DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

Investigation ID: **29**
License #: **9448-14-009**
Organization Name: **Pure Faith House Inc.**

Date of Inspection: **07-07-2026**
Program Type/Facility Name: **14-009 Pure Faith House Inc**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-270. B. (1) - A person who assumes or is designated to assume the responsibilities of a position or any combination of positions described in this chapter shall: 1. Meet the qualifications of the position	N	Pure Faith House Inc This regulation was NOT MET as evidenced by: Based on a review of personnel records, Individual #1, Individual #2, and Individual #3 did not meet the minimum qualification requirements for their respective positions. Specifically, personnel records did not demonstrate that Individual #1, Individual #2, and Individual #3 had the required six months of childcare experience as established by the position requirements. Therefore, the provider failed to ensure that individuals assuming the responsibilities of these positions met the qualifications required by this chapter.	PR) 09/13/2026 Pure Faith House Inc. was found noncompliant with 12VAC35-46-270(B)(1) due to personnel records not accurately reflecting the qualifying work experience of Individual #1, Individual #2, and Individual #3. Upon identification of the deficiency, the Program Director reviewed the qualifications and personnel records of the identified employees. The review determined that personnel documentation, including resumes, was incomplete or outdated and did not accurately reflect the employees' qualifying experience. Personnel records were updated to accurately document employee qualifications. To address the deficient practice, Pure Faith House Inc. reviewed personnel file procedures to ensure employee qualifications are verified and accurately documented prior to assignment and maintained in accordance with applicable requirements. The Program Director will monitor personnel files monthly through personnel file reviews. The Risk Manager will monitor CAP compliance and follow up on identified concerns. The Chief Executive Officer will provide administrative oversight and address compliance concerns requiring leadership intervention. OLR) Accepted 09/14/2026	7/16/2026

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General Comments / Recommendations:
Please respond to the CAP on or before the due date. If you should have any questions or require further assistant, please contact me via CONNECT or at 804-393-0663.

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.

Donna Ross, Licensing Specialist	(Signature of Organization Representative)	Date

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