

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

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License #: 4380-04-005

Organization Name: Children's Hospital of The King's Daughters, Incorporated

Date of Inspection: 07-29-2025

Program Type/Facility Name: 04-005 Children's Pavilion

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-160. D. (2) - The provider shall collect, maintain, and report or make available to the department the following information: 2. Level II and Level III serious incidents shall be reported using the department's web-based reporting application and by telephone or email to anyone designated by the individual to receive such notice and to the individual's authorized representative within 24 hours of discovery. Reported information shall include the information specified by the department as required in its web-based reporting application, but at least the following: the date, place, and circumstances of the serious incident. For serious injuries and deaths, the reported information shall also include the nature of the individual's injuries or circumstances of the	NS	Children's Pavilion This regulation was NOT MET (SYSTEMIC) as evidenced by: CHRIS Number: 20250053 Date/Time of Discover: 07/11/2025 12:23PM Enter Date/Time: 07/12/2025 9:50PM Reporting Delay: 9:27:00 Location Name: Children's Pavilion CHRIS Number: 20250054 Date/Time of Discover: 07/11/2025 3:41PM Enter Date/Time: 07/12/2025 9:55PM Reporting Delay: 6:14:00 Location Name: Children's Pavilion CHRIS Number: 20250056 Date/Time of Discover: 07/27/2025 9:32AM Enter Date/Time: 07/28/2025 1:20PM Reporting Delay: 3:48:00 Location Name: Children's Pavilion Note: As this is provider's second step in the Progressive Citation Cycle for the same regulation within a one-year period, measured on a rolling basis, provider has demonstrated systemic noncompliance. Provider was previously cited for late reporting • The first citation was issued on 4/8/25 and is now non-compliant.	PR) 08/13/2025 Circumstances leading to the noncompliance: Front-line staff notify designated trained reporters of incidents via a centralized email box, which is checked multiple times per day by reporting designee(s). Because the incident was not immediately reported and had not been received when the inbox was checked, it was not timely reported within 24 hours of the incident's occurrence (though it was reported within 24 hours of receipt by designated reporters). Actions to be Taken Retraining of Staff and Infrastructure Improvement: Communication to all involved with the Inpatient (IP) program that communication of incidents must be made with reporting designee(s) with confirmation of receipt (i.e. verbal via telephone, Vocera, or in-person) within one hour of incident. If unable to reach a reporting designee(s) by phone, escalate concerns through chain of command. Serious Incident Report form must be completed and scanned to appropriate shared mailbox within four hours of the event. Revision of the IP reporting form pertaining to serious incidents and CHRIS reports to include specific language regarding timing of notification to reporting designee(s) and acceptable methods for reporting.	8/15/2025

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death and any treatment received. For all other Level II and Level III serious incidents, the reported information shall also include the consequences that resulted from the serious incident. Deaths that occur in a hospital as a result of illness or injury occurring when the individual was in a licensed service shall be reported.			Education provided to staff that reporting designee(s) must be notified of a Level II and III Serious Incident or suspected Office of Human Rights violation within one hour of incident or discovery of incident; notification during or at end of shift is not acceptable. Notification must be made by with receipt of confirmation (e.g., verbal via telephone, Vocera, or in-person). Serious Incident Report form must be completed and scanned to appropriate shared mailbox within four hours of the event. Target date for completion 8/15/25. Monitoring: Risk Management, Inpatient Nurse Manager, and Professional Development Coordinator will monitor reporting by tracking incidents (concurrently logged on our Incident Tracking Log upon submission of CHRIS reports), reports, and timelines for any incidents and provide additional follow-up as needed. Ongoing thru 10/31/2025. Audits: Risk Management and Inpatient Nurse Manager will review the Incident Tracking Log weekly to ensure compliance. If any additional concerns are noted, additional steps will be implemented to immediately address the concerns. Ongoing through 10/31/2025. 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.				
_____ Lakesha Steele, Incident Management Unit		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				