DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **07-09-2024**
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 citation below.		
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 #20240038 and #20240039/Incident Date: June 24, 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. Provider has substantiated for neglect based on the following: • Provider discovered during an internal investigation	PR) 07/26/2024 PR: Program Director met with Employee #1 and Employee #2 during month supervision to discuss their failure to separate Individual #1 or Individual #2, Both Individuals expressed feeling sexually attracted towards one another. Employee #1 and Employee #2 failed to ask both residential to separate rooms after Individual #1 refused to leave her room. In addition, the Program Director review the incident during team meeting with all the staff to discuss other possible options. In the future Employees will contact the on-call staff for additional support in needed. Residential Director will oversee this process. OHR/OLR) Accepted 07/26/2024	7/26/2024

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		into an allegation of peer-on-peer incident that allegedly occurred on June 24, 2024, between Individual #1 and Individual #2 the following: ◦ Individual #1 and Individual #2 share a bedroom. ◦ On the day prior to the incident, Employee #1 and Employee #2 were aware that Individual #1 and Individual #2 had "denoted sexual feelings" for one another. ◦ Employee #1 and Employee #2 failed to separate Individual #1 and Individual #2 by moving one of them into separate bedrooms. Employee #1 and Employee #2's failure to separate Individual #1 and Individual #2 was a failure to provide services necessary to the health, safety, or welfare of Individual #1 and Individual #2 and 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