

**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: **08-25-2025**

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.		9/23/2025
12VAC35-115-110. A. - Each individual is entitled to be completely free from any unnecessary use of seclusion, restraint, or time out.	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: • Employee 1 and Employee 2 placed Individual 1 and Individual 2 respectively into physical restraints prior to imminent risk of harm. This is a violation of this regulation.	PR) 09/15/2025 Director of Coordinated Services who is a Cornell Therapeutic Crisis Intervention (TCI) Trainer met with employee # 1 and # 2 to review the incident. Both Employee # 1 and # 2 received a letter to file. Both Employee #1 and # 2 will attend a physical TCI refresher on either 9/16/25 or 9/23/25. Both Employee #1 and # 2 will complete the TCI module -Assessing the situation Elements of Potentially Violent Situation with a TCI trainer by 9/23/25. OHR/OLR) Accepted 09/15/2025	9/23/2025

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12VAC35-115-110. C. (9a) - The provider's duties. 9. Providers shall comply with all applicable state and federal laws and regulations, certification and accreditation standards, and third party requirements as they relate to seclusion and restraint. 9a. Whenever an inconsistency exists between this chapter and federal laws or regulations, accreditation or certification standards, or the requirements of third party payers, the provider shall comply with the higher standard.	N	Timber Ridge SA RTC This regulation was NOT MET as evidenced by: • Employee 1 attempted physical escort on Individual 1. • Employee 3 reported that Timber Ridge's internal crisis management systems does not teach a physical escort technique. • Employee 1 failed to follow the provider's internal crisis management system.	PR) 09/15/2025 Director of Coordinated Services who is a Cornell Therapeutic Crisis Intervention (TCI) Trainer met with employee # 1 and # 2 to review the incident. Both Employee # 1 and # 2 received a letter to file. Both Employee #1 and # 2 will attend a physical TCI refresher on either 9/16/25 or 9/23/25. Both Employee #1 and # 2 will complete the TCI module -Assessing the situation Elements of Potentially Violent Situation with a TCI trainer by 9/23/25. OHR/OLR) Accepted 09/15/2025	9/23/2025
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	Timber Ridge SA RTC 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	PR) 09/15/2025 Director of Coordinated Services who is a Cornell Therapeutic Crisis Intervention (TCI) Trainer met with employee # 1 and # 2 to review the incident. Both Employee # 1 and # 2 received a letter to file. Both Employee #1 and # 2 will attend a physical	9/23/2025

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		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. Examples of abuse include acts such as: 6. Use of physical or mechanical restraints on a person that is not in compliance with federal and state laws, regulations, and policies; professionally accepted standards of practice; or the person's individualized services plan During an internal investigation, the provider determined the following for CHRIS Abuse 20250053: • Individual 1 was escalated while on the unit and began throwing furniture. Imminent risk was not determined as there was no other person in the area at the time. • Although there was no imminent risk, Employee 1 attempted to physically escort Individual 1 off of the unit. • Employee 1's physical redirection further escalated Individual 1's behaviors which resulted in both Individual 1 and Employee 1 falling to the ground. • It was later determined that Individual 1 had a closed fracture of the nasal bone. • Employee 1 initiated physical contact with Individual 1 when there was not imminent risk for harm. This is contrary to "professionally accepted standards of practice" and is a violation of this regulation. During an internal investigation, the provider determined the following for CHRIS Abuse 20250054: • Individual 2 was upset and approached Employee 2 in an aggressive manner and could be seen on video speaking to Employee 2 in what appeared to be an aggressive manner based off of Individual 2's body language (there is no audio). • Employee 2 initiated physical contact by attempting to physically restrain Individual 2 which escalated the situation. • Individual 2 began attempting to escape the restraint by	TCI refresher on either 9/16/25 or 9/23/25. Both Employee #1 and # 2 will complete the TCI module -Assessing the situation Elements of Potentially Violent Situation with a TCI trainer by 9/23/25. OHR/OLR) Accepted 09/15/2025	

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		hitting Employee 2 which resulted in both Individual 2 and Employee 2 falling to the ground. • Employee 2 initiated physical contact with Individual 2 when there was no imminent risk. This is contrary to "professionally accepted standards of practice" and is a violation of this regulation.		

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