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

Date of Inspection: **09-05-2024**
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 citations below.		
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	Harbor Point Behavioral Health 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. See § 37.2-100 of the Code of Virginia. • Per provider's CHRIS report #20240362 based on a preponderance of the evidence which included witness statements, the provider substantiated the allegation of neglect when Employee #1 failed to follow the provider's internal policy regarding their criteria for physical intervention when Employee #1 physically intervened with	PR) 09/23/2024 Response to the CAP (CHRIS Incident #20240362) 1. Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation. **On July 28, 2024, Employee #1 was redirecting another resident when Individual #1 intervened rudely. Employee #1 asked Individual #1 leave, but Individual #1 refused to leave. As Employee #1 attempted to remove Individual #1, Employee #1's cellphone fell from their pocket. Individual #1 picked the cellphone from the floor and ran into their bedroom. Employee #1 ran after Individual #1 into the bedroom. While inside Individual #1's bedroom, Employee #1 allegedly engaged in a scuffle with Individual #1 during**	8/5/2024

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		Individual as they were trying to obtain their cell phone back from Individual #1. • Per provider's CHRIS report #20240362, while Employee #1 was physically trying to obtain their cell phone back from Individual #1, Employee #1 inadvertently knocked Individual to the floor causing minor bruising to their head. • As a result of Employee #1's actions, Individuals #1's right to be free from neglect was violated.	**which Employee #1 is alleged to have pushed Individual #1 causing Individual #1 to fall backward, thus causing an injury to Individual #1. The nurse provided first-aid to Individual #1.** 1. Include a plan of action to address systematic changes (process/protocols, etc.) that have been or will be implemented to ensure you remain in compliance of the regulation. **The incident was isolated to Employee #1, and did not represent the general professional conduct of facility employees. However, because Employee #1 acted outside the scope of our therapeutic and trauma informed care treatment framework, Employee #1's badge and facility keys were taken, and was suspended pending the conclusion of the investigation.** 1. Include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation. Indicate the frequency for monitoring the plan including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist). **Monitoring of the compliance intervention was not applicable. Employee #1 was scheduled to be terminated and was called to report to the HR Department the following week to sign termination papers. Upon arrival at the HR Department, Employee #1 submitted a letter of resignation in lieu of termination.** 1. By what date you will have each planned corrective action completed (Ex. Date training completed or Date protocol	

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			implemented). **Employee #1 was terminated on August 5, 2024. Copies of the termination and resignation have been uploaded to this CAP.** OHR/OLR) Accepted 09/25/2024	

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.

Latoya Wilborne, Human Rights	(Signature of Organization Representative)	Date

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