DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **4430-14-008**
Organization Name: **Assuage Solutions LLC**

Date of Inspection: **04-28-2025**
Program Type/Facility Name: **14-008 Vick Residential**

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	Vick Residential This regulation was NOT MET as evidenced by: The service record of Individual #2 revealed that the individual is currently hospitalized for a medical reason. The provider has not reported the incident via the web based reporting system.	PR) 07/21/2025Assuage Solutions failed to report serious incident in web-based reporting system when a resident was taken to the ER for stomach concerns. Assuage Solutions will document and report all emergency room visits. The program director will be responsible for ensuring all ER visits are reported. All ER visits will be reviewed monthly to ensure all the staff are reporting reportable incidents.OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-1070. C. - The provider shall notify the department within 24 hours of any serious illness or injury, any death of a resident, and all other situations as required by the department. Such reports shall include: 1. The date and time the incident occurred; 2. A brief description of the incident; 3. The action taken as a result of the incident; 4. The name of the person who completed the report; 5. The name of the person who made the report to the placing agency and to either the parent or legal guardian; 6. The name of the person to whom the report was made.	N	Vick Residential This regulation was NOT MET as evidenced by: The service record of Individual #2 revealed that the individual is currently hospitalized for a medical reason. The provider has not reported the incident via the web based reporting system.	PR) 07/21/2025 Assuage Solutions failed to report serious incident in web-based reporting system when a resident was taken to the ER for stomach concerns. Assuage Solutions will document and report all emergency room visits. The program director will be responsible for ensuring all ER visits are reported. All ER visits will be reviewed monthly to ensure all the staff are reporting reportable incidents. OLR) Accepted 10/06/2025	7/6/2025
12VAC35-46-230. A. - The provider shall submit or make available to the department such reports and information as the department may require to establish compliance with these regulations and other applicable regulations and statutes.	N	Vick Residential This regulation was NOT MET as evidenced by: On 4.17.25, the LS attempted to review records as part of the annual inspection. The LS was unable to review records as the records were not onsite. The CEO was reportedly out of the area and therefore unable to provide the records for review.	PR) 07/13/2025 Program Director removed files offsite to review records. When LS attempted to complete inspection the records were not on site which led to non-compliance. The program director has since placed the files on site and they have not been removed. Going forward the program director will be responsible for making sure the files are onsite. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-300. B. (7) - The records of each employee shall include: 7. Documentation of compliance with requirements of Virginia laws regarding child protective services and criminal history background investigations;	N	Vick Residential This regulation was NOT MET as evidenced by: The provider received a "Not Enough Adequate Information (NEAI)" decision for Employee #2's criminal background check related to a charge from 3.21.2006. The employee's record contained no evidence that the provider met with the employee to discuss the information contained in the background response letter. The provider should meet with the employee and request any documentation regarding the referenced charge to include in the file along with the letter from the OBI. In response to this citation, please submit documentation of the meeting with the employee as well as the employee's response regarding the status of the charge and any documents the employee provided, and whether the organization is continuing with employment. This information should also be documented in the employee's record. It should also be noted that although employee #2 checked the disclosure statement indicating previous charges, no charges were listed as required by the form.	PR) 07/21/2025 Assuage Solutions failed to meet the requirements of regulation 12VAC35-46-300. B. (7) by failing to obtain additional information regarding an employee's background. Assuage Solutions has since obtained additional information to meet the requirements of this regulation. The program director met with this staff and have determined that the employee does meet the qualifications. Going forward the program director will be responsible for obtaining additional information upon each new hire. This will be reviewed annually. OLR) Accepted 10/06/2025	7/13/2025

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (5) - Required initial training: 5. Within 30 days following their begin date, all staff working with residents shall be trained in child abuse and neglect, mandatory reporting, maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention.	N	Vick Residential This regulation was NOT MET as evidenced by: Employee #1 and #2's personnel record did not document training in maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention.	PR) 07/21/2025 Assuage Solutions did not document training of maintaining appropriate professional relationships, and interaction among staff and residents, and suicide prevention. Employee #1 and #2's personnel record did not include the required training. The onboarding training has been updated to include the required training. Going forward the program director will be responsible for reviewing training and new requirements annually. OLR) Accepted 10/06/2025	7/14/2025
12VAC35-46-310. A. (9) - Required initial training: 9.The provider shall carry out targeted staff training in any area of quality improvement as identified from the results of the quality improvement plan.	N	Vick Residential This regulation was NOT MET as evidenced by: Employee #1 and #2's personnel record did not document evidence of targeted staff training in any area of quality improvement as identified from the results of the quality improvement plan.	PR) 07/21/2025 Assuage Solutions failed to carry out targeted staff training in any area of quality improvement as identified from the results of the quality improvement plan. As a result, employee #1 and #2's personnel record did not document evidence of targeted staff training in any area of quality improvement as identified from the results of the quality improvement plan which led to this regulation being non-compliant. A new training was created to incorporate this regulation. The program director will be responsible for new hire training and reviewing charts annually. OLR) Accepted 10/06/2025	7/6/2025

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12VAC35-46-430. C. - Air conditioning or mechanical ventilating systems, such as electric fans, shall be provided in all rooms occupied by residents when the temperature in those rooms exceeds 80°F.	N	Vick Residential This regulation was NOT MET as evidenced by: During the inspection, the thermostat displayed a temperature of 64 degrees. The temperature shall not be less than 68 degrees.	PR) 07/21/2025 Assuage Solutions failed to maintain a temperature of 68 degrees as the room temperature was 64 degrees. Assuage Solutions will systematically check temperature daily to ensure the temperature meets expectation. The program director will be responsible for making sure the staff are completing daily visual checks daily. OLR) Accepted 10/06/2025	7/6/2025
12VAC35-46-660. B. - Each record shall be kept up to date and in a uniform manner.	N	Vick Residential This regulation was NOT MET as evidenced by: The service records of individual #1 and #2 were not kept up to date and in a uniform manner as the service records did not include progress notes for review during the inspection. Individual #1 was enrolled 3/22/2025 Individual #2 was enrolled 2/23/2025.	PR) 07/21/2025 Assuage Solutions failed to record shall be kept up to date and in a uniform manner. Assuage Solutions did not document progress note in the folder for residents 1 and 2 which lead to this regulation not being met. Assuage Solutions will document progress notes daily and file them weekly to meet this requirement. The case manager will be responsible to ensuring all notes are file daily. The case manager will review folders weekly. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-710. B. (1) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 1. The educational needs of the prospective resident;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the educational needs of the prospective resident.	PR) 07/21/2025 Assuage Solutions failed to document resident's educational needs in the initial application which led to non-compliance of this regulation. Assuage Solution has updated the initial application to include educational needs. Going forward the program director will ensure the educational needs of all residents will be documented before admission. This will be reviewed upon every admission. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-710. B. (10) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 10. History of previous treatment for mental health, mental retardation, substance abuse, brain injury, and behavior problems;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the history of previous treatment for mental health, mental retardation, substance abuse, brain injury, and behavior problems.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the history of previous treatment for mental health, ID/DD, substance abuse, brain injury, and behavior problems perspective resident's admission. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-710. B. (2) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 2. The mental health, emotional, and psychological needs of the prospective resident;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the mental health, emotional, and psychological needs of the prospective resident.	PR) 07/21/2025 Assuage Solutions failed to meet regulation 710. b as individual #1 and #2's application for admission did not document the mental health, emotional, and psychological needs of the prospective resident. The current application has been updated to include mental health, emotional, and psychological needs of the prospective resident. The program director will be responsible for maintaining compliance with this regulation. This will be reviewed during each intake and annually. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-710. B. (3) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 3. The physical health needs, including the immunization needs, of the prospective resident;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the physical health needs, including the immunization needs, of the prospective resident.	PR) 07/21/2025 Assuage Solutions did not meet the requirement for regulation 710.B as individual #1 and #2's application for admission did not document the physical health needs, including the immunization needs, of the prospective resident. Assuage Solutions as since updated the initial intake application for admission. The program director will be responsible to ensuring this regulation is met by reviewing during each intake and annually. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-710. B. (4) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 4. The protection needs of the prospective resident;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the protection needs of the prospective resident.	PR) 07/21/2025 Assuage Solutions did not meet the requirement for regulation 710. B as individual #1 and #2's application for admission did not document the protection needs of the prospective resident. Assuage Solutions has updated the initial application to include the requirements for this regulation. The program director will be responsible for reviewing initial application monthly to ensure this requirement is met. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-710. B. (5) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 5. The suitability of the prospective resident's admission;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the suitability of the perspective resident's admission.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the suitability of the perspective resident's admission. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-710. B. (6) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 6. The behavior support needs of the prospective resident;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the behavior support needs of the perspective resident.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the behavior support needs of the perspective resident. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-710. B. (7) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 7. Family history and relationships;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document both the family history and relationship.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the family history and relationships of the perspective resident. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-710. B. (8) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 8. Social and development history;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1 and #2's application for admission did not document the social and developmental history.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the social and development history of the perspective resident. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-710. B. (9) - Providers shall develop, and fully complete prior to acceptance for care, an application for admission that is designed to compile information necessary to determine: 9. Current behavioral functioning and social competence;	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1's application for admission did not document the current behavioral functioning and social competence.	PR) 07/21/2025 Assuage Solutions did not meet the requirements for regulation 710.B as individual #1 and #2's application for admission did not document the current behavioral functioning and social competence of the perspective resident. Assuage Solutions has since updated the initial application for admission to meet the requirements for this regulation. The program director will be responsible for reviewing initial application before admission and annually. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-730. A. - At the time of admission, each resident's record shall include a completed face sheet that contains (i) the resident's full name, last known residence, birth date, birthplace, gender, race, social security number or other unique identifier, religious preference, and admission date; and (ii) names, addresses, and telephone numbers of the resident's legal guardians, placing agency, emergency contacts, and parents, if appropriate.	N	Vick Residential This regulation was NOT MET as evidenced by: At the time of the inspection, Individual #1's face sheet did not document the last known address or religious preference. The areas were left blank.	PR) 07/21/2025 Assuage Solutions failed to meet the requirements for regulation 730. A by not documenting individual #1's face sheet which did not contain the last known address or religious preference. Going forward Assuage Solutions will ensure the face sheet is completed to its entirety. The program director will be responsible to ensuring all face sheets are completed. This will be reviewed monthly. OLR) Accepted 10/06/2025	7/13/2025

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12VAC35-46-750. E. (5) - There shall be a documented quarterly review of each resident's progress 60 days following the initial individualized service plan and within each 90 -day period thereafter that shall report the: 5. Status of discharge planning.	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #1's quarterly review did not did not document the status of discharge planning.	PR) 07/21/2025 Assuage Solutions failed to document the status of a resident's discharge. The quarterly report form has since been updated to include the status of discharge. The case manager will be responsible for ensuring the status of the resident's discharge is documented. This regulation will be reviewed every three months to ensure compliance. OLR) Accepted 10/06/2025	7/13/2025
12VAC35-46-765. H. (1f) - Discharge summaries: 1. No later than 30 days after discharge, a comprehensive discharge summary shall be placed in the resident's record and sent to the persons or agency that made the placement. The discharge summary shall review: 1f. Date the discharge summary was prepared and the signature of the person preparing it.	N	Vick Residential This regulation was NOT MET as evidenced by: Individual #3's discharge report was not signed by the person preparing it.	PR) 07/21/2025 Assuage Solutions failed to document signed signature of the case manager who prepared the discharge report. Going forward the program director will ensure that all discharge reports are signed during discharge. The program director will review discharge reports monthly to ensure all signatures are sustained. OLR) Accepted 10/06/2025	7/13/2025

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General Comments / Recommendations:
The provider does not use contractors or volunteers.

The LS recommends that the provider ensures that follow up is conducted when the provider is issued a "Not Enough Adequate Information (NEAI)" decision. The provider should document meeting with the employee to gather information, collect any evidence submitted by the employee, and document the provider's decision regarding continued employment. Please refer to the letter received from the OBI and the citation.

The LS recommends that the provider ensures that disclosure statements are completed in their entirety to include specific information when the employee checks that they have had charges

Please include the following in your response:
• Include all 3 points below, in detail, in your response to each violation:

1. Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation.
2. Include a plan of action to address systematic changes (process/protocols, etc) that have been or will be implemented to ensure you remain in compliance of the regulation.
3. Include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation. Indicate the frequency for monitoring the plan including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist).
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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.

Pending Assignment Region 5.5 - (A), Licensing Specialist	(Signature of Organization Representative)	Date

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