

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

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License #: **493-14-001**

Organization Name: **Timber Ridge School**

Date of Inspection: **01-18-2022**

Program Type/Facility Name: **14-001 Timber Ridge Level C RTC**

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
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	Timber Ridge Level C RTC This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 02/07/2022 Timber Ridge School has completed this corrective action prior to receiving the citation for violation. The action consists of the following: • The electronic records system (Blue Step) contains incident reports, initially entered by staff present at the time of the incident, and documents review by supervisors and administrators. • The electronic records system has been updated to enter whether CHRIS reports are required and specifies Abuse/Neglect, Significant Incident Reports (Death/Injury/Illness). If checked yes, it has for the CHRIS number, and asks for the completion date. • Data tracking chart is able to identify all CHRIS reports that are pending and have not been completed by the administrator. • The chart is reviewed weekly by the Utilization Review Committee. • The chart also prompts the reviewer to ensure that the Root Cause Analysis is documented for all CHRIS SIR reports and Root Cause Analysis can be tracked for completion, as required. The reason that this incident was missed is that the corrective action changes were implemented after this incident occurred. The electronic tracking system will assist in avoiding missing similar incidents. Would also like to note, that the individual did receive follow up to this incident and the ISP/treatment plan was updated at the time. The individual has made significant positive progress since the incident occurred.	2/10/2022

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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	Timber Ridge Level C RTC This regulation was NOT MET as evidenced by: CHRIS Abuse #20210133/Incident date: 9/14/21 - Investigative findings were due for completion in the investigation tab in CHRIS on 10/05/21. - As of 1/7/22, the investigative findings remained incomplete in CHRIS. - Provider failed to complete investigative findings in CHRIS within 10 working days from the date the investigation began which is a violation of 12VAC35-115-23(A)(3)(a).	OLR) Accepted 02/08/2022 PR) 02/07/2022 Timber Ridge School has completed this corrective action prior to receiving the citation for violation. The action consists of the following: - The electronic records system (Blue Step) contains incident reports, initially entered by staff present at the time of the incident, and documents review by supervisors and administrators. - The electronic records system has been updated to enter whether CHRIS reports are required and specifies Abuse/Neglect, Significant Incident Reports (Death/Injury/Illness). If checked yes, it has for the CHRIS number, and asks for the completion date. - Data tracking chart is able to identify all CHRIS reports that are pending and have not been completed by the administrator. - The chart is reviewed weekly by the Utilization Review Committee. - The chart also prompts the reviewer to ensure that the Root Cause Analysis is documented for all CHRIS SIR reports and Root Cause Analysis can be tracked for completion, as required. The reason that this incident was missed is that the corrective action changes were implemented after this incident occurred. The electronic tracking system will assist in avoiding missing similar incidents. Would also like to note, that the individual did receive follow up to this incident and the ISP/treatment plan was updated at the time. The individual has made significant positive progress since the incident occurred.	2/10/2022

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			OHR/OLR) Accepted 02/07/2022	

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.

Tonya Carr, Legal Operations Manager

(Signature of Organization Representative)

Date

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