DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **1376-14-001**
Organization Name: **Jackson-Feild Homes**

Date of Inspection: **08-12-2022**
Program Type/Facility Name: **14-001 Jackson Feild Homes**

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	Jackson Feild Homes This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 09/19/2022 See response below. OLR) Accepted 09/21/2022	10/31/2022

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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	Jackson Feild Homes This regulation was NOT MET as evidenced by: "Abuse" means any act or failure to act by an employee or other person responsible for the care of an individual in a facility or program operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, that was performed or was failed to be performed knowingly, recklessly, or intentionally, and that caused or might have caused physical or psychological harm, injury, or death to a person receiving care or treatment for mental illness, intellectual disability, or substance abuse. • Upon review of CHRIS entry A-20220033, the provider's investigation determined Employee #1 failed to use approved MANDT restraint techniques and TIC de-escalation techniques with Individual #1 and abuse was found. • Upon review of CHRIS entry A-20220034, the provider's investigation determined Employee #2 and Employee #3 failed to use approved MANDT restraint techniques and abuse was found. Based on preponderance of evidence, Employees #1, #2, and #3 failed to ensure the health and safety of Individual #1.	PR) 09/19/2022 Investigation revealed that Employee #1, Employee #2 and Employee #3 did not follow the proper MANDT restraint techniques, and did not utilize proper de-escalation techniques with Individual #1. Employee #1, Employee #2 and Employee #3 were placed on paid administrative leave during the investigation. Employee #2 resigned (see attached resignation letter). CPS screened the allegation out. The following corrective action plan will be implemented: Employee #1 and Employee #3 will attend a 3-day TIC Risking Connection training on October 25th - 27th, 2022. Employee #1 and Employee #3 also completed a refresher training in MANDT restraint techniques (see attached training documentation). Employee #1 and Employee #3 received three (3) days of unpaid administrative leave (see attached supervision logs). Going forward, both employees will receive on-going supervision by their supervisor regarding their interactions with residents during crisis involving restraints to ensure they are utilizing the proper MANDT techniques. OHR/OLR) Accepted 09/20/2022	10/31/2022

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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.

Tonya Carr, Legal Operations Manager	(Signature of Organization Representative)	Date

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