

VALLEY COMMUNITY SERVICES BOARD LOCAL HUMAN RIGHTS COMMITTEE
MEETING MINUTES
March 6, 2009

Chuck Collins, Regional Advocate

Members Present

Tammy Johnston
Donna Logan, Secretary
Bradley Houff
Josephine Carpenter

Closed Session

Family Sharing
Valley CSB
Wall Residences

Members Absent

Elizabeth Bouldin-Clopton
Jeffrey Jones

TOPIC	DISCUSSION
Call to Order	<i>Tammy Johnston called the March LHRC meeting to order.</i>
Approval of Minutes	Upon Motion by Josephine Carpenter and supported by Bradley Houff, January minutes were approved.
Public Comment	<p>Ms. Johnston opened the meeting for public comment and invited individuals to come forward and address the committee.</p> <ul style="list-style-type: none"> • Kiana Anastopoulos stated that they are in the process of organizing a Provider's Fair. You may contact her at kanas@wallresidences.com or Meneika Keith at familysharingmk@gmail.com if you are interested in setting up a display.
Affiliate Presentation (handouts filed with minutes)	<p>Ms. Johnston invited presenters to come forward and sit at the table near the microphone.</p> <ul style="list-style-type: none"> • Wall Residences: Annie Tanverdi-Regional Program Manager <ul style="list-style-type: none"> ✚ Human Rights Training <ul style="list-style-type: none"> ○ Jack Wall, Director of the agency, stays abreast of changes in the system by attending state training events. Mr. Wall provides training to the Quality Assurance Director, Regional Program Managers, agency trainers and family providers. All additional staff are trained by the Regional Program Managers, Agency Directors, and TOVA Instructors at least annually. All staff are tested on their knowledge of the human rights system each year using the questions developed by the state.

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✚ Notification of Rights

- Upon admission and at least annually, the individual and/or their Authorized Representative have their rights explained to them by the Program Manager and/or the Directors. In addition, each individual and/or their AR are provided a copy of the client rights for their records. Each program site has the client rights clearly posted.

✚ Human Rights Complaints

- Six complaints reported.
 - Allegation received by Rhonda Angel reporting back-up staff engaging in illegal drug use while on duty, as well as stealing client medications. **Unfounded.**
 - Individual fell and reported the following morning that he fell on the step last night, and that he needed a hand getting out of bed; serious injury report was completed due to fractured pelvis. While at the hospital, individual reported that someone had come into his home and shot him up with morphine. **Unfounded.**
 - CPS was informed that individual was locked in the bathroom. APS was informed because that individual is an adult. APS reported that individual did not need to be removed from the home. **Unfounded,** there were no locks on door.
 - Individual reported that her female provider sexually assaulted her in the early morning hours of 7/19/08 while they shared a bed in a rented beach house. The Individual's family requested that provider accompany individual on the family vacation for support, and also that the provider and individual share a bed the night of the 18th due to limited bed space in the home. Individual reported that she was asleep during the assault and "saw it [occur] in her head." Provider denied the allegation. An informal investigation was initiated. Sexual abuse allegation was **Unfounded.**
 - Back-up Staff reported that provider was using drugs and that individual's depends were not changed regularly. Although this was **Unfounded,** this service was closed due to provider stating that she suspected suspicious activities of her back-up staff, but continued to let them provide services.
 - During his stay at Augusta Medical Center, individual made complaints to APS about provider's son, medication administration, and selling of his collectible cars. A charge of **Neglect was founded** against provider since provider allowed a non-staff member to put his hands on individual. Individual and his team met to create a behavioral/action plan and to address the complaints. Individual chose to remain living with provider. Individual later left services due to Wall Residences feeling as if it was not safe for the individual and/or others living in the home to maintain the residential situation.

✚ How does your program resolve complaints using the Human Rights Complaint Process?

- If an individual or their AR has a complaint about their service they will usually make a complaint directly to the service provider. The service provider will work toward resolution and log the complaint in a complaint log. Complaint logs are compiled monthly by the Program Manager and submitted to Chuck Collins, Human Rights Advocate. If there is substantial risk that serious or

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irreparable harm will result if the complaint is not resolved immediately, the Program Manager will begin an internal investigation within 24 hours of receipt of the complaint. The Human Rights Advocate will be contacted, as well as the AR and/or family of the individual.

- ✚ Has your program received any citations from DMHMRSAS Licensure Department?
 - Received one citation from Licensure in this LHRC area in 2008.

- ✚ Staff Qualifications

- All supervisory personnel are highly experienced and educated Qualified Mental Retardation Professionals and/or Qualified Mental Health Professionals. Family Providers have at least six months of direct experience, preferably paid work, with the mental health/intellectual disabilities population, and are trained in medication management, TOVA, Human Rights, CPR/First Aid, and Bloodborne Pathogens.

- ✚ How do you establish a Culture of Human Rights?

- The philosophy of Wall Residences is that the individual receiving services is our customer. The individual is to be treated with the care and respect that we would want to be provided if we were to need care ourselves. This is repeated in writing throughout all of our materials and is demonstrated through the actions and decisions of all personnel. All staff are trained in the rights of the individual who receives care. Each worker is given a copy of the "Code of Ethics" for Direct Support Professionals when they begin to work with our agency. Our service planning process is based on using a "person-centered" approach. The service delivered to each person is designed around the needs of that person. Long years of experience and a commitment to the continued improvement of each service to expand the individual's opportunity for self expression, dignity and respect are what create the culture of human rights within the Wall Residences LLC agency. Because we are a private organization specializing in the delivery of quality residential care, we can focus our attention on this one goal: meeting the needs and wishes of the individual and, where applicable, their family or guardian.

- **Presbyterian Homes:** Steve Ramey- Director of Adult Services for PH&FS

- ✚ Staff Human Rights Training

- Staff are trained annually either by the Program/Case Manager, another qualified PH&FS staff member, or by the Regional Human Rights Advocate. In training, a DVD of the updated changes to the human rights regulations as issued by the DMHMRSAS is used. Printed materials prepared by PH&FS are also utilized.

- ✚ Notification of Rights

- Notified of rights upon admissions and annually thereafter. Each client and/or representative must sign an "Informed Consent" form that outlines the benefits and risk of living at PH&FS.

- ✚ Human Rights Complaints

- One complaint.
 - Individual did not want to change bedrooms because he had been in the same room for many years and felt that he should be allowed to remain there. Complaint was **Unfounded**. However,

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it was decided that individual would not change rooms at this time.

- ✚ How does your program resolve complaints using the Human Rights Complaint Process?
 - The Program Manager will try to resolve complaint within 24 hours and will conduct an investigation, if necessary.
 - Program Manager will give a written preliminary decision, and where appropriate, an action plan to resolve the complaint within 10 working days of receiving the complaint.
 - If disagreement with preliminary decision and/or action plan, individual must respond in writing to Program Manager within five working days.
 - The Program Manager shall investigate further as appropriate and shall make a final decision regarding the complaint.
 - The Program Manager shall forward a written copy of decision and action plan to individual, chosen representative, the Human Rights Advocate, and PH&FS Director of Adult Services within 5 working days.
 - If disagreement with Program Manager's final decision or action plan, individual may file a petition for a hearing with the LHRC using the process. If relief offered of the Program Manager is accepted, the matter is not subject to further review.
- ✚ Has your program received any citations from DMHMRSAS Licensure Department?
 - Program did not encounter a citation from the Licensing Department for the period of February 22, 2008 thru February 21, 2009.
- ✚ Staff Qualifications
 - **For All Staff:**
 - *Valid Driver's licenses and acceptable driving record.*
 - *Provision of "TB free" documentation.*
 - *Completion of all required background checks.*
 - For Program/Case Manager:
 - Bachelor's Degree in Social Work, Psychology or a related field or study.
 - Two years exp. working with those who have intellectual disabilities (ID).
 - Assistant Program Manager:
 - High School Diploma or equivalent plus three years exp. in working with those who have ID **or** an Associates degree in Human Services or a related study plus one year of exp. in working with those with ID.
 - Direct Support Professional (DSP/DSP- Relief)
 - High School Diploma or equivalent plus one year of experience working with those who have ID or any combination of experience and training.
- ✚ How do you establish a Culture of Human Rights?
 - Staff are trained annual and updated as needed of any changes in regulations.
 - Staff are required to take written test.
 - Copy of PH&FS Adult Home Standards to Live By is given to each client prior to or during admission and reviewed annually. Also posted in the group home.

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- The Resident Rights Summary is given to each client and posted.
- Resident Complaint Procedures and Grievance Procedure Forms are accessible to clients and staff and posted in group home.
- Two Human Rights posters are posted in group home, (upstairs and downstairs), each contain name and phone number of Advocate, Chuck Collins.
- **Heart Havens:** Andrea McLeod- Bonnie House
 - ✚ Staff Human Rights Training
 - Once employees are hired into a position at Stuarts Draft, they receive a training manual, watch a video, and review the Human Rights policies with the supervisor of the program. After the orientation and training, the employees are given a test. Employees must receive a 75% or greater on the test. All staff also receive an annual human rights review refresher session and retesting.
 - ✚ Notification of Rights
 - A human rights poster is posted in a visible area of the home. Heart Havens has a , “It is Your Right” poster, which lists all the rights. The rights are reviewed annually with each individual supported and their authorized representative in a language they understand. Each poster has the advocate information that includes names, phone numbers, and addresses. Every individual reviews and signs a sheet indicating that their rights have been reviewed with them and they understand their rights.
 - ✚ Human Rights Complaints
 - Five (5). Each was an allegation of neglect. The determination was that there was **no neglect** but that there was inappropriate behavior on the part of the staff because there was a delay in reporting the incident. No information available because these were not in Valley LHRC catchment area.
 - ✚ How does your program resolve complaints using the Human Rights Complaint Process?
 - When a complaint is brought to the company’s attention, the complaint is immediately investigated. All complaints are treated as formal complaints and the Executive Director proceeds with the notification process within the prescribed 24 hours. The Regional Manager coordinates the investigation process and any follow-up/resolution within 5 working days of the complaint being made. If the individual or authorized representative is not satisfied with the resolution, then they may contact the human rights advocate. A written report of the results of the investigation is given to the director and human rights advocate within 10 working days from the date of the investigation began unless an exemption has been granted by the Office of Human Rights. Clear documentation of the entire process is included in the individual’s file.
 - ❖ *Mr. Collins commented that in 2007 the regulations required that All Human Rights complaints be reported. The process described above is pre 2007.*
 - ✚ Has your program received any citations from DMHMRSAS Licensure Department?
 - There were no citations in the Stuarts Draft program this year.
 - ✚ Staff Qualifications

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	<ul style="list-style-type: none"> ○ The Residential Supervisor and Assistant Supervisor are responsible for managing the home and providing direction to the staff. Qualifications for these positions are: <ul style="list-style-type: none"> ➤ <i>Education/Experience:</i> High School diploma required with four years residential experience. Bachelor's Degree preferred with one-year previous experience working with adults with disabilities. Must have valid driver's license. MVR must meet insurance carrier standards ➤ <i>Knowledge, Skills & Abilities</i> should be as follows : <ul style="list-style-type: none"> ➤ Person centered approach/providing and modeling direct support ➤ Good judgment ➤ Ability to provide crisis intervention and appropriate follow up ➤ Adapts to ever changing situations and needs of the individuals. ➤ Supervises the work of others by training, onsite observation, and timely feedback. ➤ Good interpersonal, oral and written communication skills, including ability to communicate needs/desires and follow the appropriate chain of command. ➤ Works cooperatively with other agencies and professionals. ➤ Works independently with minimal supervision, but is open to feedback and ongoing performance improvement given by supervisor. ➤ Computer skills. ○ Qualifications for the program staff are: <ul style="list-style-type: none"> ➤ Some knowledge and experience working in the human service field preferred. ➤ Must have valid driver's license. MVR must meet insurance carrier standards. ➤ Must be able to work independently with minimal supervision. ○ At a minimum, all staff are required to receive training in CPR/First Aid, State Medication Training, Medicaid Waiver Competency Certification, OSHA, Therapeutic Options (behavior management), Human Rights, Resident specific orientation, program specific orientation, emergency preparedness, and fire safety. ✚ How do you establish a Culture of Human Rights? <ul style="list-style-type: none"> ○ All employees with Heart Havens are required to review all human rights regulations. This process is implemented through trainings and meetings. This is reviewed through staff observation, review of documentation, quality assurance visits, and reports from residents.
Valley CSB	<ul style="list-style-type: none"> ● Pre-Appointment Medication Review: Lonnie O'Baugh <ul style="list-style-type: none"> ○ Ms. O'Baugh presented a six month update as requested by the committee. The request is for permission to continue using pre-appointment medications for residents of Grandview and Greenstone. These medications are given as needed to calm patients before a procedure that may be painful or requires the individual to remain very still.
LHR Update	<ul style="list-style-type: none"> ● Chuck Collins, Regional Advocate: <ul style="list-style-type: none"> ○ CCCA will remain open for now.

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	<ul style="list-style-type: none"> ○ The Office of Licensure is short staffed. The person that handled new provider applications recently passed away; therefore new licenses will be delayed. Rhonda Angel is very busy at this time. ○ Mr. Collins will be offering a "Train the Trainer" class. VCSB offered to host the training. Mr. Collins will check with Danielle Ross for availability of the conference room . ○ The State LHRC will meet on Friday, April 17, 2009 at 9:30 am at WSH in the Jeffreys Building.
Closed Session	<p>I, Tammy Johnston, moved that the LHRC go into executive session pursuant to VA Code § 2.2-3711, paragraph A.4. for the protection of the privacy of individuals and their records in personal matters not related to public business, namely to conduct a hearing pursuant to the Regulations."</p> <p>Request by VCSB and DePaul Services.</p> <ul style="list-style-type: none"> ➤ Request for BF to be Authorized Representative for KC. Board Approved. <p>Request by VCSB</p> <ul style="list-style-type: none"> ➤ Request to continue pre-medication at Greenstone and Grandview. Board approved. ➤ Review of behavior support plan at Grandview. Considered closed by Board due to appropriate resolution. <p>Request by Family Sharing</p> <ul style="list-style-type: none"> ➤ Follow-up information on AM regarding smoking restrictions. Board Approved. <p>Request by Wall Residences</p> <ul style="list-style-type: none"> ➤ Request to continue restrictions for: RB, TK, JP, BD, ET, KT, BW. Board Approved. <p>UNDER THE VIRGINIA FREEDOM OF INFORMATION ACT §2.2-3700 ET. SQ. CODE OF VIRGINIA The LHRC Committee reconvened in Open Session.</p> <p>Upon reconvening in open session, each member of the LHRC certified that only appropriate client related business was discussed. All committee members and advocate attested, stating, I so certify.</p> <p>Community Living Services will be asked to present in closed session on May 1, 2009 in response to the letter from the Chairman of the Board, dated January 26, 2009.</p>
Adjournment	<p>The March LHRC Meeting was Adjourned.</p>

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NEXT MEETING OF THE LHRC is May 1st at 9:00 a.m.

May Presenting Affiliates:

AMC- Crossroads
DePaul Family Services