

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

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

Organization Name: **Virginia Health Operations LLC**

Date of Inspection: **04-07-2026**

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.		
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	N	Newport Academy- Creekside This regulation was NOT MET as evidenced by: - The Human Rights Advocate identified a violation of 12VAC35-115-230(A)(3) for CHRIS A#20250027. - Investigation findings were due in CHRIS on 5/19/2026. The Investigations Findings section on CHRIS indicates that the investigation findings were entered on 1/2/2026. - Provider failed to provide a written report of the results of the investigation of neglect via the department's web-based reporting application within 10 working days.	PR) 05/27/2026 1. Provide a statement of the issue that led to non-compliance: Lack of Resources (too few people trained to complete CHRIS reports, investigate human rights concerns, and enter findings) and unclear responsibilities (those trained did not understand their role to enter findings). State how you corrected/will correct the deficient practice in this specific violation, including a plan of action to create systemic change: - Findings have been entered for all of the listed CHRIS reports as of 03/05/2026. - Identify who will be trained to enter CHRIS reports (Clinical Operations Managers, Operations Managers, Clinical Director, Executive Director, Nurse Manager and Nursing	6/30/2026

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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;			Supervisor, Clinical Supervisor) - Identify who will be trained as Human Rights Investigators (Clinical Operations Managers, Operations Managers, Clinical Director, Clinical Supervisor and Executive Director) - Ensure that all staff trained to complete CHRIS reports know to also enter the findings and close out the report within 10 days of entering the report - Create visual guide for submitting reports, completing investigations, and entering findings - Review these assignments daily during weekdays (process-owner: the Operations Manager on-call for the week) and create a process-owner for weekend incidents (process-owner: the Operations Manager on-call for the week) Administrator On-Call for the week (either Clinical Director or Executive Director will audit CHRIS reports weekly to ensure timely updates. Final Planned Completion Date: 06/30/2026 OHR/OLR) Accepted 06/15/2026	

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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. • Due to a preponderance of evidence, including witness statements, the Provider substantiated a violation of 12VAC35-115-50(B)2. • It was reported that Individual #1 disclosed that during hygiene time on the previous evening, a peer entered their bedroom and grabbed their leg, attempting to drag them to the shower and telling them to get in. Individual #1 reported that the peer licked their neck and repeatedly made sexual comments toward them. Per the investigation, it was confirmed that Employee #1 and Employee #2 did not separate Individual #1 from the peer until the next day. • Individual #1's right to be free of neglect was violated.	PR) 05/29/2026 The Employee monitoring the clients was unaware of the reported behaviors that were occurring as the report of the behaviors came the day following the alleged interaction. The employee reports that they were monitoring during hygiene time and did not observe any concerning behaviors. The clients were on routine status and not on Peer Separation protocol. Observation Rounds cannot be confirmed that they were completed as they are not in the EMR; however, it is unclear whether the Rounds were completed and not uploaded or not completed at all. OVN Checklist has been created to remind employees to upload Rounds nightly. Observation Protocol has been retrained several times, including 01/06/2026 all-staff meeting. Operations Supervisor is responsible for completing audits of OVN rounds. OHR/OLR) Accepted 06/15/2026	1/6/2026

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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				