DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1217-14-008**
Organization Name: **ELK HILL FARM, INC.**

Date of Inspection: **10-05-2021**
Program Type/Facility Name: **14-008 Elk Hill - Spring Garden**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-70. - Compliance with human rights regulations	N	Elk Hill - Spring Garden 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). Human Rights Regulations: 12VAC35-115-230 (A)(3): Provider Requirements for Reporting “Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation. The investigating authority shall provide a written report of the results of the investigation of abuse or neglect to the director and human rights advocate via the department's web-based reporting application within 10 working days from the date the investigation began unless an extension has been granted (see 12VAC35-115-175). This regulation was NOT MET as evidenced by: Upon review of CHRIS entry A-20210038 on 9/30/2021, the provider failed to provide a written report of the results of the investigation within 10 working days from the date in which the investigation began. • The incident occurred on 5/28/21. The investigation tab in CHRIS was completed on 9/30/21.	PR: Residential Coordinator addressed the late reporting during supervision with the Program Director. The Program Director will keep a notebook of all CHRIS entries and completed investigations. Program Director will ensure that all investigation is completed within 10 days by checking the notebook weekly. Residential Coordinator will oversee and ensure that the investigation is complete. OHR Accepted – 10/25/21 – A.A.	10/23/2021

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General Comments / Recommendations:
Inspection ID: 302
Location: Elk Hill - Spring Garden

Please respond with acceptable corrective action to artea.ambrose@dbhds.virginia.gov and tonya.carr@dbhds.virginia.gov by 10/27/2021.

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