

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

Page: 1 of 3

Investigation ID: 52

License #: 493-14-060

Organization Name: Timber Ridge School

Date of Inspection: 06-01-2023

Program Type/Facility Name: 14-060 Timber Ridge SA 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>
12VAC35-46-810. A. (3) - The provider shall have and implement written procedures for promptly: 3. Providing emergency services for each resident;	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: It was found that on 5/18/2023, Resident #1 experienced a medical and mental health emergency. Based on review of the internal incident report, the provider failed to implement prompt emergency care to Resident #1 after Resident #1 experienced a suicide attempt. There was a 9-minute period between the time Resident #1 was found after the suicide attempt and the provider decision to call EMS. Per video review of the incident, Resident #1 was discovered by Staff #1 and #2 at 5:01pm after the suicide attempt. Per the incident report, after a few minutes of asking Resident #1 questions, Staff #2 and Staff #6 made the determination that EMS personnel were needed and made a 911 telephone call. The incident report explained the call to EMS was not made until, "about 5:10pm," which was after the internal nursing staff was contacted. According to the incident report, Resident #1 complained of pain in their neck, right ankle, and right shoulder. In addition, according to the incident report, staff noticed a small spot of blood on Resident #1's right ear and a small spot of blood on Resident #1's chin.	PR) 07/18/2023 During the campus meeting on 7/25/23 which covers Childhood Emergencies, suicide attempt has been added to the list of situations that are considered an emergency and require an immediate call to 911. Staff will sign an attestation form for their personnel file. If a staff member misses the campus meeting, they will need to have watched the video and signed the attestation form by August 1,2023. This information has also been updated for the New Hire Training that all new hires receive during their orientation on Childhood Emergencies. OLR) Accepted 07/18/2023	7/25/2023

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12VAC35-46-810. A. (4) - The provider shall have and implement written procedures for promptly: 4. Providing emergency services for any resident experiencing or showing signs of suicidal or homicidal thoughts, symptoms of mood or thought disorders, or other mental health problems;	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: It was found that on 5/18/2023, Resident #1 experienced a medical and mental health emergency. Based on review of the internal incident report, the provider failed to implement prompt emergency care to Resident #1 after Resident #1 experienced a suicide attempt. There was a 9-minute period between the time Resident #1 was found after the suicide attempt and the provider decision to call EMS. Per video review of the incident, Resident #1 was discovered by Staff #1 and #2 at 5:01pm after the suicide attempt. Per the incident report, after a few minutes of asking Resident #1 questions, Staff #2 and Staff #6 made the determination that EMS personnel were needed and made a 911 telephone call. The incident report explained the call to EMS was not made until, "about 5:10pm," which was after the internal nursing staff was contacted. According to the incident report, Resident #1 continued to have suicidal thoughts and behaviors.	PR) 07/18/2023 During the campus meeting on 7/25/23 which covers Childhood Emergencies, suicide attempt has been added to the list of situations that are considered an emergency and require an immediate call to 911. Staff will sign an attestation form for their personnel file. If a staff member misses the campus meeting, they will need to have watched the video and signed the attestation form by August 1,2023. This information has also been updated for the new hire training that all new hires receive during their orientation on childhood emergencies. OLR) Accepted 07/18/2023	7/25/2023

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General Comments / Recommendations: Please respond to the CAP on or before the due date. Please include any relevant documents as attachments for proof of action taken, as applicable. If you have any questions or concerns, please reach out to me directly. Thank you, Kelly Murphy SA/ SUD Licensing Specialist				
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.				
KellyA Murphy (Signature of Organization Representative) Date				
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				