

**Eastern Virginia Local Human Rights Committee
Meeting Minutes
November 18, 2011**

A meeting of the Eastern Virginia Local Human Rights Committee was held on Friday, November 18, 2011, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502.

Members Present:

Mr. Matthew Albright, Chair
Dr. Marcia Kennedy, Vice Chair
Mr. David Paige

Members Absent:

Ms. Denise Gordon
Mr. George Amory

Providers Present:

Jacqueline Parker-Mazyck, SC/QMRP, Holiday House of Portsmouth, Inc
Donna L Riddick, RN, DON, QMRP, Holiday House of Portsmouth, Inc
Melanie Draughn, SW/HRC Liason, Holiday House of Portsmouth, Inc
Katherine Williams, RN, MSN, Maryview Behavioral Medicine Center
Melanie Perez-Lopez, St. Mary's Home for Disabled Children
Ramon Corrales, AC Support Systems
LaTasha Holloway, Psalms Assistive Support Services, LLC
Jerome Taylor, Virginia Home Based Counseling

Providers Absent:

Douglas Newsome, Best Practices Coaching, Counseling, Consultation & Training LLC
Tonya Pulliam, The Bair Foundation
Lamar Lane, A Positive Living
Abey Malave, A Positive Living
Adrian Brown, Community Options, LLC (sent report)
Greg LeFever, Better Life Services, Inc. (called)
Counseling Interventions

Also Present Were:

Stewart Prost, Human Rights Advocate
Melanie Draughn, Holiday House of Portsmouth, Inc
Carmen Gerena, EVLHRC Liaison

I. Call to Order

Dr. Marcia Kennedy, called the regular session of the EVLHRC meeting to order at 9:05am, and Ms. Carmen Gerena, EVLHRC Liaison, recorded the minutes. A quorum of members was present, and the meeting, having been duly convened, was ready to proceed.

II. **Approval of Meeting Agenda**

Meeting agenda was reviewed and Psalm Assisted will review their Behavior management policy that was e-mailed to the members. The Agenda was approved, motion made by Mr. David Paige and seconded by Dr. Marcia Kennedy.

III. **Review of Minutes**

A motion to accept the minutes was made by Dr. Marcia Kennedy and seconded by Mr. David Paige.

IV. **Old Business**

There was no old business.

V. **New Business**

VI. **Program Updates**

a. **The Bair Foundation**

No representation

b. **Community Options**

Adrian Brown was unable to attend, but did send in a report that was read by Dr. Marcia Kennedy. He has had no admissions and changes. He received his conditional license in May 2011 and has had no admissions since that time.

c. **Counseling Interventions**

No representation

d. **Holiday House of Portsmouth, Inc**

Report was given and copies of report were submitted for August 1, 2011 – November 1, 2011. Will review in Executive Session

e. **Maryview Behavioral Medicine Center**

Report was given and copies of report were submitted for August 1, 2011 – November 1, 2011. Will review in Executive Session.

f. **Psalms Assistive Support Services**

Have no clients so far, so have nothing to report yet.

g. **AC Support System**

Ramon Corales presented and report was given. We have 4 clients. We are up for renewal next month.

h. **St. Mary's Home for Disabled Children**

Report was given and copies of report were submitted for August 1, 2011 – November 1, 2011. Census at the end of the quarter was 79. We have begun construction for a new 12 bed facility, attached to this facility, for adults. It is anticipated to be completed in a year. Stewart Prost noted that St. Mary's needs to submit for a service modification to license and also need to submit to Margaret Walsh a copy of the Human Rights Policy and procedures for that new service.

And after you receive the letter of compliance and provider verification form, submit a copy to Margaret Walsh. When you get the letter back, you send a copy of the letter, copy of your Human Rights policies, program description, and Behavior Management policies and program rules for the new unit to this committee and to me. Then you need to get an affiliation for the new service.

i. **Best Practices Coaching, Counseling, Consultation and Training, LLC**

No representation.

j. **Better Life Services**

Greg LeFever had called to state that he could not attend.

k. **A Positive Living**

No representation.

l. **VA Home Based Counseling**

Jerome Taylor reported they are currently servicing 31 intensive in-home cases.

m. **Office of Human Rights**

Mr. Stewart Prost updated on the office, in addition to Hillary Zanveld being hired in our office Narissa Rhodes was hired and she will be starting in the Williamsburg office on the 29th of November. We will have 2 people in our Williamsburg office Mr. Daye and myself, but I will hopefully be transitioning to being based solely at South Eastern Virginia Training Center. So that will stop the business about going to Williamsburg.

Wanted to review the status of this committee, this committee has all of its members in terms of position. Mr. Amory will be coming off of his second term and will not be eligible for reappointment. That term ends in June 2012. Mr. Paige is eligible for second term and so is our chairperson, Matthew Albright. To fill the position we will be looking for a consumer. A consumer is an individual who has received services for mental illness, intellectual disability, or substance abuse currently or in the last 5 years and it doesn't have to be from a licensed provider and it can be from your program. If it is someone with intellectual disability it can be someone getting vocational rehabilitation services or it can be someone getting pastoral counseling or they could simply be getting an antidepressant for a psychiatrist it is a pretty wide variety, it just a matter of somebody who is willing to come to the meetings and review the paper work and do the work that there is. Probably in February I'll be coming in with reappointment applications for the other two folks if they are willing and they are volunteers so you may want to think about that between now and February.

I also want to talk about quarterly reports and annual reports. State wide we have established timelines for quarterly reports so there is a standard quarter. So the quarters run something like this when you meet in February the reports you are going to be giving to this committee is October 1 through December 31. Then the next report will be for the period from January 1 through March 31, April 1 through June 30, and July 1 through September 30. You may want to look at as a

committee is whether or not you want to continue to schedule your meeting in the month where you have them. Providers are required to provide those reports to the committee in advance, not the day of the meeting, but in advance. There have been questions about e-mailing the reports. If the report doesn't have any client identifiable information, then that part is okay to e-mail, in fact that part is okay to e-mail. What we are telling providers to do is that the bottom part where it says to give details of any allegations of abuse or any corrective action, do it on a separate page. Because that is information that you don't want as part of the public record. So when you have a report like that you can either mail the information to the committee members and fax it to me, or you can mail the whole report. In other words, if you don't have any incidences you can go ahead and e-mail. You can also e-mail it if you don't put the information on there or do it as a separate attachment. If you finish your report, the quarter ends December 31 from October 1st to December 31, I recommend that you should have your report to the committee by the 15th of the next month, January 15, April 15, July 15, and October 15, that way the committee has it in advance.

Another question that has come up is regarding the variance; just let everyone know that St. Mary's and Holiday House have a variance regarding the review of restrictive programs and that is because they have developed their own Specially Constituted Committee. You are still required to present to the committee (LHRC) any program using restraint or timeout for review, so that is something that the committee will review and make any recommendations. But they will only be recommendations, not approvals. That means if you have a restrictive program you want to put in place, you get your SCC in place, then you can go ahead and start the program, you just bring it to this committee for review at the next meeting. At your last meeting you all voted to allow the chairperson to appoint a subcommittee of 2 to do review of restraint programs, for other providers that have to use restraints or other things like that and timeout or request for affiliation or to interview a prospective member.

Annual report is going to be kind of a compilation of your 2 report of July 1 through December 31. This is 6 months, but you have only been using this format since July and that report is due by January 15.

VII. **Open Session**

Chair recognizes the Vice Chair for inquiry. We have some questions from Psalms Assistive Behavior Management Policy that needs to be reviewed. Ms. Holloway presented for Psalms Assistive. Ms. Holloway stated that she e-mail her changes to the Committee members with the changes. Mr. Stewart Prost questioned wording of section 2. Item 2 pg 7. Ms. Kennedy moved to approve the plan with the corrections and it was seconded by Mr. Paige and it was unanimously approved.

Mr. Paige motioned to have the Committee change its meeting dates to the 4th Thursday of the following months: January, April, July, and October. Ms. Kennedy seconded the motion. Discussion ensued. The new dates will be January 26, April 26, July 26, and October 25th. This will replace the schedule that we have and will put us on a calendar

year schedule. This motion was unanimously approved.

Mr. Prost noted that one of the requirements under the cooperative agreement is to send a representative to meetings. This is particularly for Providers that are licensed, it is one of your requirements under the regulations in supporting this committee is to send a representative. From now on for those that don't, one of the options that we have is the options to request citations from licensing. If you are an owner and you can't be here you need to send a representative.

VIII. **Closed Session for Human Rights Complaints, Abuse, Discrimination, Formal/Informal Complaints:**

Ms. Marcia Kennedy moved the EVLHRC into executive session pursuant to the Virginia Code Section 2.2-3711 A (4) for the purpose of reviewing behavior programming and client specific data and/or complaints, investigations for Holiday House of Portsmouth, Inc and St. Mary's Home for Disabled Children: see attached reports. Motion was made by Mr. David Paige and seconded by Ms. Marcia Kennedy. All members present voted in favor of the motion. The motion was made to accept the information given during closed Executive Session and go into open session. All members present voted in favor of the motion.

Upon reconvening in open session, each member of EVLHRC certified that, to the best of each EVLHRC Member's knowledge, only public business matters lawfully exempted from statutory open meeting requirements, and only public business matters identified in the motion to convene the executive session were discussed in the executive session. See attached record of Executive Session.

IX. **Adjournment**

The meeting adjourned at 10:45 a.m.

X. **Next Meeting:**

The next meeting of the Eastern Virginia Local Human Rights Committee will be held on Thursday, January 26, 2012, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502. St. Mary's Home for Disabled Children will provide refreshments.

Provider Quarterly Report of Human Rights Activities

Name of Provider: Holiday House of Portsmouth, Inc
Local Human Rights Committee: Eastern Virginia Local Human Rights Committee
Name of Provider LHRC Liaison: Melanie J. Draughn, BSW, QMRP
Name of Licensing Specialist: Barry Lee, Licensing Specialist
Number of individuals served by provider in this quarter: 28
Quarter: August 1, 2011-October 31, 2011

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 1
Cases Pending: 1
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 1 Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

One Allegation of Abuse 10/24/2011 that will be discussed in Executive Session.

Status of Complaint Cases

Total of Complaint Cases: 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0

Dignity: 0

Services: 0

Participation in Decision Making; 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work: 0

Research: 0

Complaint and Fair Hearing; 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

***Allegations of Abuse:** Holiday House of Portsmouth uses the following efforts to ensure allegations of abuse and neglect are captured as reported by the regulations. Upon receipt of any allegation of abuse or neglect this facility takes steps to protect the safety and welfare of the individual, suspend the suspected employee pending outcome of the investigation, ensure that Human Rights Advocate and Regulatory Authorities have been notified within a 24 hour time frame, and completed within a 5 day time frame. This facility notifies parents and child protective services.*

***Human Rights Complaints:** A procedure is established to allow for individuals or their parents/ authorized representatives to present their dissatisfaction with any aspect of the Holiday House program, and to seek satisfactory redress and resolution. The Holiday house will make every attempt to resolve complaints at earliest possible step. The Holiday House of Portsmouth will provide assistance and support to individual with the complaint process.*

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

No changes

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

No changes

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

No actions this quarter.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

KA(Peek-a boo) Mitt

AP: (Protective Headgear)

Provider Quarterly Report of Human Rights Activities

Name of Provider: Maryview Behavioral Medicine Services
Local Human Rights Committee: Eastern Virginia LHRC
Name of Provider LHRC Liaison: Katherine Williams, Administrative Director
Name of Licensing Specialist: Reginald Daye, Dept. of Behavioral Health and Developmental Services
Number of individuals served by provider in this quarter: 926
Quarter 2nd Quarter; August 2, 1011 – October 31, 2011

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: _____ Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

- 1) Complaint 9/21/11. DV, DOB: 12/3/62. TDO and wanted controlled substances prescribed. Not indicated, discharged day of complaint.
- 2) Complaint 8/15/11. KN, DOB: 6/15/54. Phone call resolution on 8/24/11 and again on 9/22/11.
- 3) Complaint 10/26/11. AD, DOB: 1/22/61. Lack of dignity, nursing students. Resolution by meeting with staff and assured patient no nursing students would be providing care to her.
- 4) Complaint 8/15/11, WP, DOB: 11.24.58. Shower too hot, not seen by physician. Resolved by talking with patient.
- 5) Complaint 8/2/11. KH, DOB: 7/19/71. Complained of being burned in the hot shower water. Resolved by having Engineering Department adjust water temperature in the showers.
- 6) Complaint 7/27/11. LD, DOB: 2/20/64. Patient complained of being hit by another peer (roommate, NW). Investigation concluded no abuse or neglect.

Status of Complaint Cases

Total of Complaint Cases: 6
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 6

Complaint Category Totals:

Assurance of Rights: 1
Dignity: 1
Services: _____
Participation in Decision Making: _____
Confidentiality: _____
Access to and Amendment of Services record: _____
Restrictions on Freedoms of Everyday Life: _____
Use of Seclusion Restraint and Time Out: _____
Work: _____
Research: _____
Complaint and Fair Hearing: _____
Determination of Capacity to give consent: _____
Authorized Representatives: _____
Complaint Resolution: 6
Reporting Requirements: 6

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 4
Number of complaints resolved in the Formal Process: 2

Below Director: 4
Director: 2
Commissioner: _____
LHRC: _____
SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Patients are provided with a copy of rights on admission and this is repeated as a part of program each day. Nurse managers, supervisors and directors are informed of any allegations by patient and investigates.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

New policy on restraint prohibits 4 point restraint for children 12 and younger.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Better Life Services, Inc.

Local Human Rights Committee: Eastern Region

Name of Provider LHRC Liaison: Matt LeFever

Name of Licensing Specialist: Barry Lee

Number of individuals served by provider in this quarter: 28

Quarter : Aug 1– Oct 31, 2011

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: _____

Cases Closed: _____

Total Counts Alleged by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : _____

Number of cases resulting in a violation: _____

Cases Pending: _____

Cases Closed: _____

Complaint Category Totals:

Assurance of Rights: _____

Dignity: _____

Services: _____

Participation in Decision Making; _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing; _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____

Number of complaints resolved in the Formal Process: _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: St. Mary's Home for Disabled Children

Local Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Melanie Perez-Lopez (St. Mary's HDC) / Carmen Gerena

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider in this quarter: 79

Quarter 1st

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: Sexual:

Verbal: Neglect:

Neglect (Peer to Peer):

Exploitation:

Other: Restraint:

Total Counts Occurred by Type:

Physical: Sexual:

Verbal: Neglect:

Neglect (Peer to Peer) :

Exploitation:

Other: Restraint:

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0

Number of cases resulting in a violation: _____

Cases Pending: _____

Cases Closed: _____

Complaint Category Totals:

Assurance of Rights: _____

Dignity: _____

Services: _____

Participation in Decision Making; _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing; _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____

Number of complaints resolved in the Formal Process: _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

St. Mary's Quality Improvement process requires immediate reporting of any events on an Event Report. Team meets daily, Monday through Friday (if there are reports) to address. QI Representative immediately reports any events possibly related to Abuse and Neglect or Human Rights violations to Social Work Department who determines if further investigation/ action is required.

Staff Development does an Inservice to all staff annually regarding our Human Rights policy and Abuse and Neglect Policy.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

St. Mary's is beginning construction on a 12 bed Adult Facility that will be attached to the existing building. This will support 12 residents over the age of 21 and anticipated to support some of our existing residents as they age out of the children's facility. This does not change our existing license.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

St. Mary's Social Workers resolve complaints and ensure human rights advocacy; all allegations are investigated and appropriate action taken. Inservicing on Abuse and Neglect and Human Rights regulations are done on initial employment and annually. Information on Human Rights and Client Rights is given upon admission and annually. St. Mary's attends and supports within our Facility the Eastern Virginia LHRC.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

St. Mary's obtained a variance with the State LHRC and set up a Specially Constituted Committee consisting of St. Mary's Department Managers and staff as well as behavior specialists in the community to quarterly review our Behavior plans for use of restraint. This was held on November 7th (prior to our EVLHRC meeting on 11/10).

EVLHRC QUARTERLY MEETING DATES AND LOCATIONS

1 ST Quarterly Meeting	9:00 a.m., Thursday January 26, 2012	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
2 nd Quarterly Meeting	9:00 a.m., Thursday April 26, 2012	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
3 rd Quarterly Meeting	9:00 a.m., Thursday July 26, 2012	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
4 th Quarterly Meeting	9:00 a.m., Thursday October 25, 2012	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502