DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **673-14-008**
Organization Name: **Gateway Homes, Inc.**

Date of Inspection: **09-13-2023**
Program Type/Facility Name: **14-008 Gateway Adolescent Program**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-70. - Each provider shall guarantee resident rights as outlined in § 37.2-400 of the Code of Virginia and in the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (12VAC35-115).	N	Gateway Adolescent Program This regulation was NOT MET as evidenced by: See OHR citation.		

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-115-230. A. (3a) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 3. The investigating authority shall provide a written report of the results of the investigation of abuse or neglect to the director and human rights advocate via the department's web-based reporting application within 10 working days from the date the investigation began unless an extension has been granted (see 12VAC35-115-175). This report shall include: 3a. Whether abuse, neglect, or exploitation occurred;	N	Gateway Adolescent Program This regulation was NOT MET as evidenced by: • Upon review of the CHRIS entry A-20230007, the provider failed to provide a written report of the results of the investigation within 10 working days from the date in which the investigation began. ◦ The investigative findings were due on 8/2/2023; however, The investigation results were not completed until 8/7/2023, as evidenced by the timestamp in the Department's web-based reporting system (CHRIS).	PR) 09/21/2023 The investigation was completed on 8/2/2023; however, the report of the findings was indeed entered late. Both the risk manager and the director of quality assurance, who share responsibility for the entry of Human Rights' incidents, investigations, and findings, were out of the office from 8/1 - 8/7. When the risk manager realized the error and went to enter the findings, the CHRIS system locked them out. Since the risk manager is the primary account holder, they were required to wait for DELTA to send reset information. Upon receipt of the reset information, the findings were entered. Staggered PTO will be implemented to eliminate, as much as possible, the liklihood that both individuals will be out. Additionally, Gateway has hired and is training a specialist in serious incident and human rights report management that will be able to assist with managing the timelines and needs for the organization. Human error is impossible to eradicate and with humility, Gateway has entered nearly 120 reports into CHRIS in the last year and late reporting is nearly nonexistent. OHR/OLR) Accepted 09/22/2023	8/7/2023

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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.

Andrea Milhouse, Human Rights	(Signature of Organization Representative)	Date

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