

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

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License #: **986-14-003**

Organization Name: **Poplar Springs Hospital**

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

Program Type/Facility Name: **14-003 Poplar Springs Hospital**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-46-70. - 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	Poplar Springs Hospital This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 09/20/2022 The Patient Advocate, Director of Risk Management, and Director of Human Resources met on 9/13/2022 to discuss a timeline of when a CAR needs to be completed and submitted to the patient advocate in response to any investigation that is substantiated against a staff member. A seven day time line was agreed upon for the supervisor/manager to complete a CAR and submit to Human Resources and the Patient Advocate. Upon receipt of the CAR the patient advocate will forward to the OHR specialist to ensure timely submission. The Patient Advocate announced in morning operations meeting to leadership that a seven day time line will be given for completion of a CAR upon notification of a investigation that has been substantiated against a staff member. The Patient Advocate will provide reminders to the department head of the need to complete the corrective action and the Director of Human Resources will provide the patient advocate a copy upon receipt. The Patient Advocate will audit the compliance of submission of CAR's within seven days by noting the date of notification to the supervisor/manager and the date of receipt of the CAR. Result of the compliance of submission of CAR's to the patient advocate within seven days will be	9/13/2022

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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>
			reported monthly to PI committee. OLR) Accepted 10/10/2022	
12VAC35-115-260. A. (11) - Providers, through their directors, shall: 11. Cooperate with the human rights advocate and the LHRC to investigate and correct conditions or practices interfering with the free exercise of individuals' human rights and make sure that all employees cooperate with the human rights advocate, the LHRC, and the SHRC in carrying out their duties under this chapter;	N	Poplar Springs Hospital This regulation was NOT MET as evidenced by: Upon making numerous requests to verify corrective action within 5 working days, the provider failed to provide written evidence of the corrective actions taken to address the substantiated neglect found for CHRIS entry A-20220266 and A-20220267. The provider's evidence of corrective action was due on 7/21/22.	PR) 09/20/2022 The Patient Advocate, Director of Risk Management, and Director of Human Resources met on 9/13/2022 to discuss a timeline of when a CAR needs to be completed and submitted to the patient advocate in response to any investigation that is substantiated against a staff member. A seven day time line was agreed upon for the supervisor/manager to complete a CAR and submit to Human Resources and the Patient Advocate. Upon receipt of the CAR the patient advocate will forward to the OHR specialist to ensure timely submission. The Patient Advocate announced in morning operations meeting to leadership that a seven day time line will be given for completion of a CAR upon notification of a investigation that has been substantiated against a staff member. The Patient Advocate will provide reminders to the department head of the need to complete the corrective action and the Director of Human Resources will provide the patient advocate a copy upon receipt. The Patient Advocate will audit the compliance of submission of CAR's within seven days by noting the date of notification to the supervisor/manager and the date of receipt of the CAR.	9/13/2022

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			Result of the compliance of submission of CAR's to the patient advocate within seven days will be reported monthly to PI committee. OHR/OLR) Accepted 10/07/2022	

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