

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

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Investigation ID: 1

License #: **5649-14-009**

Organization Name: **Trinity Residential Services, LLC**

Date of Inspection: **12-11-2025**

Program Type/Facility Name: **14-009 Trinity Residential Services, LLC**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-610. B. - Adequate provision shall be made for the collection and legal disposal of garbage and waste materials.	N	Trinity Residential Services, LLC This regulation was NOT MET as evidenced by: The provider failed to maintain adequate provisions for the collection and disposal of garbage and waste materials as required by 12VAC35-46-610. B. During the on-site inspection conducted on December 11, 2025, the OL Department observed multiple piles of accumulated trash along the exterior side of the licensed home. This condition demonstrated that the provider did not maintain the exterior of the home in a sanitary manner.	PR) 02/13/2026 Trinity Residential Services, LLC acknowledges that the regulation 12VAC35-46-610(B) was not met and accepts responsibility for the cited deficiency regarding the collection and disposal of garbage and waste materials. To correct and prevent recurrence of this issue, the following actions will be taken: Immediate Remediation All accumulated trash and waste materials observed along the exterior of the licensed home were removed immediately following the on-site inspection. The exterior grounds of the home were thoroughly cleaned and sanitized to ensure a safe and sanitary environment. Waste Management Procedures The provider has implemented a structured waste disposal schedule requiring garbage to be collected and disposed of at least twice weekly, or more frequently as needed. All waste will be stored in covered, durable, pest-resistant containers until disposal. Vendor Services A licensed waste management service has been contracted to ensure routine, consistent trash collection. Proof of service and collection schedules will be maintained on-site.	2/16/2026

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			Staff Training and Accountability All staff members have been retrained on environmental sanitation requirements, including proper garbage handling and disposal in accordance with 12VAC35-46-610(B). Designated staff will be assigned responsibility for daily exterior inspections to ensure compliance. Ongoing Monitoring A weekly exterior sanitation checklist has been implemented and will be reviewed by the Program Director or designee. Any sanitation concerns identified will be corrected immediately. Quality Assurance Oversight Sanitation compliance will be incorporated into the provider's ongoing quality assurance and internal audit processes to ensure sustained compliance. OLR) Accepted 02/17/2026	
12VAC35-46-800. A. (2) - There shall be evidence of a structured program of care designed to: 2. Provide protection, guidance, and supervision;	N	Trinity Residential Services, LLC This regulation was NOT MET as evidenced by: The provider failed to ensure adequate protection, guidance, and supervision for the Individuals in care. Video footage and interviews confirmed that Individuals were able to leave the home without staff awareness, including Individual #1 walking to a neighbor's residence and attempting to enter their home.	PR) 02/13/2026 Trinity Residential Services, LLC acknowledges that the regulation regarding adequate protection, guidance, and supervision of Individuals in care was not met. The provider recognizes the seriousness of the incident in which Individuals were able to exit the home without staff awareness, including Individual #1 leaving the residence and attempting to enter a neighbor's home.	3/1/2026

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			To correct this deficiency and prevent recurrence, the following actions will be taken: Immediate Safety Interventions Staff coverage was immediately adjusted to ensure continuous supervision of all Individuals at all times. Exit doors were assessed, and safety measures (including alarms and door alerts where appropriate) were implemented to prevent unsupervised elopement. A headcount protocol was initiated at regular intervals and during all transitions. Individual Risk Assessment and Supervision Plans Individual supervision needs were reassessed for all Individuals, with particular focus on elopement risk. Individualized supervision and safety plans were updated to clearly outline supervision levels, line-of-sight requirements, and intervention strategies. Any Individuals identified as high risk for elopement were placed on enhanced supervision immediately. Staff Training and Re-Training All direct care staff received mandatory re-training on supervision requirements, elopement prevention, and emergency response procedures.	

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			Training included recognizing risk behaviors, maintaining awareness during shift changes, and responding promptly to missing Individuals. Documentation of training is maintained on-site. Staffing and Accountability Measures Staffing patterns were reviewed and adjusted to ensure adequate staff-to-Individual ratios at all times. A designated staff member per shift is now responsible for monitoring exits and maintaining awareness of Individual locations. Supervisory staff will conduct unannounced supervision checks to ensure compliance. Monitoring and Quality Assurance Daily supervision logs and incident review processes have been implemented. Any elopement or attempted elopement will be immediately reported, documented, and reviewed by administration. Supervision compliance is now a standing item in quality assurance and management reviews. Policy Review and Revision The provider reviewed and revised policies related to supervision, elopement prevention, and incident response. Policies have been re-distributed and reviewed with all staff to ensure understanding and compliance.	

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			OLR) Accepted 02/17/2026	

General Comments / Recommendations:

It is recommended that the provider submit their Corrective Action Plan (CAP) by the due date indicated on their Licensing Report.

It is recommended that the provider maintain adequate provision for the collection and legal disposal of garbage and waste materials.

It is recommended that the provider maintain a structured program of care designed to: 2. Provide protection, guidance, and supervision; to the Individual's they provider service to.

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.

Jessika Bennett, Licensing Specialist

(Signature of Organization Representative)

Date

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