

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

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Investigation ID: 11

License #: 986-04-005

Organization Name: Poplar Springs Hospital

Date of Inspection: 05-17-2022

Program Type/Facility Name: 04-005 Poplar Springs-Adolescents

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-280. A. - The physical environment, design, structure, furnishings, and lighting shall be appropriate to the individuals served and the services provided.	N	Poplar Springs-Adolescents This regulation was NOT MET as evidenced by: In review the physical plant (RTC), graffiti was noted throughout the entire unit.	PR) 06/13/2022 Director of Risk Management and Associate Administrator met with the RTC Executive Director and RTC Director of Plant Operations to review the findings from the physical plant inspection. The RTC Director of Plant Operations provided an updated copy of the maintenance plan that identifies the frequencies of cleaning and painting. The RTC Director of Plant Operations will make ongoing revisions to the maintenance plan to address the cleaning of the residential units as necessary. The RTC Leadership team in conjunction with Director of Risk Management and Associate Administrator are working to identify writing utensils for the residents that can easily be wiped off the wall and are not oil based. The RTC Director of Plant Operations will review the weekly cleaning checklist each Friday morning during the daily operations meeting to address any areas identified as requiring attention and for completion of the checklist. For areas identified as requiring outside vendors, the RTC Director of Plant Operations will complete all required organizational steps to have services rendered. The RTC Executive Director and RTC Director of Plant Operations will conduct an inspection based upon the completion of the checklist for compliance. Aggregated results from the inspections will be presented to EOC meeting quarterly.	10/1/2022

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Organization Name: Poplar Springs Hospital

Date of Inspection: 05-17-2022

Program Type/Facility Name: 04-005 Poplar Springs-Adolescents

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			OLR) Accepted 06/14/2022 OLR: Accepted on 06/14/22	
12VAC35-105-280. C. - The physical environment and furnishings shall be clean, dry, free of foul odors, safe, and well-maintained.	N	Poplar Springs-Adolescents This regulation was NOT MET as evidenced by: In review the physical plant (RTC), graffiti was noted throughout the entire unit. It should also be noted the general appearance of unit is in need of cleaning (dirty windows in the solarium, patched walls, dirty walls throughout the unit)	PR) 06/13/2022 Director of Risk Management and Associate Administrator met with the RTC Executive Director and RTC Director of Plant Operations to review the findings from the physical plant inspection. The RTC Director of Plant Operations provided an updated copy of the maintenance plan that identifies the frequencies of cleaning and painting. The RTC Director of Plant Operations will make ongoing revisions to the maintenance plan to address the cleaning of the residential units as necessary. The RTC Leadership team in conjunction with Director of Risk Management and Associate Administrator are working to identify writing utensils for the residents that can easily be wiped off the wall and are not oil based. The RTC Director of Plant Operations will review the weekly cleaning checklist each Friday morning during the daily operations meeting to address any areas identified as requiring attention and for completion of the checklist. For areas identified as requiring outside vendors, the RTC Director of Plant Operations will complete all required organizational steps to have services rendered. The RTC Executive Director and RTC Director of Plant Operations will conduct an inspection based upon the completion of the checklist for compliance.	10/1/2022

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Program Type/Facility Name: 04-005 Poplar Springs-Adolescents

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
			Aggregated results from the inspections will be presented to EOC meeting quarterly. OLR) Accepted 06/14/2022 OLR: Accepted on 06/14/22	

General Comments / Recommendations:

Complete on-going and planned maintenance repairs on the RTC Unit

Document specific cases discussed during daily morning meetings.

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.

Amber Nesbitt, Licensing Specialist

(Signature of Organization Representative)

Date

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