

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

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License #: **986-04-005**

Organization Name: **Poplar Springs Hospital**

Date of Inspection: **08-09-2022**

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>
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	Poplar Springs-Adolescents This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 09/21/2022 Employee #1 and Employee #2 received corrective actions due to failure to comply with policy #2318 levels of observation. The Director of Risk Management, Associate Administrator, and Chief Executive Officer met to review the various incidents regarding sexual misconduct and/or sexual intercourse. Upon meeting it was determined that the facility was in need of additional sexual acting out prevention and a request was made for the Get SMART model to be introduced. The Get SMART module identifies active supervision, maladaptive behaviors, appropriate boundaries, how to respond to SAO incidents appropriately, and trauma that can occur afterwards. The program will promote an increase in boundary violation reporting which will allow the ability to address the patient behavior early to prevent sexual acts. On 5/19/2022 the leadership team at Poplar Springs Hospital received training and completed training in order to be able to train all staff at the facility. All current employees have been or will be trained on the Get SMART program, new employees will be trained on the Get SMART module during new employee orientation and all staff will have a refresher course during annual reorientation. The Director of Risk Management will review incidents and reporting of boundary violations daily.	10/1/2022

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Organization Name: Poplar Springs Hospital

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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 data on compliance with reporting boundary violations will be reported monthly to patient safety council. OLR) Accepted 10/10/2022	
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	Poplar Springs-Adolescents This regulation was NOT MET as evidenced by: Upon review of CHRIS entry A- 20220276 and A- 20220277, the provider's investigation included eyewitness statements and review of video footage which revealed performance issues demonstrated by Employee 1 and Employee 2 and neglect was found. "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.	PR) 09/21/2022 Employee #1 and Employee# 2 received corrective actions due to failure to comply with policy#2318 levels of observation. The Director of Risk Management, Associate Administrator, and Chief Executive Officer met to review the various incidents regarding sexual misconduct and/or sexual intercourse. Upon meeting it was determined that the facility was in need of additional sexual acting out prevention and a request was made for the Get SMART model to be introduced. The Get SMART module identifies active supervision, maladaptive behaviors, appropriate boundaries, how to respond to SAO incidents appropriately, and trauma that can occur afterwards. The program will promote an increase in boundary violation reporting which will allow the ability to address the patient behavior early to prevent sexual acts. On 5/19/2022 the leadership team at	10/1/2022

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			Poplar Springs Hospital received training and completed training in order to be able to train all staff at the facility. All current employees have been or will be trained on the Get SMART program, new employees will be trained on the Get SMART module during new employee orientation and all staff will have a refresher course during annual reorientation. The Director of Risk Management will review incidents and reporting of boundary violations daily. Aggregated data on compliance with reporting boundary violations will be reported monthly to patient safety council. OHR/OLR) Accepted 10/07/2022	

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<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
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.				
Tonya Carr, Legal Operations Manager		(Signature of Organization Representative)		Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				