

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

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License #: 549-04-005

Organization Name: Cumberland Hospital, LLC

Date of Inspection: 11-30-2023

Program Type/Facility Name: 04-005 Inpatient Unit 7

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	Inpatient Unit 7 This regulation was NOT MET as evidenced by: See OHR citation.		
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	Inpatient Unit 7 This regulation was NOT MET as evidenced by: “Neglect” means failure by a person, program, or facility operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, responsible for providing services to do so, including nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of an individual receiving care or treatment for mental illness, intellectual disability, or substance abuse. Upon review of CHRIS entry, A-20230054, the provider’s investigation was substantiated for neglect based on the following: • Per eyewitness statements, Employee #1 admitted to being distracted with the group as Individual #1 eloped: • Employee #1 failed to observe Individual #1 while in the courtyard. • Individual #1 was able to dig a hole under the fence while Employee #1 was facilitating the group. Individual #1 was able to climb under the fence and run off campus into the woods.	PR) 12/26/2023 1. Cumberland Hospital failed to provide/prevent patient neglect in the form of inconsistent supervision, while facilitating a group in the fenced in outdoor area, which allowed for patient to dig a hole, and climb under the fence, and run into wooded area of the campus. This was due to facilitating staff admittedly being distracted with the group as patient eloped. 2. Facilitating staff during incident received written warning from Human Resources. Nursing Leadership provided Levels of Observation to entire current unit employee roster. Cumberland Hospital had shut down outdoor courtyard immediately pending investigation and fence repairs by	12/26/2023 00:00:00

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		Employee #1 failed to provide services necessary to the health, safe, and welfare of Individual #1 which meets the regulatory definition for neglect. Based on the provider's investigative finding, there is a preponderance of evidence to support the provider's substantiated finding of neglect.	licensed contractor. 3. Cumberland Hospital upgraded fence footer under the entire fence line with poured cement to prevent digging. Cumberland Hospital also initiated a new fenced area policy for staff to adhere to when utilizing the fenced in outdoor area, which includes staffing levels specific activities and mandatory radio communication to ensure patient safety on 11/1/2023. 4. Cumberland Hospital Unit Milieu Manager will monitor staff adherence to fenced area policy on weekly basis. Director of Planned Operation added fenced in outdoor area to environment of care (EOC) audit checklist. Facility maintenance staff conduct EOC monitoring/maintain outdoor fence and overall area integrity, daily beginning on 11/1/2023. OHR/OLR) Accepted 12/27/2023	

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