DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **03-28-2024**
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 citations below.		4/16/2024
12VAC35-115-110. A. - Each individual is entitled to be completely free from any unnecessary use of seclusion, restraint, or time out.	N	Elk Hill - Spring Garden This regulation was NOT MET as evidenced by: CHRIS Abuse #20240018, 20240019, #20240020 Provider substantiated for seclusion based on the following: • Camera footage revealed the following: ◦ At 9:55 am, Individual #1 and Individual #2 were seen going into the bedroom. Employee #1 followed Individual #1 and Individual #2, then closed the bedroom door while appearing to be escalated. ◦ At 9:58 am, Employee #1 was outside of Individual #1's and Individual #2's door. ◦ Provider noted in the investigation report that "the video sounds like [Individual #1 and Employee #1 had some sort of physical	PR) 04/15/2024 PR: Program Director completed initial investigation and agrees with findings. Employee #1 was demoted from supervisory position of House Manager, transferred to a different Elk Hill residential location as a Residential Counselor, will not be allowed to work one-on-one with any resident until MANDT Day 1 is completed by April 19, 2024, and trauma informed in-person training is completed by June 15, 2024. Weekly supervision will occur with Employee #1 and current supervisor since date of transfer, April 6, 2024, until all trauma training is completed June 15, 2024. All Spring Garden staff have participated in training related to the Elk Hill policy and procedure regarding seclusion and refraining from secluding residents by use of physical presence or locked doors, appropriate language when talking to residents and that this	4/15/2024

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		contact as the door rattles and [Individual #1] is making statements, "Let me the fuck out." [Individual #1] was prevented from leaving the bedroom as [Individual #1] did not enter the hallway…[Employee #1] did admit during [Employee #1's] interview that [Employee #1] used physical presence to keep [Individual #1] from leaving the bedroom. [Employee #1's rationale was that [Individual #1 and Individual #2] were to be quarantined. However, this was not an adequate reason to restrict Individual #1 and Individual #2's movements." ◦ At 10:17 am, Employee #1 locked the bedroom door with Individual #1 and Individual #2 in it. ◦ At 10:23 am, Employee #1 locked Individual #3 in Individual #'s bedroom. ◦ Individual #1 and Individual #2 were locked in the bedroom by Employee #1 for approximately 20 minutes. ◦ Individual #3 was locked in the bedroom by Employee #1 for approximately 17-18 minutes. Employee #1 unnecessarily secluded Individual #1, Individual #2, and Individual #3, which is a violation of 12VAC35-115-110(A).	cannot be profanity or any other demeaning or derogatory statements, that operating hour ratio of 4:1 is in effect from 7:00am-11:00pm and for no reason what-so-ever should a staff member place themselves or be placed by another out of ratio as of April 3, 2024. All locks have been removed from bedroom doors and replaced with caps. This means that bedroom doors cannot be locked at any time. The Residential Director will oversee this process. OHR/OLR) Accepted 04/16/2024	

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12VAC35-115-230. A. (2) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 2. The director of a service licensed or funded by the department shall report each allegation of abuse or neglect via the department's web-based reporting application within 24 hours of receipt of the allegation (see 12VAC35-115-175).	N	Elk Hill - Spring Garden This regulation was NOT MET as evidenced by: CHRIS Abuse #20240019, #20240020/Incident Date: March 13, 2024 • Provider was notified of allegations involving abuse and neglect on March 13,2024. • Provider did not report allegations involving abuse and neglect in CHRIS until March 22, 2024, which was not within the required 24 hours. Failing to report allegations of abuse or neglect via the department's web-based reporting application (CHRIS system) within 24 hours of receipt of the allegation is a violation of 12VAC35-115-230(A(2).	PR) 04/16/2024 PR: Program Director did not notify the allegation of abuse and neglect within 24 hours timeframe. The Residential Director address this issue during monthly supervision on 4/15/2024. The Program Director will be sure to document all youth involved incidents of abuse and neglect within 24 hours on an incident into CHRIS. The Residential Director will oversee this process. OHR/OLR) Accepted 04/16/2024	4/16/2024
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: CHRIS Abuse #20240018, #20240019, #20240020, #20240021, #20240022, #20240023/Incident Date March 10, 2024 "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.	PR) 04/15/2024 PR: Program Director completed initial investigation and agrees with findings. Employee #1 was demoted from supervisory position of House Manager, transferred to a different Elk Hill residential location as a Residential Counselor, suspended for three days without pay, completed three courses on Relias platform related to trauma informed care, must complete MANDT Day 1 training, focusing on healthy relationship building, trauma informed care and appropriate boundaries and treatment of residents, and in-person trauma informed training prior to being able to working one-on-one with any resident. MANDT Day 1 must be completed by April 19, 2024, and trauma informed in-person training must be completed	4/15/2024

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		Provider substantiated for neglect based on the following: • Employee #1 sent Employee #2 and Employee #3 to the store to go shopping without any individuals. • Employee #1 was the only staff at the group home with all of the individuals which did not allow for adequate supervision, and, thus, failed to provide services necessary to the health, safety, or welfare of the individuals receiving services. This is a violation of 12VAC35-115-50(B)(2). CHRIS Abuse #20240018, #20240019, #20240020, #20240021/Incident Date March 10, 2024 "Abuse" means any act or failure to act by an employee or other person responsible for the care of an individual in a facility or program operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, that was performed or was failed to be performed knowingly, recklessly, or intentionally, and that caused or might have caused physical or psychological harm, injury, or death to a person receiving care or treatment for mental illness, intellectual disability, or substance abuse. Provider has substantiated for verbal abuse and psychological abuse based on the following: • Camera and audio footage of incident on revealed the following: ◦ At 9:55 am, Employee #1 went upstairs and yelled and cursed at Individual #1 and Individual #2. Provider noted in the investigation report that the audio of Employee #1 yelling at Individual #1 and Individual #2 was "appalling." ◦ At 10:15 am, Individual #3 opened the bedroom door and Employee #1 yelled to	by June 15, 2024. Weekly supervision will occur with Employee #1 and current supervisor since date of transfer, April 6, 2024, until all trauma is completed June 15, 2024. The Residential Director will oversee this process. OHR/OLR) Accepted 04/16/2024	

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		Individual #3, "Get your ass out of here." ◦ Employee #1 raised Employee #1's voice to Individual #3 and threatened to give Individual #3 a SIR. ◦ At 10:18 am, Employee #1 took Individual #1 to Individual #1's room and began yelling at Individual #3. ◦ At 10:25 am, Individual #4 came to the office and Employee #1 yelled at Individual #4 and told Individual #4 to get out of Employee #1's presence. ◦ At 10:41 am, Individual #2 called downstairs to Employee #1 to tell Employee #1 that Individual #3 was ready to come out of Individual #3's room, and that Individual #3 is locked in the room. Employee #1 came upstairs, and Employee #1 told Individual #2 that Employee #1 knew where Individual #3 was, that Employee #1 doesn't care about Individual #3, that Individual #3's behavior is disgusting, and that Employee #1 doesn't want to talk to Individual #3. ◦ Employee #1 then entered Individual #3's bedroom and proceeded to yell at Individual #3 again. ◦ Employee #1 secluded Individual #1, Individual #2, and Individual #3 in their bedrooms by physically blocking the door and locking the door to prevent Individual #1, Individual #2, and Individual #3 from leaving their bedrooms. • Employee #1's actions toward Individual #1, Individual #2, Individual #3, and Individual #4 involved the use of language that was demeaning, threatening, intimidating, and humiliating which meets the definition of verbal abuse and is a violation of 12VAC35-115-50(B)(2).		

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		Additionally, Employee #1's actions of yelling, cursing, making humiliating statements to Individual #1, Individual #2, Individual #3 and Individual #4, and locking Individual #1, Individual #2, and Individual #3 in their bedrooms meet the definition of psychological abuse. This is a violation of 12VAC35-115-50(B)(2).		

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.

Cassie Purtlebaugh, Human Rights | (Signature of Organization Representative) | Date

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