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



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

Date of Inspection: **12-11-2025**
Program Type/Facility Name: **14-009 Liberty House**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-300. B. (5) - The records of each employee shall include: 5. Annual performance evaluations; | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of Employee #1's record found that it did not have the most recent annual performance evaluation.<br><br>Provider failed to ensure that Employee #1's record included an annual performance evaluation.<br><br>Please submit a detailed plan to ensure that future employees' records include annual performance evaluations. | PR) 12/18/2025<br><br>The supervisor completed the annual inspection for Employee #1. The supervisor was based the annual evaluation on the definition of annual to mean 13 months as stated in the regulations.<br><br>OLR) Accepted 05/22/2026 | 12/11/2025 |
| 12VAC35-46-480. F. - Each child shall have a separate, clean, comfortable bed equipped with a clean mattress, clean pillow, clean blankets, clean bed linens, and, if needed, a clean waterproof mattress cover. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of the physical location found that the beds of multiple residents had mattresses that were broken and stained. In addition, the linens were unclean and ripped.<br><br>Provider failed to ensure that each child had a separate, clean, comfortable bed equipped with a clean mattress, clean pillow, clean blankets, clean bed linens, and, if needed, a clean waterproof mattress cover.<br><br>Please submit a detailed plan to ensure that future children have a separate, clean, comfortable bed equipped with a clean mattress, clean pillow, clean blankets, clean bed linens, and, if needed, a clean waterproof mattress cover. | PR) 12/18/2025<br><br>The Program Director will ensure that each child have a separate, clean pillow, blankets, and clean linen. The staff will do daily checks to ensure that each child is sleeping in comfortable clean bedding and the sheets are in good condition and the beds are not broken.<br><br>OLR) Accepted 05/22/2026 | 12/12/2025 |

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| 12VAC35-46-480. G. - Bed linens shall be changed at least every seven days and more often if needed. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of the physical location found that the linens on the beds were heavily soiled. When questioned, the provider stated that the linens were washed every seven days but did not account for washing as needed.<br><br>Provider failed to ensure that bed linens shall be changed at least every seven days and more often if needed.<br><br>Please submit a detailed plan to ensure that, in the future, bed linens shall be changed at least every seven days and more often if needed. | PR) 01/08/2026<br><br>The Program Director will ensure that the staff supervising the residents follow the chore schedule that is posted to include daily chores and weekly laundry. Each resident is given a day to complete their laundry which includes washing the bed linen and towels. The staff will conduct daily checks to make sure the linen is clean and not soiled. The laundry chore list is posted weekly. The Case Manager will conduct weekly bed checks to make sure that the beds are clean and not heavily soiled. In the event the resident has an accident and the linen becomes soiled the staff will assist the residents with changing the bed linen to a clean set and wash the soiled linen.<br><br>OLR) Accepted 05/22/2026 | 1/5/2026 |
| 12VAC35-46-480. H. - Mattresses shall be fire retardant as evidenced by documentation from the manufacturer except in buildings equipped with an automated sprinkler system as required by the Virginia Uniform Statewide Building Code (13VAC5-63). | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of the physical location found that the mattresses did not have manufacturer tags as evidence that they were fire retardant.<br><br>Provider failed to ensure that mattresses shall be fire retardant as evidenced by documentation from the manufacturer.<br><br>Please submit a detailed plan to ensure that mattresses shall be fire retardant as evidenced by documentation from the manufacturer | PR) 01/08/2026<br><br>The Program Director has changed the mattress to include the tags are labeled as fire retardant. The Program Director and staff supervising the residents will make sure the tags are not removed. The staff will check the mattress daily when conducting room searches to see that the tags are on the mattress and the label reads "Fire Retardant"<br><br>OLR) Accepted 05/22/2026 | 1/5/2026 |

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| 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. | NS | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of the physical location found that the interior of the residence was not properly maintained, clean, and in good working order. Multiple holes were found in walls that had not been reported for maintainance. The faucet in the upstairs hall bathroom was missing a handle. There was potential mold/mildew underneath the kitchen sink and upstairs bathroom sink. One of the residents struggled with fecal smearing and old evidence of that behavior was found in multiple areas of the room.<br><br>Provider failed to ensure that the interior and exterior of all buildings shall be safe, properly maintained, clean, and in good working order.<br><br>Please submit a detailed plan to ensure that interior and exterior of all buildings shall be safe, properly maintained, clean, and in good working order. | PR) 01/08/2026<br><br>The Program Director will ensure the staff are conducting daily checks of the home to make sure the residence is properly maintained, clean, and in good working order. The Assistant Director had the holes patched up and the bathroom hall faucet was replaced. The walls in the bedroom which appeared to be fecal matter was cleaned. There was no evidence of fecal matter in the bedroom evidence of no odor or anything smelling like feces. The landlord was informed of the kitchen sink and tended to the concern by having the area cleaned and treated. The staff supervising the residents will conduct daily checks to ensure the house is properly maintained. The Program Director will check weekly to ensure the residence is properly maintained and address the concerns as they arise.<br><br>OLR) Accepted 05/22/2026 | 1/5/2026 |

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| 12VAC35-46-625. B. - Each provider shall have formal arrangements for the evaluation, assessment, and treatment of the mental health or brain injury needs of the resident. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of Individual #1 and Individual #2's records found no evidence of mental health evaluations, assessment, or descriptions of treatment.<br><br>Provider failed to ensure that Individual #1 and Individual #2 had formal arrangements for the evaluation, assessment, and treatment of the mental health.<br><br>Please submit a detailed plan to ensure that future individuals have formal arrangements for the evaluation, assessment, and treatment of the mental health | PR) 01/08/2026<br><br>Dispute. An evaluation, assessment, and treatment of the mental health is conducted at the time of admission and documented on the resident's Application For Admission.<br><br>OLR) Not Accepted 05/21/2026Citation Upheld. Please respond to the CAP.<br><br>PR) 05/25/2026<br><br>The LCSW who meets with the resident has provided a formal arrangements for the mental health evaluation, assessment, and treatment of the mental health at the time of admission. The LCSW provides and ongoing evaluation and assessment of treatment weekly during the individual therapy sessions with each client. The forms are documented in each resident's medical chart. The Program Director and LCSW will perform formal evaluation, assessment, and treatment of the resident's mental health at the time of admission.<br><br>OLR) Accepted 05/27/2026 | 12/16/2025 |

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| 12VAC35-46-840. I. - Each resident's health record shall include or document the facility's efforts to obtain treatment summaries of ongoing psychiatric or other mental health treatment and reports. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of Individual #1 and Individual #2's records found no evidence of treatment summaries of ongoing psychiatric or othe rmental health treatment and reports.<br><br>Provider failed to ensure that Individual #1 and Individual #2's records documented the facility's efforts to obtain treatment summaries of ongoing psychiatric or othe rmental health treatment and reports.<br><br>Please submit a detailed plan to ensure that future individuals' records document the facility's efforts to obtain treatment summaries of ongoing psychiatric or othe rmental health treatment and reports. | PR) 01/08/2026<br><br>The Clinician servicing the residents will place ongoing mental health and treatment reports in the resident's file to include the documentation of healthcare every week. The Case Manager will conduct weekly checks to ensure the documents are filed in the resident's medical chart.<br><br>OLR) Accepted 05/22/2026 | 1/5/2026 |
| 12VAC35-46-850. F. - Medication prescribed by a person authorized by law shall be administered as prescribed. | N | Liberty House<br><br>This regulation was NOT MET as evidenced by:<br><br>At the time of the inspection, a review of Individual #2's medications found that the bubble pack for Medication #1, which is supposed to dispense two pills at a time, had one pill still in the pack for 11/29/25.<br><br>Provider failed to ensure that Individual #2 had medication administered as prescribed.<br><br>Please submit a detailed plan to ensure that future individuals have medications administered as prescribed. | PR) 12/18/2025<br><br>The staff administering the medication will ensure that all pills are administered as prescribed to the client. The staff will count the pills that should be in the pill cup before administering the medication to ensure that nothing is left in the bubble pack.<br><br>OLR) Accepted 05/22/2026 | 12/11/2025 |

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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