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



License #: **3311-14-009**
Organization Name: **Secure Haven Youth Services, LLC**

Date of Inspection: **11-21-2022**
Program Type/Facility Name: **14-009 Liberty House**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-1070. A. - Any serious incident, accident, or injury to the resident; any overnight absence from the facility without permission; any runaway; and any other unexplained absence shall be reported within 24 hours (i) to the placing agency; (ii) to either the parent or legal guardian, or both as appropriate; and (iii) noted in the resident's record. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>Review of Individual #1's record reviewed that he individual was provided medical attention by a physician two times between July 2022 and Sept 2022, however, this incident was not documented within the state reporting system. | PR) 11/27/2022<br><br>The individual #1 subcumbed his injuries at school and was not aware that we had to report to the state reporting system. The provider did take the resident to the doctor due to a health complaint. The state reporting system was updated to include the incident. The CEO will inform the staff to document all injuries that require medical attention to the state reporting system.<br><br>OLR) Accepted 11/29/2022 | 11/27/2022 |
| 12VAC35-46-590. B. - The interior and exterior of all buildings shall be safe, properly maintained, clean, and in good working order. This includes, but is not limited to, required locks, mechanical devices, indoor and outdoor equipment, and furnishings. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>Upon review of the physical environment it is noted that the home is in need of cleaning and bring properly maintained by the provider and landlord, example bathrooms were not cleaned recently, the kitchen counters and dinning table had crumbles from breakfast, door frames and walls are in need of fresh paint. | PR) 11/27/2022<br><br>The Program Director shall ensure the house is cleaned daily. The staff on shift will ensure that the chores will be done on each shift to include cleaning the bathrooms, kitchen, and living areas. The landlord has agreed to paint the door frames and walls. The staff on shift will do daily checks to make sure the house is clean per regulations.<br><br>OLR) Accepted 11/29/2022 | 11/23/2022 |

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| 12VAC35-46-670. - Complete written policies and procedures for record reviews shall be developed and implemented that shall evaluate records for completeness, accuracy, and timeliness of documentation. Such policies shall include provisions for ongoing review to determine whether records contain all required service documentation, and release of information documents required by the provider. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>Review of Employee #2's record is incomplete. The 2022 performance evaluation is not signed or dated by the employee.<br><br>AND<br><br>Review of Individual #1's record is incomplete the Release of Information form is missing Individual/Agency Name, Address and Telephone Number. The Case Management Contact Sheets are missing Record #. The most current Individualized Educational Plan is not present within record.<br><br>AND<br><br>Review of Individual #2's records is incomplete. The Emergency Information form is missing ID#. ID#, Individual/Agency Name, Address and Telephone Number are blank on the Release of Information. Record # on Case management Contact Sheets are blank. | PR) 11/27/2022<br><br>The employee evaluation was signed by the employee. The Program Director will ensure that the evaluations will be signed by the staff at the time of the evaluation.<br><br>The Release of Information forms were updated to include the individual/agency name, address and telephone number. The Case Manager contact sheets were ammended to add the record number. The CEO will ensure the documents will include the necessary information for accurateness.<br><br>The CEO reached out to the placing agency for a copy of the updated IEP for individual #1 and an updated IEP was placed in the resident's record.<br><br>OLR) Accepted 11/29/2022 | 11/23/2022 |
| 12VAC35-46-750. D. (1) - The provider shall develop and implement written policies and procedures to document progress of the resident towards meeting goals and objectives of the individualized service plan that shall include the: 1. Format; | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>Review of Individual #1's progress notes reveal that weekly notes from weeks 10/29/22, 11/5/22, and 11/12/22 are vague and similar in detail. | PR) 11/27/2022<br><br>The CEO met with the Case Manager to ensure that the weekly notes reflect the progress that was displayed for the week and the notes are not vague and similar in detail. The CEO will review weekly reports for accuracy to reflect progress of the residents.<br><br>OLR) Accepted 11/29/2022 | 11/23/2022 |

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**General Comments / Recommendations:**
**It is recommended to have more robust progress notes with evidence of progress and treatment interventions.**

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.

| Nicole DeStefano | (Signature of Organization Representative) | Date |
|---|---|---|

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