***DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES***
***CORRECTIVE ACTION PLAN***



License #: **1217-14-012**
Organization Name: **ELK HILL FARM, INC.**

Date of Inspection: **04-19-2022**
Program Type/Facility Name: **14-012 Massie Cottage**

| Standard(s) Cited | Comp | Description of Noncompliance | Actions to be Taken | Planned Comp. Date |
|---|---|---|---|---|
| 12VAC35-46-1070. C. - The provider shall notify the department within 24 hours of any serious illness or injury, any death of a resident, and all other situations as required by the department. Such reports shall include: 1. The date and time the incident occurred; 2. A brief description of the incident; 3. The action taken as a result of the incident; 4. The name of the person who completed the report; 5. The name of the person who made the report to the placing agency and to either the parent or legal guardian; 6. The name of the person to whom the report was made. | N | Massie Cottage<br><br>This regulation was NOT MET as evidenced by:<br><br>CHRIS Number: 20220058<br>Date/Time of Discover: 04/11/2022 8:00PM<br>Enter Date/Time: 04/15/2022 5:28PM<br>Reporting Delay: 69:28:00<br>Location Name: Massie Cottage | PR) 05/06/2022<br><br>PR: Program Director will ensure that all CHRIS entries are entered in the CHRIS portal within 24 hours of a serious illness or injury. Program Director will complete a CHRIS training within the next 30 days by Elk Hill CHRIS administrator to ensure that each incident is documented in the correct section of the CHRIS report. The Residential Coordinator will oversee all aspect of CHRIS reporting.<br><br>OLR) Partially Accepted 05/06/2022<br><br>In addition to the above, the provider response needs to include the following:<br><br>1. Describe the specific issue that led to the late reporting.<br>2. Description of safeguards enacted agency wide to ensure all Level II and Level III are entered into CHRIS within the required timeframe.<br>3. Staff by title who has the primary responsibility to enter incidents into CHRIS.<br>4. Staff by title who serves as back up to enter incidents into CHRIS when the designated person is unable to do so including nights, weekends, and holidays.<br>5. Dates back up staff received their own Delta login ID and password.<br>6. Staff by title who serve in the Delta roles- Administrator, Security Officer and Supervisor.<br>7. Date(s) Security Officer, who has the ability to reset passwords for the organization, completed training on how to reset passwords. | 5/12/2022 |

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| | | | 8. Provider is encouraged to review Office of Licensing CHRIS Training and Guidance documents located on the DBHDS website as a basis for staff training for new CHRIS users. Attached to the email you will find a document that contains links to the training and guidance documents for your convenience.<br>9. Staff by title responsible for monitoring process implemented to ensure timely data entry of Level II and Level III incidents into CHRIS. This role should be someone other than the person who is responsible for entering the data in CHRIS where possible.<br>10. Indicate the frequency for monitoring the plan including how it will be monitored (Ex: daily checks, monthly audits, weekly chart reviews, quarterly checklist).<br>11. Planned completion date if different than the date indicated. Please make change in the Planned Completion Date field of the response window.<br><br>PR) 05/13/2022<br><br>PR: Program Director entered the CHRIS entry in the wrong area: Abuse/Neglect vs. Death/Injury. Due to entering it into Abuse/Neglect, the entry was not within 24 hour notification. The Program Director has been trained on what incidences fall under Abuse/Neglect vs. Death/Injury by the CHRIS Administrator on 5/12/22. The Program Director has also reviewed the training and documentation guidance documents provided and continue to enroll/take the necessary trainings through the website. The Program | |

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| | | | Director is responsible for entering all CHRIS entries. The Residential Coordinator is responsible for backup of entering CHRIS incidences if the Program Director is unable to do so. The Clinical Coordinator and COO serves as the Administrator Security Officer, and one of the Supervisors. We have a total of 6 supervisors that have access to entering CHRIS in the residential program. The Program Director passwords had been reset once already within this incident time frame. The Clinical Coordinator and COO has been trained since the onset of switching from DSS to DBHDS about 10 years ago. The Residential Coordinator will oversee and implement monitoring process for all CHRIS entries. The Residential Coordinator will follow-up with each Program Director weekly to discuss all CHRIS entries and discuss further in monthly supervision.<br><br>OLR) Accepted 05/13/2022 | |

**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.

| Lakesha Steele, Incident Management Unit | (Signature of Organization Representative) | Date |
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C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined