

**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: **07-27-2023**

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.		

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Organization Name: **Poplar Springs Hospital**

Date of Inspection: **07-27-2023**

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>
12VAC35-115-50. 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 Hospital This regulation was NOT MET as evidenced by: "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. Upon review of CHRIS entry A:20230037 & A:20230038, the provider's investigation revealed: • Per video review, Employee #1 failed to realize that Individual #1 and Individual #2 kept returning to their rooms to put on additional clothing after being dressed in their sleepwear. • Individual #1 and Individual #2 then tampered with a sprinkler head in their bedroom, triggering the facility doors to unlock. • Individual #1 and Individual #2 then eloped from the facility. Based on the provider's investigative finding, there is a preponderance of evidence to support the provider's substantiated finding of neglect.	PR) 09/01/2023 Employee #1 was provided re-training on what to do when the sprinklers are engaged by patient tampering and what to do when patients are attempting to AWOL during this timeframe. The AWOL prevention plan was also reviewed with Employee #1 for re-training purposes of indicators or signs that a patient may be thinking about eloping. Employee #1 reviewed video the night of the incident after her training to determine if she could identify indicators or signs from the patients' behaviors that suggest they were thinking of eloping. All employees are provided training during new employee orientation regarding prevention of sprinkler tampering and AWOL prevention. OHR/OLR) Accepted 09/05/2023	6/9/2023

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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.				
_____ Andrea Milhouse, Human Rights		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				