

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

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License #: **493-14-060**

Organization Name: **Timber Ridge School**

Date of Inspection: **06-28-2023**

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>
12VAC35-46-70. - 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 SA RTC This regulation was NOT MET as evidenced by: See OHR citation below.		7/25/2023
12VAC35-115-260. A. (7) - Providers, through their directors, shall: 7. Require competency-based training of employees on this chapter upon employment and at least annually thereafter. Documentation of such competency shall be maintained in the employee's personnel file;	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: - During a licensing inspection on June 1, 2023, the licensing specialist identified that items were missing from Employee 1's personnel record. - Employee 2 confirmed to the advocate in an email on June 27, 2023, that Employee 1 did not receive all the initial trainings which included competency-based human rights training.	PR) 07/03/2023 An attestation form will be completed by Employee #1 for each training completed and placed in their Personnel Record by the Human Resources Coordinator. In addition, a Documentation of Orientation form will be completed and added to Employee #1's Personnel Record once all trainings are completed. Employee # 1 will view the Licensing power point which reviews Human Rights and complete an attestation form and return to the Human Resources Coordinator. OHR/OLR) Accepted 07/18/2023	7/21/2023
12VAC35-115-60. B. (3b) - The provider's duties. 3. Providers shall develop and	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by:	PR) 07/18/2023 During the campus meeting on 7/25/23 which covers Childhood Emergencies, suicide	7/25/2023

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implement policies and procedures that address emergencies. These policies and procedures shall: 3b. Identify qualified clinical staff who are accountable for assessing emergency conditions and determining the appropriate intervention;		During a licensing inspection on June 1, 2023, the licensing specialist identified the following: - It was discovered that during an incident that occurred on 5/18/23 with Individual 1 that Employee 3, Employee 4, Employee 5, Employee 6, Employee 7, and Employee 8 delayed emergency services for a resident requiring emergency care. - Employee 4 left to inform Employee 8 and Employee 9 at the request of Employee 3 upon finding Individual 1 after Individual 1's suicide attempt, including fall from height. - Additional suicidal behavior was attempted by Individual 1, requiring a physical hold. - Per video, Individual 1 was discovered by Employee 3 and Employee 4 at 5:01pm after initial suicide attempt. - Per the incident report, "After a few minutes of asking Individual 1 questions, Employee 8 and Employee 4 made the determination that EMS personnel were needed and made that phone call." - The call to EMS was not made until "about 5:10" until after Employee 8 was contacted. - EMS did not arrive for 27 minutes after discovery. - Employees 4, 5, 6, 7 and 8 were all present with Individual 1 during the period after discovery and prior to EMS being called per incident report and did not call for emergency medical care. - Individual 1 complained of pain in neck, right ankle, and right shoulder per Employee 3 in the incident report. - A "small spot of blood" on Individual 1's right ear and another small spot on Individual 1's chin was noted by Employee 6 in the incident report. - In the incident report, Employee 5 notes that Individual 1 was "laying on the floor of his bathroom with some cuts on his right side that were bleeding." - Individual 1 attempted suicide and Employee 4,	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. OHR/OLR) Accepted 07/18/2023	

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		Employee 5, Employee 6, and Employee 7 failed to assess it as an emergency requiring emergency intervention.		
12VAC35-115-60. B. (8) - The provider's duties. 8. Providers shall ensure that the entries in an individual's services record are at all times authentic, accurate, complete, timely, and pertinent.	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: - During a licensing inspection on June 1, 2023, the licensing specialist identified that pieces of paper were being utilized to inform residents and/or staff of demerits instead of a formal means of communication. - These pieces of paper were placed on the individuals' beds rather than in the treatment record or staff communication log. - The provider failed to document that these demerits were processed directly with the individuals.	PR) 07/03/2023 The Director of Residential and Case Management Services and Assistant Director of Residential Services met with staff of the Residential Department on June 20,2023. During this meeting, staff were informed about the issue of using paper notes to inform students of consequences earned during morning routine. Staff were instructed to inform students directly of their consequences and if something occurred to delay the inspection of the unit, staff should go to the school and inform the student or email the evening staff to inform the students. It was made known to staff that the preferred method was for direct communication to the student from the staff giving the consequence. This subject was also addressed via an email communication that was sent to staff on June 6, 2023. OHR/OLR) Accepted 07/18/2023	6/20/2023

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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.				
_____ Cassie Purtlebaugh, Human Rights		_____ (Signature of Organization Representative)		_____ Date
C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined				