DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **4430-14-009**
Organization Name: **Assuage Solutions LLC**

Date of Inspection: **01-14-2026**
Program Type/Facility Name: **14-009 Wisdom's Residential**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-420. C. - The facility shall document annually after the initial application that buildings and equipment are maintained in accordance with the Virginia Statewide Fire Prevention Code (13VAC5-52).	N	Wisdom's Residential This regulation was NOT MET as evidenced by: During the inspection, it was observed that the fire extinguishers were not tagged and dated with routine checks.	PR) 04/06/2026 Assuage Solutions failed to have a dated tag on the fire extinguisher. The program director did not ensure that the regulation was in compliance indicating the fire extinguisher was not expired. Assuage Solutions will ensure that compliance with the fire extinguisher is checked monthly during the building inspection. The program director will monitor this monthly. OLR) Partially Accepted 05/03/2026Please indicate by what date you will have the planned corrective action completed/implemented. PR) 06/01/2026 Assuage Solutions failed to have a dated tag on the fire extinguisher. The program director did not ensure that the regulation was in compliance indicating the fire extinguisher was not expired. Assuage Solutions will ensure that compliance with the fire extinguisher is checked monthly during the building inspection. The program director will monitor this monthly. This will be implemented by 05/15/2026. OLR) Accepted 07/14/2026	5/15/2026

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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.

Anisha Walker, Licensing Specialist	(Signature of Organization Representative)	Date

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