

Virginia Department of Behavioral Health & Developmental Services

STATE HUMAN RIGHTS COMMITTEE 2019 EXECUTIVE SUMMARY

Presented to the DBHDS State Board October 14, 2020

## Introduction

This annual report presents the 2019 activities and achievements of the State Human Rights Committee (SHRC) and the Office of Human Rights (OHR) in accordance with our duties and responsibilities under the *Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operated by the Department of Behavioral Health and Developmental Services* (Regulations). This report is intended to inform you about the protection of the human rights of individuals receiving services and the contributions of Virginia's citizens who serve as volunteers to assure those rights.

In 2019, the SHRC initiated a more focused review of seclusion and restraint usage in DBHDS facilities with the intent to present findings and recommendations to department leadership once completed. This practice allows for facility staff to attend meetings to provide presentations; reports and to answer questions about their programs and policies.

The SHRC continued to also hold meetings at DBHDS facilities and community providers to learn more about the programs and services being provided across the Commonwealth. This assists the SHRC to better define how they can improve the effectiveness and efficiency of services delivered in both facility and community settings.

These meetings presented opportunities for the SHRC to receive feedback from individuals receiving services about quality of care; meet our service providers; visit community-based programs and share points of view about human rights issues. Meeting at various facilities and programs throughout the state affords the committee firsthand knowledge and familiarity with the kinds of services available to consumers and the settings within which services are provided.

In 2019, the following meetings were held:

- January 31<sup>st</sup> REACH Services, Chester
- March 7<sup>th</sup> Commonwealth Center for Children and Adolescents
- April 18<sup>th</sup> Southern Virginia Mental Health Institute
- May 30<sup>th</sup> Snowden at Fredericksburg
- July 11<sup>th</sup> Central Virginia Training Center
- September 12<sup>th</sup> Southeastern Virginia Training Center
- October 17<sup>th</sup> –Southwestern Virginia Mental Health Institute
- November 21<sup>st</sup> Eastern State Hospital

Recognizing the treatment environment at state-operated facilities as among the most restrictive, Advocates provided an overview report of their assigned facility at each of the scheduled SHRC meetings. These reports coupled with a tour and/or presentation by leadership at the facility, focused on quarterly data and trending information related to seclusion/restraint, abuse, neglect and human rights complaints. Moreover, the Policy and Bylaws Subcommittees reviewed facility polices both upon the request by facilities and upon delegation by the full SHRC.

During the past year the SHRC continued its efforts to increase monitoring of the human rights system through the development of goals and objectives that address specific areas of concern. The committee engaged the Office of Human Rights staff in discussions regarding the quality of treatment and limitations of our system. This dialogue was further informed by the outstanding reports each region prepared and presented to the committee.

A critical function of the SHRC is to serve as the final step in the complaint resolution process. The SHRC heard seven complaints on appeal. If responsiveness to consumer complaints is an indicator of system success, then the fact that over 99% of complaints are resolved at the lowest level indicates a highly effective system of dispute resolution. The SHRC commends all who worked together to resolve these issues.

In response to public comment from concerned citizens and former LHRC members about the role of LHRCs since the implementation of changes resulting from revisions to the Human Rights Regulations in 2017, the SHRC determined to have the Chair and another SHRC member "tour" all 23 LHRCs to personally express appreciation, solicit feedback and observe processes in an effort to more intentionally fulfill their mandate to provide oversight and guidance to LHRCs.

OHR serves a diverse population of individuals, some of whom have a decrease in understanding of the role of an Advocate and the scope of their Human Rights while receiving services. The current format of Human Rights resources may pose barriers to individuals' utilization of the assistance provided by OHR. This project is intended to reach individuals who are most vulnerable in the area of receptive and expressive language by revising current resources (furnished to providers) to empower individuals in the service delivery system to report potential violations against their Human Rights and increase awareness and understanding of who the advocate is and what the individuals Human Rights are.

Finally, thank you to the citizens serving as volunteers on each LHRC and the SHRC for their tremendous effort in support of the human rights program and the individuals receiving services. OHR can look forward to the future with confidence that through the commitment of staff and dedicated volunteers, Virginia's service recipients are ensured their human rights are protected.



## **DBHDS HUMAN RIGHTS PROGRAM**

# The Human Rights Program

The mission of the DBHDS Office of Human Rights is to assure the health and safety of individuals receiving services by promoting the basic precepts of human dignity, advocating for the rights of persons with disabilities in our service delivery systems and managing the human rights complaint resolution process.

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The Department's Office of Human Rights, established in 1978, has as its basis the *Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operated by the Department of Behavioral Health and Developmental Services.* The Regulations outline the responsibility for assuring the protection of the rights of individuals in facilities and programs operated, funded and licensed by DBHDS.

**Advocates** represent individuals whose rights are alleged to have been violated and perform other duties for the purpose of preventing rights violations. Each state facility has at least one advocate assigned.

Advocates who serve state facilities and regional advocates are assigned to community public and private programs. Advocates also provide post-move monitoring and oversight to individuals discharged from the training centers in response to the United States Department of Justice Settlement Agreement with Virginia. The State Human Rights Director appoints advocates. Their duties include investigating complaints, examining conditions that impact individual's rights and monitoring compliance with the human rights regulations.

Title 37.2-400, Code of Virginia (1950), as amended, and the Office of Human Rights assure that each individual receiving services has the right to:

- Retain his legal rights as provided by state and federal law;
- Receive prompt evaluation and treatment or training about which he is informed insofar as he is capable of understanding;
- Be treated with dignity as a human being and be free from abuse and neglect;
- Not be the subject of experimental or investigational research without his prior written and informed consent or that of his legally authorized representative;
- Be afforded the opportunity to have access to consultation with a private physician at his own expense;
- Be treated under the least restrictive conditions consistent with his condition and not be subjected to unnecessary physical restraint or isolation;
- Be allowed to send and receive sealed letter mail;
- Have access to his medical and clinical treatment, training or habilitation records and be assured of their confidentiality;
- Have the right to an impartial review of violations of the rights assured under section 37.2-400 and the right to access legal counsel;
- Be afforded the appropriate opportunities to participate in the development and implementation of his individualized service plan; and
- Be afforded the opportunity to have an individual of his choice notified of his general condition, location, and transfer to another facility.

## State Human Rights Committee Members

#### Chair

#### John Barrett

Mr. Barrett worked for DBHDS for 28 years starting at Northern Virginia Training Center in Fairfax in 1973 in the Administration Division as Assistant Director of Admissions before transferring to the Central Office in Richmond. He worked in the central office until his retirement from state service in 1995. While there, he worked for the office of Administrative Services, the Office of Licensing as Assistant Director, and the Division of Quality Assurance where he assisted State Hospitals in preparing for Joint Commission Surveys. After retiring from DBHDS, he joined Fidura & Associates as Director of Operations. His duties included overseeing the Licensing and Human Rights activities of the company. He retired again after 14 years. Mr. Barrett was a member of the Williamsburg Local Human Rights Committee for five years, the last two serving as Chair. He was initially appointed to the SHRC in July of 2013 to fill a vacant term between July 1, 2012 to June 30, 2015. He was then appointed for a full term of July 1, 2015 to June 30, 2018. He is currently serving his second full term, which will expire on June 30, 2021. Mr. Barrett resides in Richmond and the Eastern Shore.

### Vice-Chair

#### Ann Folk Bevan

Ms. Ann Bevan represents the Richmond area and is the DOJ Settlement Senior Advisor for the Virginia Department of Medical Assistance Services. She received her BS in Psychology from VCU in 1988 and her MS in Rehabilitation Counseling from MCV in 1998. She has over 30 years of experience working with individuals with disabilities. Her work experience includes case management with Valley CSB; residential programs at Richmond Residential, Valley CSB and NHS Human Services; Community Resource Consultant with DBHDS; and overall operational management at NHS Human Services to include IDD, behavioral health and substance use services. She was initially appointed to the SHRC in July of 2013 for a term of July 1, 2013 to June 30, 2016, and reappointed for a second term that will expire on June 30, 2019. Ms. Bevan resides in Mechanicsville.

#### Julie Dwyer-Allen

Ms. Dwyer-Allen is a licensed and board certified behavior analyst with more than 15 years of experience working with children and adults with disabilities, particularly in developing and monitoring behavior support plans. She is the Director of Behavioral Services at Community Residences, a large non-profit provider, and the Program Director of Newbrook Place, a high intensity day support program. Under her leadership, the program expanded to provide behavior consultation services to several community services boards, utilizing both Medicaid Waiver therapeutic consultation services and county funding. Before joining the SHRC Ms. Dwyer-Allen worked collaboratively with local human rights committees for over 15 years. She is a professional and a family member of an individual receiving services. She was appointed to the committee in July of 2018 to fill a vacant term of July 1, 2016 to June 30, 2019. Ms. Dwyer-Allen resides in Chantilly.

#### David R. Boehm

Mr. Boehm is retired from the Department of Corrections, having served in various positions for over 40 years. He is a professional mental health provider, a licensed clinical social worker and a certified sex

offender treatment provider. He has served on the Virginia Board of social work and has been very active with social work ethics, conducting numerous workshops. Mr. Boehm served on the Virginia Board of Social Work and is well known professionally in the field of sex offender treatment and crisis intervention. His knowledge regarding treatment for sex offenders within the department of corrections makes him a valuable resource to the SHRC regarding its relationship with the residents of VCBR. He was appointed to the SHRC in July of 2018 for a term of July 1, 2018 to June 30, 2021. Mr. Boehm resides in Marion.

#### Will Childers

Mr. Childers has worked with adults with developmental disabilities, mental health and physical challenges for 35 years. He was Program Coordinator for Blue Ridge Behavioral Healthcare in Roanoke and Associate Director for Developmental Disabilities at HopeTree Family Services in Salem. Mr. Childers has coordinated residential, in-home and independent living services for adults with intellectual and developmental disabilities. He was an investigator for allegations of human rights violations for 30 years, working collaboratively with human rights advocates as well as other DBHDS staff. Mr. Childers volunteers regularly to provide care to hospice patients. He is a former member of the Roanoke-Catawba Local Human Rights Committee, on which he served as Secretary, Vice-Chair and Acting Chair. He was appointed to the SHRC in July of 2018 to fill a vacant term of July 1, 2017 to June 30, 2020. Mr. Childers resides in Hardy.

#### Pete Daniel

Mr. Daniel is a former consumer member of the Piedmont LHRC. He is a Human Services Board Certified Practitioner and worked with Olmeja Advocacy Services providing mental health skill building services as well as case management to clients as a qualified mental health professional. He worked at Virginia Center for Behavioral Rehabilitation as a Treatment Associate/Counselor facilitating psycho-educational groups, providing case management services, and helping to develop individualized treatment plans. Prior to that, Mr. Daniel worked at Bridge Way Residential Group Home where he provided services as a Residential Counselor and managed a day support program for individuals who presented with severe developmental, mental, and behavioral problems. He was initially appointed to the State Human Rights Committee for a term of July 1, 2014 to June 30, 2017, and reappointed for a second term that will expire on June 30, 2020. Mr. Daniel resides in Charlotte Court House.

#### Latesha Graham

Ms. Graham is an employee of Sentara Healthcare in Chesapeake as a scheduler and insurance verifier. She is pursuing the opening of a group home for foster children. As well as being an enthusiastic member of the State Human Rights Committee, Ms. Graham has worked as a volunteer and enjoys serving others. As a consumer receiving services she is a valuable asset to the SHRC and she helps fulfill the committee's mandate for consumer membership on the committee. She was appointed in July of 2018 for a term of July 1, 2018 to June 30, 2021. Ms. Graham resides in Portsmouth.

#### Monica Lucas

Ms. Lucas is a Mental Health Consultant and Behavioral Health Technician at Lucas Concepts & Consulting / Serenity Counseling Services of Virginia. She served as a Co-Owner of Rion's Hope, LLC, and Seventeen Twenty Five, Inc., adolescent group homes providing residential and mental health

services. She has served as a member and Chair on various local human rights committees including Tuckahoe, Central Area, New Creation, Goochland-Powhatan, Metropolitan, Henrico and Chesterfield LHRCs. Ms. Lucas was appointed in July of 2018 for a term of July 1, 2018 to June 30, 2021. Ms. Lucas resides in Richmond.

#### Sandy Robbins

Ms. Robbins is a Psychology Associate who recently retired from the Department of Corrections. She has a Bachelor of Science degree in Psychology/Sociology and a Master of Science in Psychology. Ms. Robbins has over 20 years of experience with DMHMRSAS/DBHDS as a Psychologist at Southern Virginia Mental Health Institute and Southside Virginia Training Center, and a Licensing Specialist for the DBHDS central office. During her experience she has worked closely with human rights advocates and the human rights program. Ms. Robbins became a member of the State Human Rights Committee in July of 2016 when she was appointed to a term of July 1, 2016 to June 30, 2019. Ms. Robbins resides in Valentines.

## 2019 SHRC Work plan

Summary of progress towards goals

## 1. Implementation of Regulations

Monitor the implementation of the revised regulations

- Appointed LHRC members
- Developed guidance documents (as needed)
- Held appeals
- Granted variances
- Submitted an annual report to the State Board
- Reviewed Regional Advocate Reports

## 2. Participate in appeals function for VCBR

Monitor VCBR Human rights policies to include, RAC meetings and medical policies, transport policies, etc.

 Reviewed the monthly report from VCBR Director to include medical policies, double bunking policies, seclusion, restraint and risk policy related to transport restraint

Monitor human rights regulation implementation to ensure individuals under forensic status rights are protected and not treated as DOC inmates

- Received updated documentation from OHR director concerning results of appeals, variances and exemptions
- Met with RAC concerning human rights protections
- Monitored census management and NGRI flow
- Advocated for training for VCBR staff to treat individuals as residents and not inmates

## 3. Promote treatment in most integrated settings and individual and family choice

Monitor DBHDS response to and implementation of DOJ agreement.

- Received updates on training center transition progress
- Received reports from regional post move monitors concerning quality of life and health and safety concerns related to the community integration process

Individuals are treated in the most integrated settings

Presentation heard from DBHDS staff in charge of monitoring DOJ transition

Individuals are satisfied with services and life after discharge

Reviewed Data Warehouse reports concerning trends in HR complaints

- Monitored extraordinary barrier discharge list
- Received education regarding current peer support initiatives
- 4. Individuals with capacity make their own decisions. Individuals without capacity have a duly appointed substitute decision maker
  - Promote alternative decision-making avenues such as POA, Advanced Directive and Guardianship
- 5. Monitoring increased issues with opioid addiction and continued interest in substance use disorders

Increase understanding about substance use disorders relating to clients accessibility to services and statewide trends

- Received reports from directors in substance use disorder programs regarding trends in substance abuse
- Heard from State liaisons identifying new addiction recovery programs

### 6. Promote treatment without coercion

Monitored use of seclusion and restraint

• Received ongoing information on seclusion and restraint occurrences.

## Office of Human Rights Staff

Deb Lochart, State Human Rights Director Taneika Goldman, Deputy State Human Rights Director Kli Kinzie, Executive Secretary Michelle Lochart, Data Coordination Advocate

### Region 1

Cassie Purtlebaugh, Manager Angela Harrison, Administrative Support Maynard Ritchie, CCCA/WSH Lequetta Hayes, DD Advocate/CVTC Artea Ambrose, Community Advocate

## Region 2

Ann Pascoe, Manager Jennifer Anglin, NVMHI/Community Lana Hurt, DD Advocate

### Region 3

Jennifer Kovack, Manager Brandon Roddenberry, SWVMHI/Community Advocate Crystal Oakes, SWVTC/DD Advocate Mandy Crowder, SVMHI/Community Advocate Hollie Stephens, Catawba/Community Advocate

## Region 4

Sharae Henderson, Manager Samantha Fogt, DD Advocate Carrie Flowers, CSH/Hiram Davis Tammy Long, PGH/Community Advocate Cheryl Young, VCBR

## Region 5

Reginald Daye, Manager Courtney, Miles, Administrative Support Bernadette Lege, ESH/Community Advocate Latoya Wilbourn, SEVTC/Community Advocate Carlton Henderson, ESH/Community Advocate



# Office of Human Rights Program Highlights-2019

- A.I.M.: In order to assure a safe environment for individuals receiving services and to ensure follow-up on ALL substantiated abuse allegations, the OHR operationalized the A.I.M. Protocol in March 2019. A.I.M. represents the advocate response of Assessing and assuring safety for the identified individual, as well as other individuals receiving services; Initiating the complaint resolution process and Monitoring provider follow up through verification that the provider has completed an investigation and implemented appropriate corrective action(s). High priority cases, defined as any allegation of sexual assault; restraint with serious injuries, and physical abuse with serious injuries require an immediate response to include a site visit within 24 hours of notification.
- <u>APS/CPS Crosswalk</u>: In theory, all allegations of abuse reported to APS or CPS involving DBHDS-licensed/operated providers should also be reported in CHRIS. In practice, providers do not always report incidents in a timely fashion. After three years of inter-departmental collaboration, a joint protocol between DSS and DARS now facilitates a process for localities to deliver APS and CPS reports via secure email, fax, or mail that are triaged, tracked and trended by OHR. Providers are contacted regarding their failure to report abuse and advised about initiating the complaint resolution process. Citation is also recommend through the Office of Licensing.
- Statewide Training Plan: In January 2019 OHR committed to providing regional training opportunities to promote provider literacy regarding individuals' assured rights and corresponding provider duties. Training sessions are open to all licensed providers and include information about reporting abuse/neglect in CHRIS, an overview of the Regulations, review of the use of restraint and restrictions, and "new" provider orientation.

Finally, in tandem with the SHRC's biennium-emphasis on ensuring rights protections in state-operated facilities, recognizing their treatment environments as among the most restrictive, Facility Advocates provided an overview report at each of their scheduled meetings. These reports coupled with a tour and presentation by leadership at the facility, focused on quarterly data and trending information related to seclusion/restraint, abuse, neglect and human rights complaints. Moreover, the Office of Human Rights provided staff support the newly appointed Policy and Bylaws Subcommittees.

## Advocate Activities

During the year, the human rights staff was involved in numerous activities to ensure and protect the rights of consumers. These activities included:

Representing and assisting individuals in the presentation and resolution of complaints 11,624 total allegations of abuse/neglect 2019

- 8768 in licensed services (1265 cases were founded)
- 2,856 in state operated services (126 cases were founded)
- 2,823 total human rights complaints in 2019
  - 1028 were in licensed services
  - 1795 were in state operated services
  - 15 were appealed to LHRC
  - 6 were appealed to SHRC

Completed site visits to monitor implementation and compliance with the regulations.

Provided training activities to educate providers, individuals, families, staff and Local Human Rights Committees on human rights.

Provided consultation on the human rights program to consumers, program staff, LHRCs, and advocacy and community groups.

Provided supervision to assigned staff by regional managers. Using a triage model, staff were mobilized to providers were high profile incidents occurred or trends were identified.

Reported and analyzed trends and prepared comprehensive regional reports for 2019. These reports provide detailed statistics and information about human rights activities in each of the 5 regions. Each regional team presented their report to the SHRC.

## Breakdown of Human Rights Abuse Allegations and Complaints for 2019

### **COMMUNITY PROVIDERS/CSBs**

Total Number of Human Rights Complaints						
Total Number of Complaints That Resulted in a Violation of Human Rights						
Total Number of Allegations of Abuse, Neglect, or Exploitation						
Total Number of Substantiated Allegations of Abuse, Neglect, or Exploitation						
Substantiated Allegations by Ty	ре	Exploitation	30			
Physical Abuse	150	Neglect	817			
Verbal Abuse	92	Neglect (Peer-to-Peer)	140			
Sexual Abuse	12	Other	24			
Resolution Levels for the 1,028 Human Rights Complaints						
and 8768 Allegations of Abuse, Neglect, or Exploitation						
Director and Below	9781	State Human Rights Committee 3		3		
Local Human Rights Committee	12	DBHDS Commissioner		0		

## FACILITIES

Total Number of Human Rights Complaints							
Total Number of Complaints That Resulted in a Violation of Human Rights							
Total Number of Allegations of Abuse, Neglect, or Exploitation							
Total Number of Substantiated Allegations of Abuse, Neglect, or Exploitation							
Substantiated Allegations by Typ	)e	Exploitation	27				
Physical Abuse	26	Neglect	45				
Verbal Abuse	22	Neglect (Peer-to-Peer)	3				
Sexual Abuse	2	Other	1				
Resolution Levels for the 1,795 Human Rights Complaints and 2,856 Allegations of Abuse, Neglect, or Exploitation							
Director and Below	4,645	State Human Rights Committee 3		3			
Local Human Rights Committee	3	DBHDS Commissioner		0			

## State Human Rights Committee

Chairperson John Barrett Richmond and Deltaville Region 4 and Region 5 Appointed July 2013 7/1/2012 - 6/30/2015 Vacancy Term 7/1/2015 - 6/30/2018 7/1/2018 - 6/30/2021 $\rightarrow$ Professional	Vice-Chairperson Ann Folk Bevan Mechanicsville Region 4 Term 7/1/2013 – 6/30/16 7/1/2016 – 6/30/19 → Family Member	Julie Dwyer-Allen Leesburg Region 2 <i>Appointed July 2018</i> 7/1/2016 – 6/30/2019 Vacancy → Family Member
David Boehm Marion Region 3, far southwest Term 7/1/2018 - 6/30/21 →Certified sex offender treatment Provider	Will Childers Hardy Region 1/3 border <i>Appointed July 2018</i> 7/1/2017 – 6/30/2020 Vacancy →Professional	Pete Daniel Charlotte Court House Region 4 Term 7/1/2014 - 6/30/2017 7/1/2017 - 6/30/2020 $\rightarrow$ Consumer
<b>Tesha Graham</b> Portsmouth Region 5 Term 7/1/2018 – 6/30/2021 →Consumer	Monica Lucas Richmond Region 4 Term 7/1/2018 – 6/30/2021 →Professional	Sandy Robbins Valentines Region 3/4 border Term 7/1/2016 – 6/30/2019 →Health Care Provider: Psychology Associate I

State Human Rights Committee C/o Deb Lochart, State Human Rights Director P.O. Box 1797 Richmond, VA 23218

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