DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1217-14-011**
Organization Name: **ELK HILL FARM, INC.**

Date of Inspection: **04-10-2024**
Program Type/Facility Name: **14-011 Duncan Cottage**

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	Duncan Cottage This regulation was NOT MET as evidenced by: See OHR citation.		

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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	Duncan Cottage This regulation was NOT MET as evidenced by: “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. Upon the review of CHRIS report, A-20240015, the provider’s investigation included a review of eyewitness statements and staff admissions: • Employee #1 failed to ensure that Individual #1’s medications were returned or retrieved from Individual #1’s home visit. Individual #1 was not administered evening medication as prescribed. • Employee #1 failed to provide a service necessary to the health, safety, and welfare of Individual #1, which meets the regulatory definition for neglect. Based on the provider’s investigative finding, there is a preponderance of evidence to support the provider’s substantiated finding of neglect.	PR) 05/01/2024 PR: Program Director, Massie Cottage, agreed with the finding of this corrective action plan. Employee #1 received a Proformance Improvement Plan on February 22, 2024. Moving forward Employee #1 will check each youth for medication upon returning from passes in the community in which medication was sent. If a youth returns without his medication, Mr. Kirby will notify the on-call administrator and make every effort to retrieve the medication. Program Director and Residential Director will oversee this process. OHR/OLR) Accepted 05/06/2024	5/1/2024

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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.

Andrea Milhouse, Human Rights	(Signature of Organization Representative)	Date

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