

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

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License #: 780-14-001

Organization Name: Liberty Point Behavioral Healthcare, LLC

Date of Inspection: 08-22-2025

Program Type/Facility Name: 14-001 Liberty Point Academy

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-1070. C. - The provider shall notify the department within 24 hours of any serious illness or injury, any death of a resident, and all other situations as required by the department. Such reports shall include: 1. The date and time the incident occurred; 2. A brief description of the incident; 3. The action taken as a result of the incident; 4. The name of the person who completed the report; 5. The name of the person who made the report to the placing agency and to either the parent or legal guardian; 6. The name of the person to whom the report was made.	NS	Liberty Point Academy This regulation was NOT MET (SYSTEMIC) as evidenced by: CHRIS Number: 20250027 Date/Time of Discover: 07/29/2025 7:39PM Enter Date/Time: 08/01/2025 8:09AM Reporting Delay: 36:30:00 Location Name: Liberty Point Academy CHRIS Number: 20250028 Date/Time of Discover: 07/29/2025 7:45AM Enter Date/Time: 08/01/2025 8:24AM Reporting Delay: 48:39:00 Location Name: Liberty Point Academy Note: As this is provider's second step in the Progressive Citation Cycle for the same regulation within a one-year period, measured on a rolling basis, provider has demonstrated systemic noncompliance. Provider was previously cited for late reporting • The first citation was issued on 9/18/24 and is now non-compliant.	PR) 09/08/2025 Following the recent incident involving peer-on-peer aggression, it was identified that the reporting of the event did not take place within the established timeframe. The Director of Quality Management failed to report peer on peer aggression that related to the aggressors. We recognize that prompt reporting is essential for safeguarding the well-being of all individuals served and for upholding compliance with regulatory standards. The Director of Quality Management and the Director of Utilization Management have conducted a review of the guidance related to Serious Incident Reporting and have completed signed attestations pertaining to the guidance sent out by DBHDS Office of Licensing. OLR) Partially Accepted 09/19/2025 In addition to the above, the provider response needs to include the following: - Staff by title responsible for monitoring process implemented to ensure timely data entry of Level II and Level III incidents into CHRIS. This role should be someone other than the person who is responsible for entering the data in CHRIS where possible. - Indicate the frequency for monitoring the plan including how it will be monitored (Ex: daily checks, monthly audits, weekly chart reviews, quarterly checklist). PR) 09/22/2025	9/8/2025

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			Director of Quality Management, is the primary individual accountable for entering incidents in the CHRIS system. Director of Utilization Management, serves as the backup for entering incidents in the absence of the Director of Quality Management. Both Directors will participate in daily operations meetings to review incidents occurring at the facility and will assess any necessary reporting at this time. Furthermore, we will present our findings at the Quality Council meeting, where they will be evaluated by the leadership team monthly. OLR) Accepted 10/01/2025 Actual names removed from provider response.	

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.

Lakesha Steele, Incident Management
Unit

(Signature of Organization Representative)

Date

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