DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **07-31-2025**
Program Type/Facility Name: **14-012 Massie Cottage**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	Massie Cottage This regulation was NOT MET as evidenced by: See OHR citation.		8/28/2025

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12VAC35-115-230. A. (3a) - Providers shall collect, maintain, and report the following information concerning abuse, neglect, and exploitation: 3. The investigating authority shall provide a written report of the results of the investigation of abuse or neglect to the director and human rights advocate via the department's web-based reporting application within 10 working days from the date the investigation began unless an extension has been granted (see 12VAC35-115-175). This report shall include: 3a. Whether abuse, neglect, or exploitation occurred;	N	Massie Cottage This regulation was NOT MET as evidenced by: • Upon review of the CHRIS entry **A-20250035**, the provider failed to provide a written report of the results of the investigation within 10 working days from the date in which the investigation began. ◦ The investigative findings were due on **4/25/25**; however, The investigation results were not completed until 7/29/25 as evidenced by the timestamp in the Department's web-based reporting system (CHRIS).	PR) 08/28/2025 PR: The Program Director did not complete the investigation within the required 10 days following the CHRIS entry, leading to the implementation of a Performance Improvement Plan and a subsequent transition to a Case Manager position at Elk Hill. In response to this issue, the Residential Director has developed a tracking form to monitor all CHRIS entries, ensuring that future investigations are conducted in a timely manner. Additionally, the Case Manager reviewed all previous CHRIS entries to confirm that there were no further delays. The Residential Director will oversee the process. OHR/OLR) Accepted 09/05/2025	8/28/2025

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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.* Upon review of CHRIS entry, **A-20250035,** the provider's investigation included the review of the provider's policy, witness statements, and staff admissions, which revealed: • Employee #1 did not follow the provider's policy for medication administration, resulting in Individual #1 not receiving their 12 PM 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 of neglect. Based on the provider's investigative findings, there is a preponderance of evidence to support the provider's substantiated finding of neglect.	PR) 08/28/2025 PR: On April 30, 2025, the Program Director addressed a medication error involving Employee #1, who failed to administer medication to individual #1. In response to this incident, Employee #1 was placed on a Performance Improvement Plan, which includes setting a phone alarm as a reminder and retaking the MATY training. The Residential Director will supervise the implementation of this plan to ensure compliance and improvement. OHR/OLR) Accepted 09/05/2025	8/28/2025

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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