

## SUFFOLK REGIONAL LOCAL HUMAN RIGHTS COMMITTEE MEETING

Minutes from  
Tuesday March 4<sup>th</sup>, 08

### Committee Members Present:

Sylvia Capehart-Paige, Chairperson  
Doris Peterkin, Vice Chair  
Joan E. Edwards  
Denise N. Tynes

### Others Present

Reginald Daye-Regional Advocate-DMHMRSAS

### Affiliate-

#### Programs Present:

Baker's Home, Inc.-*Claudette Jones, & Debora Lawyer*  
Better Care Family Homes, Inc & Carlisle Estates- *Lottie Watson*  
Barley & Thompson, Inc.-*Kelly Bobbitt*  
Community Supported Training Organization, Inc.- *Pierre Dugue, Angel F. Glass*  
Obici Hospital- *Dana Miller*  
Quality Community Support, Inc- *Heather Ingraham, Sabrina Green-Hicks Porter*  
Quality Care Community Services, Inc –*Joe Ann Lawrence*  
Rehoboth Residence- *Cheral W. Dixon*  
Visions Community Services, Inc. – *Eulamae R. Myers,*  
WTCSB- *Cheryl T. Collier*  
Zuni Presbyterian Homes- Jackie Lankford

The Local Human Rights Committee meeting was called to order at 8:30 am by chairperson, Ms.Capehart-Paige.

The minutes of the December 4th, 07 meeting were reviewed and approved with the noted modifications.

### Old Business:

There was no old business.

### New Business:

The board has been advised that they must find a replacement for Ms. Peterkin, who has served on the committee for six years and can longer serve on this LHRC. Mr. Dugue requested and was granted another 90 –day affiliation for Kempsville house. At the last meeting Baker Home had requested and was granted a temporary 90-day affiliation for their partial hospitalization program. However because their policies and procedures had not been received by Mr. Daye's office, the new program's affiliation has expired. Baker Home was dropped to a temporary affiliation status until their policies and procedures are

received. The partial hospitalization program will be reinstated to temporary status once the new policies and procedures are received. Barley & Thompson, Inc was moved down to a 90-day temporary affiliation because they were not in compliance with the financial requirement of the local LHRC (failure to pay dues). QCS, Inc requested temporary affiliation for their intensive in-home program and permanent affiliation for their mental health support program the motions were moved and granted by the committee. Vision requested and was granted permanent affiliation for its two new residences. Rehoboth gave some information to the committee in regards to an ongoing situation within her facility. She explained that she would go deeper into the matter once they went into close hearings. Zuni Presbyterian Homes has been dropped to 90-day temporary affiliation until their new policies and procedures are received in the office of human rights. At the last meeting Bains house and Bishop were granted a temporary 90-day affiliation with our LHRC, however that affiliation has now expired. Rehobeth has been dropped to temporary 90-status Obici Hospital has been dropped to temporary status until their policies and procedures are received in the office of human rights.

**Update from the Regional Advocate, Mr. Daye:**

Mr. Daye announced that there is a vacancy on the LHRC and advised the facilities not to wait until the last minute to fill the position. Your new policy and procedures were due March 1<sup>st</sup>, 08. Mr. Daye stated that he had not received new policies and procedures from the following facilities Bakers Homes, Obici Hospital, Zuni Presbyterian Homes, and Rehoboth Residence. It was suggested that these facilities be moved down to temporary affiliation as of today March 4<sup>th</sup>, 08. As of Dec 1<sup>st</sup>, 07 all facilities were being held to the new regulation. Now all complaints are reportable to the office of human rights within 24 hours. That includes formal and informal complaints and how the complaint was resolved. DMAS is now requiring information on all complaints. On July 1<sup>st</sup>, 08<sup>th</sup> the dept may have a computerize program where you will have a code which will allow you to enter the complaints into the system.

**Financial Report:**

Ms.Heather Ingraham gave the financial report; both Vision and Baker's Home paid their dues at the meeting. The total as of March 08 is \$3,268.05 cents. The dues were due in Feb 08. Mr.Daye suggested that Braley&Thompson were dropped down to a 90-day temporary affiliation. Ms.Perterkin brought it to the attention of the facilities that the mileage has gone up to 50.5 cents per mile; the committees requested and were granted a mileage update by the facilities.

**Facility Reports:**

**Baker's Home, Inc:** During this reporting period, there were no complaints formal or informal of human rights violations or complaints of abuse, neglect or exploitation. Also, there was no use of behavior management. We have thirty-two (32) consumers in our Mental Health Support program. Three consumers were discharged because they moved. One consumer died of natural causes. One consumer was discharged due to a serious medical condition. We have twenty-six (26) consumers in our Psychosocial Rehabilitation program; the programs are in good standing with Licensing and the

Committee. The Annual Seclusion and Restraint report was submitted. A copy of the revised program Human Rights Policies and Procedures was submitted.

**Better Care Family Homes, Inc./Carlisle Estates:** The consumers at Better Care Family Homes and Carlisle Estates are all doing very well. There was 1 reported incident and 1 reported death. A report was sent to Mr. Daye's office and a copy was sent to the license specialist after investigating the claims the consumer and the consumer's families were notified of their rights to appeal. During this quarter there was 1 incident and no behavior management implementation or time out our annual report on seclusion and restraints was mailed to Marion Greensfield. Dues were paid in Feb 08. For the last 90 days no formal or informal complaints from our consumer's

**Braley & Thompson, Inc:** We have no consumer in our outpatient mental health program. There were no incidents or consumer rights violations during this reporting period.

**Community Supported Training Organization, Inc.** CSTO Inc. is a supportive in-home program that is currently providing services to 31 consumers CSTO, Inc began providing service on July 7<sup>th</sup>, 2003. To date, CSTO Inc. has had no incidents involving seclusions, or restraints, nor allegations of abuse. CSTO Inc's annual seclusion and restraint report was sent to Marian Greenfield on January 3, 2008. CSTO Inc. submitted a revised Human Rights Plan to the office of Human Rights and a letter of certification to Margaret Walsh. CSTO Inc. submitted a revised Human Rights Plan to the office of Human Rights and a letter of certification to Mr. Reginald Daye.

**Obici Hospital:** Sentara Obici Hospital is currently in good standing with the Suffolk Regional LHRC. There were no complaints made regarding human rights violation during the 4th, Quarter of 2007

On Oct 26, 2007 Dennis Riddick of the DMHMRAS made an unannounced visit. All issues cited were easily corrected and CAP was submitted promptly and accepted..

Seclusion and Restraints:

October 07-3 seclusions, 1 restraint

November 07- 4 seclusions, 0 restraint

December 07-7 seclusions, 0 restraints

Quarterly total: 14 seclusions, 1 restraint

No injuries resulted from the use of seclusion/restraints.

There are no other issues to be addressed at this time.

**Quality Care Community Services, Inc:** During this reporting period, there were no complaints of human rights violations or complaints of abuse or neglect. Quality Care does not use seclusion or mechanical restraints with our individuals. We are currently in good standing with LHRC. Four new individuals were accepted into the Quality Care

Community Service Inc organization. We submitted our seclusion and restraints report to Mrs. Greenfield in January. There were no formal or informal complaints for this quarter. Quality Care Community Service, Inc also submitted its corrected Policy and Procedures to the office of Human Rights and a letter of confirmation to Mrs. Margaret Walsh in Richmond.

**Quality Community Supports, Inc:** For this reporting period, QCS, Inc. has had no complaints formal or informal complaints of abuse neglect or exploitation. Presently we are awaiting a visit from our licensing specialist to review our service modification application. We have added our Suffolk Location as a secondary administrative office, following approval from DMHSAS. Representing QCS, Inc. at the LHRC quarterly meetings shall Sabrina Porter, Program Director. Secondary reps are Heather Ingraham, Service Coordinator, or Jay Glover, Operations Manager. QCS is in good financial standing with the committee.

**Rehoboth:** During this quarter there were no incidents of abuse, neglect, human rights violations, we are in good standing with this committee.

**Visions Community Services, Inc.** Vision had no complaint of human rights violation,  
Number of abuse/neglect allegation this month: 0  
Number of founded abuse/neglect allegation this month: 0  
Number of unfounded abuse/neglect allegation: 0

VCS continues to provide Day Support Services, consumers have adjusted and transitioned well at their new location.

VCS sponsored homes are doing well, no complaints, consumers continue to receive monthly triage Vision Community Services LLC has recently become a Limited Liability Company effective 12-31-07, and we now have a website [www.Visioncommunityservice.org](http://www.Visioncommunityservice.org). VCS.LLC has completed the update of the Human Rights Policy and Procedures, Mrs. Margaret Walsh office has been notified of the updates of our Human Rights Policy and a copy of this report has been submitted to Mr. Reginald Daye's office. No complaints formal or informal. A CAP report was also sent to Mr. Prost with updated policy & Procedures. Vision in good standing with LHRC dues.

**W TCSB:** Report was submitted for the reporting period of 12/1/07-2-29/08.  
Physical Abuse Staff to Consumer-1 incident  
Finding –Staff abuse/neglect none founded  
Action-When management review incident with staff person, they chose to resign from their position (day program) resignation was accepted.

Allegation –Dignity/Respect  
Number of Incidents-1

Finding-Unfounded

Action- Agency responded to consumer's request & assigned another case manager

Allegation- Right to Treatment

Number of Incidents-1

Finding-Other

Action-No action taken. Consumer withdrew complaint.

**Allegations –Serious Injury**

**Number of Incidents-1**

**Finding-Other**

**Action-No investigation conducted or warranted by our staff. Injuries occurred in WT Regional Jail. WTCSB outpatient staff completed an IR. Reported that individual has a brain tumor; officer reported she had fallen.**

**Allegations- Death**

**Number of Incidents-1**

**Finding-Suicide**

**Action-No investigation conducted or warranted by our staff. WT Regional Jail reported to WTCSB outpatient Staff that deputies found body in jail cell. This individual was originally from Gloucester area.**

**Allegation-Access**

**Number of Incidents-1**

**Finding-Unfounded**

**Action-Complaint withdrawn no longer an issue**

**Allegation-Agency owed money**

**Number of Incidents-1**

**Finding-Other**

**Actions-Money agency mailed refund check to consumer's home**

**Total-Behavior Incidents-0**

**Total-Deaths-1**

**Zuni Presbyterian Homes:**

1. There is one opening on the Zuni Campus in Roughton House. A resident from one of other group home will fill this by April.
2. Dues were paid in Feb 08 for the entire year.
3. Community Seclusion and Restraint Report submitted in Jan08.
4. All 5 programs on the Zuni Campus are now licensed by the Department of Mental Health, Mental Retardation, and Substance Abuse Services.
5. There were no Human Rights complaints during the last quarter.
6. All Presbyterian Homes and Family Services Policies and Procedures have been changed in accordance with the revised Human Rights regulations. Ms. Margaret Walsh has been notified via e-mail. Policies and procedures are being presented to Mr. Daye at this meeting.

The LHRC voted to go into closed session per VA. code 2.2-3711A.15, to review human rights violations, client complaints, abuse, serious incidents, death in the following programs: WTCSB, Zuni Presbyterian Home's , Rehobeth Residence,Better Care Family Homes Inc.

The Committee voted to come out of closed session. Upon reconvening in open session, each member certified that the only thing discussed while in closed session was the above referenced items for, WTCSB, Zuni Presbyterian Home's, VCS and CSTO, Inc. There were no recommendations for WTCSB, Visions, Zuni Presbyterian Home's,and CSTO, Inc from the Committee.

It was determined that the next committee meeting will be held at 8:30am, on June 3<sup>rd</sup> 08 at Western Tidewater Community Services Board

**Adjournment:** There being no further business, the meeting was adjourned.