DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

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

Date of Inspection: **01-16-2026**
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.		

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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: Upon review of CHRIS entries, A:20250013, A:20250014, A:20250015, A:20250016, A:20250017, and A:20250018, the provider's investigation included a review of video footage and a review of the provider's policy. The OHR Advocate determined: • Employee #1 and Individual #1 engaged in "play wrestling" along with five peers including Individual #2, Individual #3, Individual #4, Individual #5, and Individual #6. • Employee #2 watched Individual #1, Individual #2, Individual #3, Individual #4, Individual #5, Individual #6 without redirecting the behavior. • Employee #1 and Employee #2 failed to follow the provider's supervision policy. Based on the provider's investigative summary, there is a preponderance of evidence to support the OHR Advocate's substantiated finding of neglect.	PR) 03/03/2026 Incident was reported to CPS on 7/2/25 (#3046143) – they chose to screen out the report. Internal investigation revealed that Employee #1 and Employee #2 did not follow proper procedure in supervision of residents and policy violation was confirmed via video. CORRECTIVE ACTION: Employment for Employee #1 and Employee #2 was terminated. Evidence documentation is attached. OHR/OLR) Accepted 03/23/2026	7/2/2025

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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