention; The provider did not show proof that the provider's approved CAP related to 310 A.1 and 310 A.5 from June 23, 2023 was implemented and monitored. Previously cited on June 23, 2023.	PR) 02/27/2025 Dispute. This employee did receive the required training. OLR) Not Accepted 05/19/2025This citation is being upheld. Please respond with a Corrective Action Plan. PR) 06/18/2025 Employee #1 received basic orientation regarding behavior intervention policies and procedures, techniques regarding less restrictive interventions, timeout, and physical restraint or basic orientation regarding child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention;. His employee record has be reviewed by previous inspector and was approved. His employee file is on site to be reviewed. The CEO will ensure that all files are available to be reviewed at the time of inspection. OLR) Accepted 07/07/2025	2/27/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-800. A. (1) - There shall be evidence of a structured program of care designed to: 1. Meet the residents' physical and emotional needs;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a structured program of care was not provided for review. Provider failed to ensure that a structured plan of care designed to meet the residents' physical and emotional needs was provided for review. Please submit a detailed plan to ensure that the provider has a structured plan of care designed to meet the residents' physical and emotional needs and that it is made available for review during annual inspections.	PR) 02/28/2025 The provider will ensure that the schedule of activities is available for review and posted. OLR) Accepted 05/20/2025	2/28/2025
12VAC35-46-800. A. (2) - There shall be evidence of a structured program of care designed to: 2. Provide protection, guidance, and supervision;	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a structured program of care was not provided for review. Provider failed to ensure that a structured plan of care designed to provide protection, guidance, and supervision was provided for review. Please submit a detailed plan to ensure that the provider has a structured plan of care designed to provide protection, guidance, and supervision and that it is made available for review during annual inspections.	PR) 02/28/2025 The provider will ensure that the schedule of activities is available for review and posted. OLR) Accepted 05/20/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-800. A. (3) - There shall be evidence of a structured program of care designed to: 3. Meet the objectives of any required individualized service plan.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a structured program of care was not provided for review. Provider failed to ensure that a structured plan of care designed to meet the objectives of any required individualized service plan was provided for review. Please submit a detailed plan to ensure that the provider has a structured plan of care designed to meet the objectives of any required individualized service plan and that it is made available for review during annual inspections.	PR) 02/28/2025 The provider will ensure that the schedule of activities is available for review and posted. OLR) Accepted 05/20/2025	2/28/2025
12VAC35-46-800. B. - There shall be evidence of a structured daily routine designed to ensure the delivery of program services.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a structured daily routine designed to ensure the delivery of program services was not provided for review. Provider failed to ensure that a structured daily routine designed to ensure the delivery of program services was provided for review. Please submit a detailed plan to ensure that the provider has a structured daily routine designed to ensure the delivery of program services and that it is made available for review during annual inspections.	PR) 02/28/2025 The provider will ensure that the schedule of activities is available for review and posted. OLR) Accepted 05/20/2025	2/28/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-800. C. - A daily communication log shall be maintained to inform staff of significant happenings or problems experienced by residents.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a daily communication log to inform staff of significant happenings or problems experienced by residents was not provided for review. Provider failed to ensure that a daily communication log to inform staff of significant happenings or problems experienced by residents was maintained and provided for review. Please submit a detailed plan to ensure that the provider maintains a daily communication log to inform staff of significant happenings or problems experienced by residents and it is available for review.	PR) 02/28/2025 The daily log was available for review. The provider will ensure the daily log is available for the licensing inspector is available for review. OLR) Accepted 05/20/2025	2/28/2025
12VAC35-46-850. F. - Medication prescribed by a person authorized by law shall be administered as prescribed.	N	Secure Haven Youth Services This regulation was NOT MET as evidenced by: At the time of the inspection, a review of the medication bubble packs for Individual #1 found multiple discrepancies. When reviewing the 11/15/24 bubble pack for Medication #1, doses for 1-4, 6, 7, 9, 11-13, and 29 had been removed. It was unclear what doses from the bubble pack corresponded with what dates on the medication administration record. When reviewing the 9/15/24 bubble pack for Medication #2, doses for 1-3, 10, 11, 13, and 17 had been removed. It was unclear what doses from the bubble pack corresponded with what dates on the medication administration record.	PR) 02/28/2025 The medication is administered as prescribed. We received new residents and they came with old outdated medications. The provider will ensure that the bubble packs will coincide with the MAR when the medication is administered as prescribed. OLR) Partially Accepted 05/20/2025Please submit timeline on staff retraining on medication administration. PR) 06/18/2025 The CEO/provider will ensure that the medication bubble packs coincide with the distribution of medication being administered. The staff will lable the bubble packs when they arrive at the facility to incude date and time of arrival to include the medication count.	2/28/2025

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		When reviewing the 12/4//24 bubble pack for Medication #3, the doses were marked to start with 7 but no doses were given until 11. When asked, Employee #1 stated that they had been left on the porch for four days until they had been found. Provider failed to ensure that medication prescribed by a person authorized by law was administered as prescribed. Please submit a detailed plan to ensure that medications prescribed by a person authorized by law is administered as prescribed.	OLR) Partially Accepted 07/07/2025Please submit information regarding staff retraining on medication administration. PR) 07/09/2025 The CEO will ensure that the staff receives annual retraining on medication management. The staff will administer the medication as prescribed. OLR) Accepted 07/29/2025 PR) 07/09/2025OLR) Partially Accepted 07/29/2025Please submit evidence of the retraining staff have received on medication management, including the dates retraining occured or any certificates given. PR) 08/07/2025 Good Afternoon, I am writing in response to the citation regarding the recent medication dispensing error. I want to first acknowledge the seriousness of the issue and express my sincere regret for the oversight. Patient safety is a top priority, and I understand the potential impact that even a single error can have on trust, health outcomes, and compliance standards. Upon reviewing the incident, I recognize that [briefly describe the nature of the error-e.g., incorrect dosage, timing, or documentation]. I take full responsibility and am committed to ensuring this does not happen again. To address the issue and prevent recurrence, I have taken the following steps: Reviewed the medication dispensing protocols	

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			thoroughly to reinforce proper procedures. Completed a refresher training on dosage verification, documentation accuracy, and patient communication. Implemented a double-check system for all future dispensing tasks, including cross-referencing with patient records and prescriptions. Requested feedback and guidance from senior staff to ensure alignment with best practices and regulatory standards. I appreciate the opportunity to correct this mistake and grow professionally. Please let me know if there are additional steps I should take or documentation I need to provide. I remain committed to upholding the highest standards of care and compliance. Thank you for your understanding and support. Listed below are the dates that the staff have been retrained. Week of 12/16 - 12/20 (Each day we had individual retraining with each staff member on their respective schedule. Then we have a quality check thereafter to ensure compliance of meditation dispensing. OLR) Accepted 09/03/2025	

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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.

Lauren Faszewski, Licensing Specialist	(Signature of Organization Representative)	Date

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