DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **5234-14-002**
Organization Name: **Hallmark Youth Care - Richmond, LLC**

Date of Inspection: **10-11-2022**
Program Type/Facility Name: **14-002 Hallmark Youthcare TSAY**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. A. - Separate up-to-date written or automated personnel records shall be maintained for each employee, student/intern, volunteer, and contractual service provider for whom background investigations are required by Virginia statute. Content of personnel records of volunteers, students/interns, and contractual service providers may be limited to documentation of compliance with requirements of Virginia laws regarding child protective services and criminal history background investigations.	N	Hallmark Youthcare TSAY This regulation was NOT MET as evidenced by: In review of the personnel record for Individual #1, there is no documented evidence a criminal background check or central registry search was completed.	PR) 11/18/2022 During a review of the employee files it became evident that employee files were not being maintained according to regulations and Hallmark procedures. Confidential folder is now in the personnel file. Letters are now in the employee file. Human Resources implemented a system that reviewed older employee charts and developed an audit check list to ensure all required documents are included. OLR) Partially Accepted 11/28/2022 Please remove language referencing termination of staff. Provider can use language indicating that Human Resource policies were followed. PR) 12/02/2022 During a review of the employee files it became evident the files were not being maintained according to regulations and Hallmark procedures. Confidential folder is now in the personnel file. Letters are now in the employee file. Human Resources implemented a system that reviewed older employee charts and developed an audit check list to ensure all required documents are included. OLR) Partially Accepted 12/12/2022 Please remove termination language. PR) 01/23/2023 Name removed	12/31/2022

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
			OLR) Accepted 02/06/2023	
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;	NS	Hallmark Youthcare TSAY This regulation was NOT MET as evidenced by: In review of the personnel record for Individual #1, there is no documented evidence a criminal background check or central registry search was completed. The provider is found to be in systemic non-compliance. This regulation was previously cited on 6/29/22.	PR) 11/18/2022 Human Resources implemented a system that reviewed old and new employee charts and developed an audit check list to ensure all required documents are included. OLR) Accepted 11/28/2022	11/1/2022
12VAC35-46-940. L. - Any time children are present staff shall be present who have completed all trainings in behavior intervention.	N	Hallmark Youthcare TSAY This regulation was NOT MET as evidenced by: In review of the personnel record for Employee #1, there is no documented evidence the staff has completed a current certification in Handle With Care (behavior intervention). Please note the behavior intervention certification in the record expired on 5/20/21.	PR) 11/18/2022 All staff development charts were audited for compliance on 10/31/22. Employee #1 was recertified in Handle with Care on 11/8/22. HWC certification tracker created identifying expiration dates and scheduled 10 recertification classes throughout the months of November and December for expired and up-coming staff with all staff in compliance by 12/31/22. There will be at least 3 monthly recertification trainings moving forward. OLR) Partially Accepted 11/28/2022 Please remove all staff names. This CAP response has been opened for editing. PR) 12/02/2022 All staff development charts were audited	12/31/2022

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			for compliance on 10/31/22. Employee #1 was recertified in Handle with Care on 11/8/22. HWC certification tracker created identifying expiration dates and scheduled 10 recertification classes throughout the months of November and December for expired and up-coming staff with all staff in compliance by 12/31/22. There will be at least 3 monthly recertification trainings moving forward. OLR) Partially Accepted 12/12/2022 Please remove staff name. PR) 01/23/2023 Remove name OLR) Partially Accepted 02/06/2023 Please remove the staff name PR) 02/24/2023 PR) 11/18/2022 All staff development charts were audited for compliance on 10/31/22. Employee #1 was recertified in Handle with Care on 11/8/22. HWC certification tracker created identifying expiration dates and scheduled 10 recertification classes throughout the months of November and	

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			December for expired and up-coming staff with all staff in compliance by 12/31/22. There will be at least 3 monthly recertification trainings moving forward. OLR) Accepted 03/09/2023	

General Comments / Recommendations:
1. It is recommended that the provider implement an system that reviews older employee charts and audits for missing and outdated information.

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.

Melonie Beatty, Licensing Specialist | (Signature of Organization Representative) | Date

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