DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **03-29-2023**
Program Type/Facility Name: **14-003 Harbor Point Behavioral Health**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-1070. 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	Harbor Point Behavioral Health This regulation was NOT MET (Systemic) as evidenced by: CHRIS Number: 20230023 Date/Time of Discover: 03/13/2023 8:03PM Enter Date/Time: 03/14/2023 10:24PM Reporting Delay: 2:21:00 Location Name: Harbor Point Behavioral Health This is a systemic (NS) citation. Based upon the rolling year (March 30, 2022 – March 29, 2023) for 14-003 this is the Third Step in the Progressive Citation Process for violation of 12VAC35-46-1070.C. • The first citation was issued on 04/26/22 and is now a non-compliant. • The second citation was issued on 8/9/22 and is now a non-compliant. • The third citation was issued on 11/29/22 and is now a non-compliant-systemic. Per the Guidance on Incident Reporting Requirements, you are being required to attest to reviewing ALL CHRIS Training and guidance documents located on the DBHDS website as indicated by a check mark on the attestation form. Resolution to this licensing report requires two actions. The first action is to submitting an acceptable licensing report response. The second is to include the signed attestation form(s) for each individual within the organization who is required by you to receive training and to review guidance documents as attachments with the	PR) 04/17/2023 CHRIS #20230023 was an incident that occurred on March 13, 2023 at 20:00hrs. A female resident was discovered in her room by staff while attempting to tie a bedsheet around her neck to self-harm. The staff called a code and the Unit Nurse arrived and assessed the resident. The nurse called the facility doctor at 20:03hrs and reported the incident. The Doctor gave orders for the resident to be transported to CHKD emergency department for psychiatric evaluation which was done that night. Per the facility's internal CHRIS reporting process, the emergency department visit should have been entered into the CHRIS and reported on the Supervisor's Shift Report. However, the shift supervisor that night was a proxy who was covering the shift in the absence of the actual Shift Supervisor. That acting supervisor did not have CHRIS login credentials and was unfamiliar with the CHRIS reporting requirements. He therefore did not enter the incident into the CHRIS neither did he notify incoming Shift Supervisors until late the next day when the Second Shift Supervisor became aware of the ER visit. It was that Supervisor who entered the incident into the CHRIS a little after 24 hours after the incident, in violation of 12VAC35-46-1070.C. To prevent recurrence, as of March 20, 2023, Shift Supervisors are now required to audit nursing and shift supervisors' reports from shifts that immediately precede their own shifts. This will be the first QA step in our CHRIS reporting process. Oversights discovered from the initial QA process will be corrected by that supervisor	4/17/2023

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		licensing report response. Both Items are due no later than the due date of 4/19/23. If the provider does not submit attestation(s) to confirm completion of required trainings and document reviews as indicated on the form, the provider may incur negative actions. The links for the trainings and guidance documents are listed in the attached attestation form.	entering the incident into the CHRIS. Additionally, each morning, Risk Management will audit nursing and shift supervisor reports, as well as incident reports, to determine CHRIS reportable incidents and if they were entered into the CHRIS on time. Risk Management will enter into the CHRIS any reportable incident(s) that are oversighted to ensure compliance with 12VAC35-46-1070.C. This will be an ongoing process to assure continued compliance with 12VAC35-46-1070.C. OLR) Accepted 04/26/2023	

General Comments / Recommendations:
Please be sure to review the Licensing Report Response Guidance in the CAP Issue Letter to aid in the acceptance of your CAP and return the following items no later than April 19, 2023.

1. Licensing Report Response
2. Signed Attestation Form(s) for each individual required by you to receive training and to review guidance documents.

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