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**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-70. - Compliance with human rights regulations	N	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: 12VAC35-115-50 (B)(2): Dignity “In receiving all services, each individual has the right to be protected from harm including abuse, neglect, and exploitation”. "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 This regulation was NOT MET as evidenced by: During an internal investigation for CHRIS Abuse 20210081, the provider substantiated medical neglect due to the following: • Employee #1 self-reported to the program director that Employee #1 failed to administer Individual #1’s 3:00pm medications. • Provider reviewed documentation of the individual’s activities and confirmed Employee #1 failed to administer the medications to Individual #1. *It is significant to note the accused staff self-reported the incident.	PR: Residential Director addressed the missed medication error with Employee #1 during supervision. Employee #1 will set their phone alarm as a reminder to give the medications at the designated time. Also, over the next 60 days on-call staff will contact Employee #1 as a reminder to give out the medication Residential Coordinator will ensure that on-call staff is contacting Employee #1 and that their alarm is set. OHR Accepted – 10/25/21 – AA	10/23/2021

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General Comments / Recommendations:
Inspection ID: 301
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