DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **05-18-2023**
Program Type/Facility Name: **14-012 Massie 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	Massie 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	Massie 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. Provider substantiated neglect based on the following: • Upon review of CHRIS entry A-20230031, the provider's investigation substantiated Neglect based on Employee #1's admission. ◦ Employee #1 put the medication on the desk and asked Individual #1 to retrieve water to take medication. In the medication cup, Employee #1 administered morning and night medications. Upon returning to the office for medication, Individual #1 took the cup off the desk and took the medication. At this time, Employee #1 realized the medication error. Based on preponderance of evidence, Employee #1 failed to ensure the health and safety of Individual #1.	PR) 05/22/2023 PR: Employee #1 failed to give out the medication properly. The Program Director met with Employee #1 on 4/6/2023 to go over how to give out the medications and to follow the proper the procedure. Employee #1 was able to understand the seriousness of medication management and the health and safety of the youth we serve. Residential Coordinator will oversee and ensure that Employee #1 follows the medication procedures. OHR/OLR) Accepted 05/22/2023	5/22/2023

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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