

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

Page: 1 of 4

License #: **3517-14-010**

Organization Name: **Virginia Health Operations LLC**

Date of Inspection: **08-13-2024**

Program Type/Facility Name: **14-010 Newport Academy- Creekside**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-70. - Each provider shall guarantee resident rights as outlined in § 37.2-400 of the Code of Virginia and in the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (12VAC35-115).	N	Newport Academy- Creekside This regulation was NOT MET as evidenced by: See OHR citations below.		9/13/2024

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12VAC35-115-230. A. (3a) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 3. The investigating authority shall provide a written report of the results of the investigation of abuse or neglect to the director and human rights advocate via the department's web-based reporting application within 10 working days from the date the investigation began unless an extension has been granted (see 12VAC35-115-175). This report shall include: 3a. Whether abuse, neglect, or exploitation occurred;	N	Newport Academy- Creekside This regulation was NOT MET as evidenced by: - The investigating authority shall provide a written report of the results of the investigation of abuse or neglect via the department's web-based reporting application within 10 working days from the date the investigation began unless an extension has been granted (see 12VAC35-115-175). This report shall include: a. Whether abuse, neglect, or exploitation occurred, b. The type of abuse; and c. Whether the act resulted in physical or psychological injury. - Investigation findings were due in CHRIS on 3/26/24. The Investigations Findings section on CHRIS indicates that the investigation findings were entered in on 6/5/2024. · Provider failed to report their investigation findings on time.	PR) 09/05/2024 At this time only 2 individuals are trained as human rights investigations and to input data into the CHRIS system. Moving forward, a tracker will be utilized to ensure that CHRIS reports are closed out with report of the results of the investigation of abuse/neglect. This tracker will be reviewed weekly to ensure that all CHRIS reports are closed out within 10 days. Executive Director will monitor this process. OHR/OLR) Accepted 10/04/2024	9/13/2024

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Page: 3 of 4

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12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	Newport Academy- Creekside This regulation was NOT MET as evidenced by: "Neglect" means failure by a person, program, or facility operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, responsible for providing services to do so, including nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of an individual receiving care or treatment for mental illness, intellectual disability, or substance abuse. - By a preponderance of evidence, including witness statements, staff admissions, failure to follow behavior/management plan, and failure to follow policy, the Provider has substantiated A#20240007. - Individual #1, who should have been on 1:1 supervision, barricaded their bedroom door with furniture and jumped out of their second story bedroom, injuring their leg and hitting their head. - The Provider failed to protect Individual #1 from harm.	PR) 09/06/2024 3/13/2024 - terminated the primary employee assigned to observing the client; final written warnings for the other 2 staff who were on shift. Written warnings were issued on 03/13/2024 (as evidenced by email); however, neither employee signed their final written warnings on that date. 08/12/2024 - All-Staff Meeting to review 1:1 Observation Status Protocol (among other topics) OHR/OLR) Accepted 10/04/2024	3/13/2024

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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.				
_____ Diana Atcha, Human Rights		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				