DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **11-23-2021**
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. - 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	Elk Hill - Spring Garden This regulation was NOT MET as evidenced by: See OHR Citation below.	PR) 12/29/2021 PR: Program Director met with Counselor #1 about providing proper supervision (the ratio for staff to clients remain 1:4 at all times) while on outings and within the group home. Program Director also addressed with Counselor #1 assuring the rights of the youth that we serve from being abused, neglected, or exploited in showing the regulation and our policies and procedures again. Program Director gave Counselor #1 a written corrective action plan due to him violating our policies and procedures, regarding the lack of supervision while on outing and overall outcome of the incident. Program Director will meet with Counselor #1 for monthly supervision to ensure the policies and procedures are being followed correctly, specifically pertaining to supervision of youth and services provided. Residential Coordinator will help Program Director with oversight during their monthly supervisions to ensure that Spring Garden staff are following the policies and procedures of remaining in ratio and assuring the rights of the youth. OLR) Accepted 01/12/2022	12/24/2021

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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	Elk Hill - Spring Garden This regulation was NOT MET as evidenced by: During an internal investigation the provider substantiated the allegation of neglect due to the following: • Staff were out of the internal required staffing ratio of 1:4 for approximately 30 minutes during the incident. • Staff did not keep Individual 1 in supervision while stopped at a gas station during the community outing.	PR) 12/23/2021 PR: Residential Director addressed with the counselor in supervision the importance of remain in 1:4 ration at all times and providing proper supervision while in the community. Residential Director will ensure that Spring Garden Group Home remain in ratio and has proper supervision by providing staff with daily agenda. Residential Coordinator will oversee this task. OHR/OLR) Accepted 01/06/2022	12/24/2021

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.

Tonya Carr, Legal Operations Manager | (Signature of Organization Representative) | Date

C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined