DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **779-14-008**
Organization Name: **Open Arms Family Services, Inc.**

Date of Inspection: **10-01-2024**
Program Type/Facility Name: **14-008 Omega I Residential Service**

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	Omega I Residential Service This regulation was NOT MET as evidenced by: See OHR citation.		10/17/2024

License #: **779-14-008**
Organization Name: **Open Arms Family Services, Inc.**

Date of Inspection: **10-01-2024**
Program Type/Facility Name: **14-008 Omega I Residential Service**

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	Omega I Residential Service This regulation was NOT MET as evidenced by: • Upon review of CHRIS entry A-20240002, on 9/29/2024, the provider was notified of the allegation on 8/26/2024. As of 9/25/2024, the provider has failed to provide the date the investigation began or a written report of the results of the investigation within 10 working days from the date in which the investigation began.	PR) 10/11/2024 The Program Director and Risk Manager are responsible for ensuring SIR are submitted and investigated until the report can be closed. The Risk Manager and Program Director have received additional guidance from the OHR on how to navigate the CHRIS to add the final investigation information within 10 days of the start of the investigation. The Risk Manager will be responsible for completing the investigation until it is closed. OHR/OLR) Accepted 10/15/2024	10/17/2024

License #: **779-14-008**
Organization Name: **Open Arms Family Services, Inc.**

Date of Inspection: **10-01-2024**
Program Type/Facility Name: **14-008 Omega I Residential Service**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	Omega I Residential Service This regulation was NOT MET as evidenced by: "Neglect" means failure by a person, program, or facility operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, responsible for providing services to do so, including nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of an individual receiving care or treatment for mental illness, intellectual disability, or substance abuse. Provider substantiated neglect based on the following: • Upon review of CHRIS entry A-20240002, the provider's investigation determined Neglect was substantiated based on eyewitness statements. Based on preponderance of evidence, Employee #1 failed to ensure the health and safety of Individual #1.	PR) 10/11/2024 The Program Manager is responsible for the day-to-day operations of the group home. The Program Manager and Program Director are responsible for maintaining the safety of residents. Employee #1 did not provide support and supervision to the Direct Service Professionals. Employee #1 has been terminated. The Program Manager and Program Director will ensure the Direct Service Professionals are monitoring the group home environment for any contraband or anything else that may place the resident at risk during each shift. The Program Director will retrain all staff on monitoring the group home environment for any safety issues and will provide ongoing training. OHR/OLR) Accepted 10/15/2024	10/17/2024

DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **779-14-008**
Organization Name: **Open Arms Family Services, Inc.**

Date of Inspection: **10-01-2024**
Program Type/Facility Name: **14-008 Omega I Residential Service**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date

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