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

Date of Inspection: **11-06-2025**
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: 20250090 Date/Time of Discover: 10/17/2025 4:30PM Enter Date/Time: 10/20/2025 11:08AM Reporting Delay: 42:38:00 Location Name: Harbor Point Behavioral Health CHRIS Number: 20250091 Date/Time of Discover: 10/19/2025 1:59AM Enter Date/Time: 10/20/2025 3:17PM Reporting Delay: 13:18:00 Location Name: Harbor Point Behavioral Health CHRIS Number: 20250092 Date/Time of Discover: 10/20/2025 11:02AM Enter Date/Time: 10/21/2025 2:08PM Reporting Delay: 3:6:00 Location Name: Harbor Point Behavioral Health 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 4/10/25 and is now non-compliant.	PR) 12/18/2025 CHRIS Number: 20250090 Information has been included in the CHRIS entry indicating that the facility was experiencing an internet outage at the time this entry was due. This outage prevented the designated staff from making the entry in the CHRIS system, and also from using DBHDS Connect or email to notify the department of the impending entry. CHRIS Number: 20250091 Information has been included in the CHRIS entry indicating that the facility was experiencing an internet outage at the time this entry was due. This outage prevented the designated staff from making the entry in the CHRIS system, and also from using DBHDS Connect or email to notify the department of the impending entry. CHRIS Number: 20250092 Information has been included in the CHRIS entry indicating the individual received timely medical attention from facility nurses on the date of the incident. The following day, he was transported for Emergency care, making the incident reportable on that later date, therefore the case was entered properly. OLR) Partially Accepted 01/06/2026 In addition to the above, the provider response needs to include the following:	12/11/2025

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			1. How was the late reporting of incidents addressed? Was it a meeting, a training, or process change? Please be specific. 2. Description of safeguards enacted agency wide to ensure all Level II and Level III are entered into CHRIS within the required timeframe. 3. 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. 4. Indicate the frequency for monitoring the plan including how it will be monitored (Ex: daily checks, monthly audits, weekly chart reviews, quarterly checklist). 5. Staff by title who has the primary responsibility to enter incidents into CHRIS. 6. Staff by title who serves as back up to enter incidents into CHRIS when the designated person is unable to do so including nights, weekends, and holidays. PR) 03/11/2026 **How was the late reporting of incidents addressed? Was it a meeting, a training, or process change? Please be specific.** This specific late reporting occurred as a result of internet outage at the facility. All staff who would have entered the incidents into the CHRIS system were available, but there was no network connectivity. We consequently decided that in	

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			the event of future connectivity problems, a member of our team will work from home to fulfill our timely reporting of incidents. **Description of safeguards enacted agency wide to ensure all Level II and Level III are entered into CHRIS within the required timeframe.** We have also trained additional staff, including all Milieu Managers, to enter CHRIS incidents across all shifts. **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.** The Associate Administrator and the Director of Risk Management are responsible for ensuring compliance with the process we have created. **Indicate the frequency for monitoring the plan including how it will be monitored (Ex: daily checks, monthly audits, weekly chart reviews, quarterly checklist).** The Director of Risk Management will monitor CHRIS reporting DAILY to ensure compliance. **Staff by title who has the primary responsibility to enter incidents into CHRIS.** Director of Risk Management; Assistant Director of Risk Management **Staff by title who serves as back up to enter incidents into CHRIS when the designated**	

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			person is unable to do so including nights, weekends, and holidays. Inter-Departmental Coordinator; Milieu Managers; Program Managers; Administrators-On-Call. OLR) Accepted 03/11/2026	

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