

**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: **04-16-2024**

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: **04-16-2024**

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-20240018, the provider's investigation included a review of video camera surveillance which revealed: Video review indicated Employee #1 was positioned behind the nursing station the majority of the time. At one point, Employee #1 goes to back of hallway. When Employee #1 returns, he goes to the room and appears to say something to the individuals and then returns to the nursing station leaving the individuals in the room with the light off. Employee #1 failed to position himself where he could provide supervision. Based on the provider's investigative finding, there is a preponderance of evidence to support the provider's finding of neglect.	PR) 05/08/2024 The provider agrees with this citation, as the providers staff failed to intervene and actively redirect residents from another resident's room. The staff involved in this citation failed to follow the providers policy and procedures. Additionally, the providers staff failed to follow the program schedule. Due Employee 1's lapse in supervision and failure to follow policy and procedures, Employee 1 has since been retrained on the supervision policy and placed on a Corrective Action Plan on 4/12/24. To prevent the future occurrence of incident like this, the Risk Director has completed a retraining of staff regarding supervision and rounding expectations. Additionally, a graduated rounding disciplinary grid has been implemented, in which both staff and their direct supervisor will be held accountable for failure to follow policy and procedures regarding rounding and patient/resident observation. OHR/OLR) Accepted 05/09/2024	4/12/2024

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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				