DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **12-16-2024**
Program Type/Facility Name: **14-008 Omega I Residential Service**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-300. B. (10) - The records of each employee shall include: 10. A current job description.	N	Omega I Residential Service This regulation was NOT MET as evidenced by: Upon review of Employee #2's personnel file, the provider failed to have written documented evidence of the current position description for Employee #2. According to the provider, Employee #2 is currently the program manager of the group home as of 9/16/2024. However, there is not a position description in the personnel file for the program manager position for Employee #2. Please submit Employee #2's singed program manager position description as part of the corrective action. AND Please address the citation with a corrective action plan of why the regulation was cited, how you will mitigate this regulation from being cited in the future, the staff member's position title for implementing the corrective action and the date that the corrective action will be implemented in the response.	PR) 12/20/2024 The Program Director is responsible for completing the interview and discussing the job description with new hires. The Program Director will submit the signed copy of the job description to the Executive Secretary within 24 hours of completing the onboarding documentation process to be filed in the new hires Personnel folder. If a current employee assumes a new/different position, that employee will sign and date the job description on the same day they assume the role and the job description will be filed in the personnel file by the Executive Secretary. OLR) Accepted 01/02/2025	12/23/2024

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Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-310. A. (7) - Required initial training: 7. Within 30 days following their begin date, all staff shall be trained on appropriate siting of children's residential facilities, and good neighbor policies and community relations.	N	Omega I Residential Service This regulation was NOT MET as evidenced by: Upon review of Employee #1 and Employee #2's orientation, the provider failed to have written documented evidence that Employee #1 and Employee #2 had been trained in the good neighbor policies and community relations. Please submit documentation that both Employee #1 and Employee #2 have been trained in the providers good neighbor policies and community relations as part of the corrective action. AND Please address the citation with a corrective action plan of why the regulation was cited, how you will mitigate this regulation from being cited in the future, the staff member's position title for implementing the corrective action and the date that the corrective action will be implemented in the response.	PR) 12/31/2024 The Program Director is responsible to conducting Employee Orientation along with the Program Manager prior to new hires stating to work in the group home on shift. Employee orientation can be up to 30 days or longer if the new hire is not demonstrating a satisfactory understanding of the information during the orientation period. The Program Director has revised the Employee Orientation form to include the required timeframe for completion of training on Good Neighbors and Community Relationships policy 12VAC35-46-1000 for your review and approval. All staff will be retrained annual on community relationships. OLR) Accepted 01/02/2025	12/30/2024

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12VAC35-46-310. B. (2) - Required annual retraining: 2. All staff who administer medication shall complete annual refresher medication training.	N	Omega I Residential Service This regulation was NOT MET as evidenced by: Upon review of Employee #1 and Employee #2's personnel files, the provider failed to have written documentation that Employee #1 and Employee #2 had annual retraining in a refresher medication training class. Please submit documentation that Employee #1 and Employee #2 have been scheduled to be retrained or certificate of retraining in medication administration as part of the corrective action. AND Please address the citation with a corrective action plan of why the regulation was cited, how you will mitigate this regulation from being cited in the future, the staff member's position title for implementing the corrective action and the date that the corrective action will be implemented in the response.	PR) 12/30/2024 The Executive Secretary is responsible for updated the employee and the Program Manager on upcoming annual training dates. The Program Manager is responsible for coordinating and scheduling the annual Refresher Medication training. It appears this was an oversight on the current Program Managers' part as she transitions into the position. Moving forward, the Executive Secretary will notify the Program Manager and Program Director of annual refresher training in medication 60 days prior to the certificate expiring. OLR) Accepted 01/02/2025	1/10/2025

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12VAC35-46-720. B. - Each resident's record shall contain, prior to a routine admission, a completed placement agreement signed by a facility representative and the parent, legal guardian, or placing agency.	N	Omega I Residential Service This regulation was NOT MET as evidenced by: Upon review of both Individual #1 and Individual #2's service record, the provider failed to have written documented evidence of a placement agreement on Individual #1 or Individual #2's record. The provider had the placement agreements in the administrative office. Please address the citation with a corrective action plan of why the regulation was cited, how you will mitigate this regulation from being cited in the future, the staff member's position title for implementing the corrective action and the date that the corrective action will be implemented in the response.	PR) 12/20/2024 After further clarification from LS Ms. Tina Williams and reviewing "*The specific dollar amount **does not need** to be noted in the placement agreement. The placement agreement can reference the Comprehensive Services Act contract*", I have attached a revised Placement Agreement that will be kept in the Resident Folder on site at the group home for your review and approval. Both Individual #1 and Individual #2 Placement Agreements have been filed in the Resident Folder at the group home by the Program Director who is responsible for the completion of the Agreement with the CSA department. OLR) Accepted 01/02/2025	12/23/2024

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General Comments / Recommendations:
1-LS recommends that the provider review policies and procedures to ensure that each policy addresses the correct regulation number and population for the service.

2-LS recommends that the provider in reviewing the policies ensures that the process that staff implement are the same as the policies.

3-LS highly recommends that prior to any work being completed in the group home that the provider submit a Information Modification-Building and Home repair- along with a safety plan for the residents, for approval prior to the work being performed.

4-Please review the licensing report and submit the corrective action plan by the due date, as reported in the licensing report.

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.

Tina Williams, Licensing Specialist	(Signature of Organization Representative)	Date

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