

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

Page: 1 of 4

License #: **641-14-001**

Organization Name: **United Methodist Family Services**

Date of Inspection: **10-05-2022**

Program Type/Facility Name: **14-001 United Methodist Family Services**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-450. B. - An adequate supply of hot and cold running water shall be available at all times.	N	United Methodist Family Services This regulation was NOT MET as evidenced by: Upon review of the physical environment the hot and cold water was not flowing out of the faucets appropriately. Several push water buttons of the water bowl/basins were stuck in the down position when pushed, yet no water was coming through the faucet.	PR) 10/14/2022 A building checklist will be created and will include pushing the buttons on the faucets to ensure each one is working. This will be done for rooms that are in use and for rooms not in use UMFS is also looking into a longer term fix for the sinks with the manufacturer. The manual checks will continue until such time a full resolution can be done. Monitoring done by: UM, VP of Residential, Associate Director of Residential, Facility Committee OLR) Partially Accepted 10/17/2022 Please provide the frequency at which the building checklist will be conducted. PR) 10/18/2022 Provider will do the building checklist weekly. OLR) Accepted 10/18/2022	11/15/2022

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12VAC35-46-450. C. - Precautions shall be taken to prevent scalding from running water. Water temperatures shall be maintained between 100°F and 120°F.	N	United Methodist Family Services This regulation was NOT MET as evidenced by: Review of physical environment water temperatures were outside of the required range.	PR) 10/14/2022 UMFS maintenance department will set water temperature levels to match those noted in licensing regulations (120 degrees) Monitoring done by: UM, Associate Director of Residential, Facility Committee OLR) Partially Accepted 10/17/2022 Please identify how the provider will monitor that the water temperature will remain within the identified range, 100-120, including frequency of monitoring. PR) 10/18/2022 This will be done by maintenance monthly. OLR) Accepted 10/18/2022	11/15/2022

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Page: 3 of 4

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12VAC35-46-590. B. - The interior and exterior of all buildings shall be safe, properly maintained, clean, and in good working order. This includes, but is not limited to, required locks, mechanical devices, indoor and outdoor equipment, and furnishings.	N	United Methodist Family Services This regulation was NOT MET as evidenced by: Upon physical environment inspection it was noted that 2 of the suites did not have fire extinguishers within a viewable or easily accessible location. The fire extinguishers in these suites had the holding for the fire extinguisher, however, the glass/plastic covering was missing along with the canister itself.	PR) 10/14/2022 Fire extinguishers will be replaced on the unit either in the cases on the wall OR a laminated form will detail where fire extinguishers are located within the suite for all to staff's knowledge. The reason to keep the fire extinguishers off the floor cases so youth do not misuse the fire extinguishers. All staff have keys to access the room where the fire extinguisher is stored. Monitoring done by: UM, VP of Residential, Associate Director of Residential, Facility Committee OLR) Accepted 10/17/2022	11/15/2022

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General Comments / Recommendations: Noting that the provider has had a significant amount of individual imposed damage, which is being repairs in a timely fashion, to the walls and suites it is recommended to research alternative options for repairs; composite style drywall, wall guards, vinyl wall, kickplates, etc.				
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.				
_____ Nicole DeStefano		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				