DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **909-14-003**
Organization Name: **Harbor Point Behavioral Health Center**

Date of Inspection: **04-14-2022**
Program Type/Facility Name: **14-003 Harbor Point Behavioral Health**

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	Harbor Point Behavioral Health This regulation was NOT MET as evidenced by: See OHR citation.	PR) 06/25/2022 See responses provided by Harbor Point Behavioral Health Center in regards to the Office of Human Rights Citations below. OLR) Accepted 08/10/2022	6/24/2022
12VAC35-115-50. C. (3a) - In services provided in residential and inpatient settings, each individual has the right to: 3. Live in a humane, safe, sanitary environment that gives each individual, at a minimum: 3a. Reasonable privacy and private storage space;	N	Harbor Point Behavioral Health This regulation was NOT MET as evidenced by: Incident date: 3.25.22 • An unannounced visit was completed to this provider where several Human Rights violations were noted such as clogged toilets vents that were covered with heavy dust, mold on shower curtains, uncleaned bathrooms, hole in a wall, peeling paint, bread that had expired and soap scum build up.	PR) 06/25/2022 Providers Response/Corrective Action Taken: On March 15, 2022, the Director of Plant Operations ordered eleven patient room doors from Beach Door, five of which were broken by a resident during one incident. When ordering, the Director of Plant Operations ordered additional doors to maintain in inventory for future replacement needs. The Director of Plant Operations received notice from Beach Door, noting delay in shipment on May 17, 2022. Again, on June 9, 2022, the Director of Plant Operations was notified by Beach Door in a delay in shipment. The patient room doors were delivered to Harbor Point Behavioral Health Center on June 16, 2022, beginning installation on June 17, 2022. Installation is expected to be complete on or before June 24, 2022. On March 25, 2022, the Associate Administrator, in	6/24/2022

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			conjunction with the Program Managers, reassigned patient rooms to ensure each resident was assigned to a room with a working patient room door. Person Responsible: Director of Plant Operations Monitoring System: The Director of Plant Operations maintains oversight of facility work orders, noting damages in patient room doors and/or patient bathroom doors that would interfere with the patient's right to reasonable privacy and private storage space. The Director of Plant Operations creates the work schedule for the maintenance department, elevating the door replacement to top priority for completion. The Director of Plant Operations maintains inventory of replacement doors and orders monthly to maintain stock of doors for immediate replacement. The Director of Plant Operation will notify the Associate Administrator of an inability to replace doors. The Associate Administrator, in conjunction with the Program Managers, will reassign the patient to a room with workable doors. All work orders, to include damage to doors and replacement of doors, is reported monthly to the Environment of Care Committee, to include date of damage and date of repair. The Director of Plant Operations maintains	

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			oversight of facility work orders, including damage to structure such as holes in the wall, peeling paint, etc. The Director of Plant Operations creates the work schedule for the maintenance department, assigning maintenance staff to repair damages in order of severity. All work orders, to include damage to facility structure, is reported monthly to the Environment of Care Committee, noting date of damage and date of repair. OHR/OLR) Accepted 06/30/2022	
12VAC35-115-50. C. (3b) - In services provided in residential and inpatient settings, each individual has the right to: 3. Live in a humane, safe, sanitary environment that gives each individual, at a minimum: 3b. An adequate number of private, operating toilets, sinks, showers, and tubs that are designed to accommodate individuals' physical needs;	N	Harbor Point Behavioral Health This regulation was NOT MET as evidenced by: Incident date: 3.25.22 • An unannounced visit was completed to this provider where several Human Rights violations were noted such as clogged toilets vents that were covered with heavy dust, mold on shower curtains, uncleaned bathrooms, hole in a wall, peeling paint, bread that had expired and soap scum build up.	PR) 06/25/2022 Providers Response/Corrective Action Taken: On March 25, 2022, Housekeeping Staff, with oversight from the Director of Plant Operations and the Environmental Services Manager, completed a deep clean of all patient bathrooms and community bathrooms, focusing on those identified as having mold, soap-scum build-up and concerns with overall cleanliness. On March 25, 2022, the Director of Plant Operations contacted Jani-King, cleaning company, who arrived to the facility on the same date, conducting an assessment, providing a verbal response that the areas identified were residue and soap scum build-up, not mold. The Director of Plant Operations is developing a contract for annual cleaning for possible mold and soap scum build-up. Harbor Point Behavioral Health Center utilizes a hospital grade, high-pressure steam spray cleaning system to disinfect and sanitize all surfaces of patient bathrooms and community bathrooms on a monthly basis, in addition to daily chemical cleaning of patient bathrooms and community bathrooms. The Director of Plant Operations will secure an	6/24/2022

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			external vendor to disinfect patient bathrooms and community bathrooms, focusing on mold and soap scum build-up, on a bi-annual basis. Person Responsible: Director of Plant Operations Environmental Services Manager Monitoring System: The Environmental Services Manager maintains oversight of the daily and monthly cleaning schedule, including but not limited to mold in the bathrooms and/or shower curtains, soap scum build-up, and overall cleanliness. The Environmental Services Manager develops the facility cleaning assignments, maintaining oversight of completion and conducting fidelity checks for compliance of the Housekeeping staff. The Director of Plant Operations maintains oversight of facility work orders, including but not limited to clogged toilets. The Director of Plant Operations creates the work schedule for the maintenance department, assigning maintenance staff to repair damages in order of severity. All work orders, to include clogged toilets, as well as, daily, monthly and bi-annual cleaning compliance is reported monthly to the	

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			Environment of Care Committee, noting date of facility damage, date of repair and facility cleaning compliance. Compliance Date: 06-27-2022 OHR/OLR) Accepted 06/30/2022	
12VAC35-115-50. C. (3e) - In services provided in residential and inpatient settings, each individual has the right to: 3. Live in a humane, safe, sanitary environment that gives each individual, at a minimum: 3e. Clean air, free of bad odors;	N	Harbor Point Behavioral Health This regulation was NOT MET as evidenced by: Incident date: 3.25.22 • An unannounced visit was completed to this provider where several Human Rights violations were noted such as clogged toilets vents that were covered with heavy dust, mold on shower curtains, uncleaned bathrooms, hole in a wall, peeling paint, bread that had expired and soap scum build up.	PR) 06/25/2022 Providers Response/Corrective Action Taken: Following the Office of Human Rights unannounced visit, the Director of Plant Operations ordered a vacuum specifically designed to clean vents. On April 21, 2022, Maintenance Staff, with oversight from the Director of Plant Operations, began a deep clean of facility vents, removing heavy dust accumulated from the return registers. The Director of Plant Operations implemented a quarterly vent cleaning schedule to clean and remove heavy dust. In addition, Housekeeping Staff maintains daily oversight of vents, immediately notifying Maintenance Staff if heavy dust build-up is observed, allowing for the cleaning of the vent, permitting quality air circulation. Person Responsible: Director of Plant Operations Environmental Services Manager	6/24/2022

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			Monitoring System: The Director of Plant Operations maintains oversight of facility work orders and schedules, ensuring quarterly completion of facility vents, removing heavy dust accumulated from the return registers, permitting clean air and removal of bad odors. All routine orders, to include cleaning vents, is reported monthly to the Environment of Care Committee, noting date of damage and date of repair. Providers Response/Corrective Action Taken: Though not cited in a specific standard, Nutritional Services Policy 009: Food Product Storage was revised on May 12, 2022. The Dietary Manager developed a checklist of compliance with food rotation on a daily basis. Weekly, the Dietary Manager, or designee, will audit the checklist for compliance. All bread products contain a "Received" date on the package. The Dietary Department will use red "Use First" stickers to identify older products, ensuring quality according to the date and condition of the product. The Dietary Manager completed training with 100% of the Dietary Staff on June 16, 2022, focusing on quality assurance during meal preparation. In addition, Dietary Staff will complete the Portsmouth Food Handlers training course yearly. Person Responsible: Dietary Manager	

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			Director of Plant Operations Monitoring System: Weekly, the Dietary Manager, or designee, will audit the food rotation checklist for compliance. The Dietary Manager collects and aggregates data, submitting report information to the Director of Plant Operations for inclusion in the in monthly Environment of Care meeting. Upon discovery of deficiencies and/or non-compliance, the Dietary Manager will complete retraining and/or corrective action as appropriate. OHR/OLR) Accepted 06/30/2022	

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.

Tonya Carr, Legal Operations Manager | (Signature of Organization Representative) | Date

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