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



Investigation ID: **35**
License #: **5234-14-001**
Organization Name: **Hallmark Youth Care - Richmond, LLC**

Date of Inspection: **10-11-2022**
Program Type/Facility Name: **14-001 Hallmark Youthcare**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-800. A. (2) - There shall be evidence of a structured program of care designed to: 2. Provide protection, guidance, and supervision; | N | Hallmark Youthcare<br><br>This regulation was NOT MET as evidenced by:<br><br>During the unannounced inspection conducted on 10/11/22, it was determined that the provider failed to provide a structured program of care by appropriately supervising the residents. It was determined following the unannounced inspection, that there was inadequate supervision of female residents on the unit at the time of this serious incident which resulted in 3 females residents entering another resident's bedroom and assaulting her. | PR) 11/16/2022<br><br>Hallmark determined our youth counselors would benefit from additional training on "active supervision". The training was held in October and first week of November and was mandatory for all direct care staff.<br><br>OLR) Partially Accepted 11/18/2022<br><br>Please describe how you will implement increased active supervision on a long term basis.<br><br>PR) 12/02/2022<br><br>Hallmark Youthcare has developed several changes and/or processes to increase active supervision on a long-term basis.<br><br>1. The unit schedules have been revised with an increase in structured activities. Some of the activities will be led by the youth counselors to create opportunities for the residents and youth counselors to engage in an activity together.<br>2. When a structured activity is provided by a clinical department the youth counselors will be up and moving around to provide active supervision and support the activity.<br>3. The shift supervisors will conduct rounding on the units to ensure the youth counselors are up and moving around and not "sitting". The youth counselors will document the daily times of rounding and the level of active supervisor | 12/16/2022 |

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| | | | provided. The program director will review the data and follow-up with the supervisors to address any concerns.<br>OLR) Accepted 12/12/2022 | |
| 12VAC35-46-870. F. (1a) - Supervision policies: 1. The provider shall develop and implement written policies and procedures that address staff supervision of children including contingency plans for resident illnesses, emergencies, off-campus activities, and resident preferences. These policies and procedures shall be based on the: 1a. Needs of the population served; | N | Hallmark Youthcare<br><br>This regulation was NOT MET as evidenced by:<br><br>In review of the provider's policies and procedures for policy PC-G-04 specifically states "on occasion when there is a need for residents to utilize their rooms for the purposes of hygiene, such as after gym activities or using the pool, the bedroom doors will be open and Direct Care Staff will be positioned within eyesight or earshot of each room. The rooms should not be opened for any other reason."<br><br>Following the investigation for CHRIS report #: 2022004 on 10/11/22, and the review of the details of the serious incident it was determined that the procedure for policy PC-G-04 was not being implemented. It was evident that this policy was not implemented because the residents were in fighting in a bedroom outside of earshot and eyesight of residential staff. | PR) 11/16/2022<br><br>The event of September 24, 2022 occurred at 7:50 pm which is a time the residents are permitted in their bedroom to prepare for bedtime.<br><br>OLR) Partially Accepted 11/18/2022<br><br>Please describe how you will update your policies and plan for supervision for residents to be permitted in their bedroom.<br><br>PR) 12/02/2022<br><br>Updated policy is attached.<br><br>OLR) Accepted 12/12/2022 | 12/2/2022 |

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| 12VAC35-46-870. F. (1b) - Supervision policies: 1. The provider shall develop and implement written policies and procedures that address staff supervision of children including contingency plans for resident illnesses, emergencies, off-campus activities, and resident preferences. These policies and procedures shall be based on the: 1b. Types of services offered; | N | Hallmark Youthcare<br><br>This regulation was NOT MET as evidenced by:<br><br>In review of the provider's policies and procedures for policy PC-G-04 specifically states "on occasion when there is a need for residents to utilize their rooms for the purposes of hygiene, such as after gym activities or using the pool, the bedroom doors will be open and Direct Care Staff will be positioned within eyesight or earshot of each room. The rooms should not be opened for any other reason."<br><br>Following the investigation for CHRIS report #: 2022004 on 10/11/22, and the review of the details of the serious incident it was determined that the procedure for policy PC-G-04 was not being implemented. It was evident that this policy was not implemented because the residents were in fighting in a bedroom outside of earshot and eyesight of residential staff. | PR) 11/16/2022<br><br>The event of September 24, 2022 occurred at 7:50 pm which is a time the residents are permitted in their bedroom to prepare for bedtime.<br><br>OLR) Partially Accepted 11/18/2022<br><br>Please describe how you will update your policies and plan for supervision for residents to be permitted in their bedroom.<br><br>PR) 12/02/2022<br><br>Updated policy attached<br><br>OLR) Accepted 12/12/2022 | 12/2/2022 |

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| 12VAC35-46-870. F. (1c) - Supervision policies: 1. The provider shall develop and implement written policies and procedures that address staff supervision of children including contingency plans for resident illnesses, emergencies, off-campus activities, and resident preferences. These policies and procedures shall be based on the: 1c. Qualifications of staff on duty; | N | Hallmark Youthcare<br><br>This regulation was NOT MET as evidenced by:<br><br>In review of the provider's policies and procedures for policy PC-G-04 specifically states "on occasion when there is a need for residents to utilize their rooms for the purposes of hygiene, such as after gym activities or using the pool, the bedroom doors will be open and Direct Care Staff will be positioned within eyesight or earshot of each room. The rooms should not be opened for any other reason."<br><br>Following the investigation for CHRIS report #: 2022004 on 10/11/22, and the review of the details of the serious incident it was determined that the procedure for policy PC-G-04 was not being implemented. It was evident that this policy was not implemented because the residents were in fighting in a bedroom outside of earshot and eyesight of residential staff. | PR) 11/16/2022<br><br>The event of September 24, 2022 occurred at 7:50 pm which is a time the residents are permitted in their bedroom to prepare for bedtime.<br><br>OLR) Partially Accepted 11/18/2022<br><br>Please describe how you will update your policies and plan for supervision for residents to be permitted in their bedroom.<br><br>PR) 12/02/2022<br><br>Updated policy is attached<br><br>OLR) Accepted 12/12/2022 | 12/2/2022 |

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| 12VAC35-46-870. F. (1d) - Supervision policies: 1. The provider shall develop and implement written policies and procedures that address staff supervision of children including contingency plans for resident illnesses, emergencies, off-campus activities, and resident preferences. These policies and procedures shall be based on the: 1d. Number of residents served. | N | Hallmark Youthcare<br><br>This regulation was NOT MET as evidenced by:<br><br>In review of the provider's policies and procedures for policy PC-G-04 specifically states "on occasion when there is a need for residents to utilize their rooms for the purposes of hygiene, such as after gym activities or using the pool, the bedroom doors will be open and Direct Care Staff will be positioned within eyesight or earshot of each room. The rooms should not be opened for any other reason."<br><br>Following the investigation for CHRIS report #: 2022004 on 10/11/22, and the review of the details of the serious incident it was determined that the procedure for policy PC-G-04 was not being implemented. It was evident that this policy was not implemented because the residents were in fighting in a bedroom outside of earshot and eyesight of residential staff. | PR) 11/16/2022<br><br>The event of September 24, 2022 occurred at 7:50 pm which is a time the residents are permitted in their bedroom to prepare for bedtime.<br><br>OLR) Partially Accepted 11/18/2022<br><br>Please describe how you will update your policies and plan for supervision for residents to be permitted in their bedroom.<br><br>PR) 12/02/2022<br><br>Updated policy is attached<br><br>OLR) Accepted 12/12/2022 | 12/2/2022 |

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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.

| Christine Morris, Associate Director | (Signature of Organization Representative) | Date |
|---|---|---|

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