Corrective Action Plan (Sample)

DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SUBSTANCE ABUSE SERVICES CORRECTIVE ACTION PLAN

Investigation ID: <u>License #:</u> XXX-XX-XXX Organization Name:		Date of Inspection: Program Type/Facility Name: Residential Facility		
Standard(s) Cited Comp		Description of Noncompliance	Actions to be Taken Planne	d Comp. Date
590 & 600: Residential Environment	N	Both bathtubs are either, in need of a thorough cleaning or replacement. The appearance of the tubs does not meet the requirement of being well-maintained. The sink in the up stairs bathroom has an area of damage, the fight fixture has uncovered bulbs, and the mirrors have areas of damage.	The bathtubs have been thoroughly cleaned. A maintenance request was submitted 04/04/09 regarding the bathroom sink, the uncovered bulbs in the bathroom, and the damaged mirror. Cleanliness of bathtubs will be added to the weekly facility review/monitoring list completed by the Program Director.	11/30/2010
			ACCEPTED.	
General Comments / Recommendations: 				
, Specialist		(Signature of Organ	zation Representative)	Date
Mail to: P O Box 1797 Richmond, VA 23218		Due Date:	Due Date:	
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				
11/10				