

RESIDENT GRIEVANCE SYSTEM

ANNUAL REPORT FISCAL YEAR 2012

DEVELOPMENTAL DISABILITIES ADMINISTRATION FACILITIES

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**RESIDENT GRIEVANCE SYSTEM
FISCAL YEAR 2012
ANNUAL REPORT**

BACKGROUND AND STRUCTURE OF THE PATIENT RIGHTS PROGRAM FOR DEVELOPMENTAL DISABILITIES ADMINISTRATION

STATE RESIDENTIAL CENTERS and SECURED EVALUATION, THERAPEUTIC AND TREATMENT UNITS

In 1985, the Department of Health and Mental Hygiene (DHMH) implemented the Resident Grievance System (RGS), the internal mechanism for advocating and ensuring the protection of rights of institutionalized persons, guaranteed by federal and state laws, that reside in the Mental Hygiene Administration's psychiatric facilities. The program is governed by the Code of Maryland Regulations (COMAR) 10.21.14 and is under the auspices of the Deputy Secretary for Behavioral Health and Disabilities.

The RGS is a four stage administrative process that ensures that the rights of residents are protected through a fair, efficient, and complete mechanism for receiving, investigating, and resolving resident complaints in a timely manner. The RGS is responsible for providing legal representation for residents in specific areas, which is accomplished through state procurement contracts with independent legal providers, known as Legal Assistance Providers (LAP).

In July 1, 2000, the DHMH Secretary, Dr. Georges Benjamin, decreed that the Resident Grievance System be expanded to provide rights advocacy for residents of the four State Residential Centers, operated by the Developmental Disabilities Administration (DDA). The policy governing the operation of the RGS in DDA facilities was finalized and distributed to DDA facilities by the DDA Director, Diane K. Coughlin, on December 19, 2002. The policy provides the procedure governing the administrative process for receiving and investigating any reports of injuries, death, allegations of physical, sexual, or verbal abuse, and individual complaints, including rights issues, in a timely manner in accordance with Health General §7-1003 (g), Annotated Code of Maryland. A copy of the policy is available upon request from the office of the Director of the RGS.

The policy defines "Rights Issues" as any alleged violation of an individual's rights guaranteed by federal and state constitutions, statutes, regulations, common law, or policies of DHMH, DDA, and the facility, not covered by DDA's Policy on Reportable Incidents and Investigations.

A "Grievance" is defined as a written or oral statement initiated by the individual, an employee of the facility, a family member of the individual, or an interested party, which alleges that an individual's rights have been unfairly limited, violated, or are likely to be violated in the immediate future, or the facility has acted in an illegal or improper manner with respect to an individual or a group of individuals.

In January, 2009, the RGS began to provide services to the two Secured Evaluation and Therapeutic Treatment (SETT'S) Units operated by DDA. The units are located on the grounds of Springfield and Clifton T. Perkins Hospital Centers respectively. The mission of the SETT units is to provide evaluation and assessment services, as well as active treatment to intellectually disabled individuals with court involvement within a secure and safe environment. The RGS utilizes the same administrative process as with the State Residential Centers (SRC) to assist the individuals residing in the SETT's.

The RGS collaboratively works with the Office of Health Care Quality, the Maryland Disability Law Center and other stakeholders to ensure patient safety and their legal rights. Rights Advisors are co-located at the facilities and participate on various committees and attend meetings addressing patient concerns.

The Rights Advisors with primary responsibility for the three State Residential Centers and two SETT units are:

Holly	Roshanda Roberts
Potomac Center	Lisa Olinger
Clifton T. Perkins SETT	Linda Simms Michael Jackson
Springfield SETT	DeShawn Edwards Jacqueline Short

The above referenced Rights Advisors have primary responsibility for the facilities listed. All RGS Rights Advisors are trained to provide service in the absence of an assigned Rights Advisor. A complete listing of the Resident Grievance System staff is included in this report.

Referrals to the Resident Grievance System can be made directly to the assigned Rights Advisor or the Central Office by using the toll free number, 1-800-747-7454.

RESIDENT GRIEVANCE SYSTEM

Darrell Nearon, PhD., JD
Director
410-767-6888

John Hancock
Administrative Officer III
410 767-1051

RIGHTS ADVISOR ASSIGNMENTS

Jennie Bishop	Spring Grove Hospital
Everly Smith	Spring Grove Hospital
Harry Evans III	RICA-Baltimore
Harry Evans III	RICA-Rockville
DeShawn Edwards	Springfield Hospital and
Jacqueline Short	SETT Unit - Sykesville
Linda Simms	Clifton T. Perkins Hospital and
Michael Jackson	SETT Unit - Jessup
Roshanda Roberts	Eastern Shore Hospital and
	Holly Center
Lisa Olinger	Potomac Center
	Thomas B. Finan Center

RGS DATA COLLECTION AND CLASSIFICATION

Resident Grievance System Regulations (RGS), COMAR 10.21.14, defines “Rights Issues” broadly: “an alleged violation of a resident’s rights guaranteed by federal and State constitutions, statutes, regulations, common law, or policies of the Department, Mental Hygiene Administration, and the facility”. When the RGS was created, the rationale for this broad definition was precisely because not all rights issues are stipulated in the law but this does not make them any less a rights issue. The RGS Director has the responsibility for developing the classification system and providing guidelines for its use.

The form, RGS-24 “Category of Rights Issues”, copy of which is attached, assigns all cases to one of 16 major categories.

The data in the Annual Report for Fiscal Year 2012 for Developmental Disabilities Administration facilities are reported in two major classifications: Information/Assistance and Grievances.

Information/Assistance

Cases classified as Information/Assistance do not allege a rights violation but are contacts in which the individual is seeking information, clarification, or assistance with a concern. Typically, it involves a single meeting with the individual and generally, does not require extensive contact with others. These cases are closed at Stage 1 following the contact.

The second group of Information/Assistance cases are those in which the Rights Advisor receives notification from the facility regarding all incidents meeting the criteria of a “Serious Reportable Incident” (SRI). The RGS is provided with the Appendix 4 within 24 hours or the next working day. This is followed by receipt of the “Agency Investigative Report” (AIR) within 21 days. The Rights Advisor may, on their own, or at the request of the individual, staff, family member, or other interested parties, conduct their own investigation of the incident.

If the Rights Advisor concludes, following the investigation of a Serious Reportable Incident, that all of the necessary action has been taken by the facility and no further action is warranted, the case is closed at Stage 1 as Information/Assistance. However, if the Rights Advisor, resident, employee, family member, Legal Assistance Provider, or other interested parties have concerns regarding the action taken by the facility on Serious Reportable Incidents, the Rights Advisor opens the case as a grievance.

In fiscal year 2012, Rights Advisors processed 579 Information/Assistance cases.

Grievances

Cases classified as Grievances are those issues that allege a violation of patients' rights and whose goal is to obtain a specific outcome. The Rights Advisors' role in a grievance is to be a neutral fact finder, conduct a thorough investigation, and render a decision based on the evidence.

Grievances are determined to be Valid, Invalid, or Inconclusive. When sufficient evidence does not exist to prove or disprove the allegation, the grievance is determined to be inconclusive. The Rights Advisors' role is to work toward the achievement of a mutually satisfactory resolution at the lowest possible stage.

Grievance investigation and resolution generally requires the Rights Advisor to have multiple contacts with the grievant and others, up to 65 working days, the total time permitted for resolution of the grievance by the RGS Regulations, COMAR 10.21.14.

Grievances consume the largest amount of Rights Advisors' time. The Rights Advisors' role is to be non-adversarial and to function as a mediator, facilitator or negotiator.

If unresolved at Stage 1, grievances proceed to Stage 2, which is the appropriate administrative director; Stage 3, the Chief Executive Officer, with an optional review by the Quality Assurance Standing Committee. Grievances unresolved at the conclusion of Stage 3 are reviewed at Stage 4 by the Central Review Committee, which is comprised of the DDA Director, the DDA Regional Director, and the RGS Director.

In fiscal year 2012, Rights Advisors processed a total of 51 grievances. 5 grievances were heard at Stage 4 by the Central Review Committee.

**GRIEVANCE OUTCOMES FOR STAGES 1, 2, 3 AND REFERRALS TO THE
CENTRAL REVIEW COMMITTEE AT STAGE 4
FISCAL YEAR 2012**

- **STAGE 1** Fifty-one Grievances were processed by the Rights Advisors
- **STAGE 2** Five Grievances were processed by the Rights Advisors
- **STAGE 3** Three Grievances were processed by the Rights Advisors
- **STAGE 4** Five Grievances were processed by the Rights Advisors

RESIDENT GRIEVANCE SYSTEM STAGE 4 REVIEWS BY CENTRAL REVIEW COMMITTEE

A Stage 4 Central Review Committee appeal is the last and final appeal level of the Resident Grievance System. A Rights Advisor is required to make every effort to negotiate, mediate, and resolve the grievance; however, the ultimate decision to resolve or appeal the grievance belongs to the patient. If the patient elects to appeal, even though the Rights Advisor may not believe that the request has merit, the Rights Advisor is required to assist the patient in filing the appeal.

The Central Review Committee is comprised of three members; Director of the Resident Grievance System, Director of the Mental Hygiene Administration, and Clinical Director of the Mental Hygiene Administration, or their designees.

The Committee reviews all prior information concerning the grievance and may conduct further investigation, if deemed by the Committee to be warranted. At the conclusion of the review, the Committee issues a written decision based on their findings and makes recommendations for corrective action, if warranted.

Within 20 working days, after receiving the recommendations from the Central Review Committee, the facility's Chief Executive Officer is required to forward to the Committee a written report of the status of the implementation of the Committee's recommendations. The Chief Executive Officer is required to make periodic reports to the Committee every 30 days until the recommendations are fully implemented.

There were a total of 5 grievances appealed to Stage 4 in Fiscal Year 2012 which represents 10% of the 51 grievances filed.

80% (4) of the Stage 4 appeals were filed by residents of the SETT Unit and 20% (1) of the Stage 4 appeals were filed by a guardian of a resident of the Holly Center.

The Stage 4 grievances reviewed by the Central Review Committee for Fiscal Year 2012 are detailed on the following pages.

CATEGORY 1A
ABUSE - Physical
3 Grievances

Grievance # 1

A grievance was filed by the Legal Assistant Provider assigned to the facility of the individual the grievance alleged that two facility staff members allegedly "attacked the individual, put him in a headlock and restrained him while a nurse administered oral medication to calm him (individual) down.

The grievance was determined to be invalid at Stages 1, 2 and 3B. The hospital police determined the grievance to be invalid.

The Central Review Committee reviewed the submitted documentation, and determined that the grievance was inconclusive. The committee requested an explanation as to why the area in question was not videotaped. The facility CEO provided a response to the Committee's query.

Grievance # 2

A guardian of the individual alleged that a male staff member physically assaulted the individual by improperly providing medical care.

The grievance was determined to be invalid by the Rights Advisor, the facility Director of Nursing and CEO respectively.

The Central Review Committee reviewed the submitted documentation and determined the grievance to be invalid.

Grievance # 3

The individual alleged that " an employee and officer physically assaulted him".

The grievance was determined to be valid by the Rights Advisor and unsubstantiated by the CEO.

The Central Review Committee reviewed the submitted documentation and determined the grievance to be inconclusive. The Committee recommended that the CEO further investigate the allegation.

CATEGORY 10F
PERSONAL PROPERTY - Storage

An individual alleged that staff "took her rings and said she can only have one ring". Further patient alleged that "I see staff wearing 3 or 4 rings at one time. If staff can do it, why can't I do it?"

The grievance was determined to be invalid by the Rights Advisor, the facility Unit Director and CEO.

The Central Review Committee reviewed the submitted documentation and determined the grievance to be invalid.

CATEGORY 12I
TREATMENT RIGHTS- Alternative Treatment Services

The Legal Assistant Provider (LAP) filed the grievance on behalf of the individual. The LAP alleged that the individual had been receiving therapeutic services that were summarily discontinued without explanation.

The grievance was determined to be invalid by the Rights Advisor, inconclusive by the facility Director of Court Involved Services and valid by the Acting CEO.

The Central Review Committee reviewed the submitted documentation and found the grievance to be valid. The Committee recommended that the appropriate administrations with advice and consent of the clinical management team resume the discontinued services for the individual.

**TOTAL NUMBER AND PERCENTAGE OF GRIEVANCES
FOR ALL**

FACILITIES BY RIGHTS CLASSIFICATION AND PERCENTAGE

<u>RIGHTS CLASSIFICATION</u>	<u>NUMBER</u>	<u>PERCENTAGE</u>
Abuse	14	27%
Admissions/Discharge/Transfer	1	2%
Civil Rights	2	4%
Communication and Visits	5	10%
Confidentiality	0	0%
Environment	3	6%
Freedom of Movement	0	0%
Money	0	0%
Neglect	1	2%
Personal Property	2	4%
Rights Protection System	1	2%
Treatment Rights	20	39%
Other	0	0%
No Right Involved	2	4%
Resident/Resident Assault	0	0%
Death	0	0%
Total Number of Cases	51	100%

**RESIDENT GRIEVANCE SYSTEM
ACTIVITY PER FACILITY
Fiscal Year 2012**

Facility	Grievances	Information Assistance Requests	Total Cases
HOLLY	8	78	86
POTOMAC	7	397	404
SETT PERKINS	4	2	6
SETT SPRINGFIELD	32	102	134
TOTAL	51	579	630

DDA Trending Data
2003 – 2012

Year	<u>2003*</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
Grievances	52	56	52	45	46	19	10	8	18	51
Abuse	29	48	24	28	18	9	2	2	5	14
Neglect	0	0	1	1	1	1	0	0	0	1
Treatment	5	0	12	4	10	5	4	1	3	20
I & A	628	729	726	572	603	558	358	268	397	579
Abuse	1	1	0	1	3	2	2	3	10	6
Neglect	1	1	0	0	4	0	2	10	7	5
Treatment	385	435	538	424	426	449	280	268	195	339
Deaths	7*(1)	8	13	14	11	13	12	8	7	3
LAP Reports	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Narrative	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Stage 4's	0	1	0	0	1	0	0	0	3	5

Note:

I & A = Information and Assistance requests

Y = Yes; N = No

All numbers represent totals

Total grievances reported since 2003 is 306. This represents an average of 34 grievances per year.

Total I & A's reported since 2003 is 4839. This represents an average of 538 I & A's requests per year.

*= 2002/2003 was the first year RGS began providing services to DDA facilities. Information compiled is only for six months.

RESIDENT GRIEVANCE SYSTEM

AGGREGATE DATA FOR DEVELOPMENTAL DISABILITIES ADMINISTRATION FACILITIES

FISCAL YEAR 2012

**Darrell Nearon
Director**

**John Hancock
Database Program Manager**

AGGREGATE
FISCAL YEAR 2012

GRIEVANCES	51
INFORMATION/ASSISTANCE CASES	579
TOTAL RIGHTS ADVISOR CONTACTS	630

<u>RIGHTS CATEGORY</u>	<u>GRIEVANCES</u>	<u>INFORMATION/ ASSISTANCE CASES</u>
ABUSE	14	6
ADMISSIONS/DISCHARGE/TRANSFER	1	2
CIVIL RIGHTS	2	7
COMMUNICATIONS/VISITS	5	2
CONFIDENTIALITY	0	0
ENVIRONMENTAL	3	5
FREEDOM OF MOVEMENT	0	183
MONEY	0	1
NEGLECT	1	5
PERSONAL PROPERTY	2	0
RIGHTS PROTECTION SYSTEM (RGS)	1	2
TREATMENT RIGHTS	20	339
OTHER	0	4
NO RIGHT INVOLVED	2	2
RESIDENT/RESIDENT ASSAULT	0	18
DEATH	0	3
TOTAL	51	579

**DECISION AND ACTION (GRIEVANCE CASES) FY 2012
AGGREGATE (DDA)**

STAGE 1 – RIGHTS GRIEVANCES

51 Decisions at Stage 1			Actions at Stage 1		
Valid	2	5%	Resolved	26	68%
Invalid	33	64%	Withdrawn	12	32%
Inconclusive	16	31%	Outside Referral	0	0%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 1	38		74.5%		
Total Number of Cases Referred to Stage 2	13		25.5%		

**STAGE 2 – UNIT DIRECTOR
13 GRIEVANCES**

Decisions at Stage 2			Actions at Stage 2		
Valid	1	8%	Resolved	3	60%
Invalid	5	39%	Withdrawn	2	40%
Inconclusive	7	55%	Outside Referral	0	0%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 2	5		38%		
Total Number of Cases Referred to Next Stage	8		62%		

**STAGE 3A – RESIDENT RIGHTS COMMITTEE
0 GRIEVANCES**

Decisions at Stage 3A			Actions at Stage 3A		
Valid	0	100%	Resolved	0	100%
Invalid	0	100%	Withdrawn	0	100%
Inconclusive	0	100%	Outside Referral	0	100%
Not investigated	0	100%			
Total Number of Cases Closed at Stage 3A	0		100%		
Total Number of Cases Referred to Stage 3B	0		100%		

**STAGE 3B – SUPERINTENDENT/CEO
8 GRIEVANCES**

Decisions at Stage 3B			Actions at Stage 3B		
Valid	1	12%	Resolved	2	67%
Invalid	2	25%	Withdrawn	1	33%
Inconclusive	5	63%	Outside Referral	0	0%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 3B	3		37.5%		
Total Number of Cases Referred to Stage 4	5		62.5%		

**STAGE 4 – CENTRAL REVIEW COMMITTEE
5 Grievances**

Decisions at Stage 4			Actions at Stage 4		
Valid	1	20%	Resolved	0	100%
Invalid	2	40%	Withdrawn	0	100%
Inconclusive	2	40%	Outside Referral	0	100%
Not Investigated	0	100%			
5 Total Number of Cases Closed at Stage 4					

CATEGORIES OF RIGHTS ISSUES
GRIEVANCES

1. ABUSE <u>14</u> <u>11</u> A. Physical <u>2</u> B. Sexual <u>1</u> C. Mental 2. ADMISSION/DISCHARGE/TRANSFER <u>1</u> <u> </u> A. Admission <u> </u> B. Hearing <u> </u> C. Transfer <u>1</u> D. Discharge <u> </u> E. Respite Care 3. CIVIL RIGHTS <u>2</u> <u> </u> A. Abortion <u>2</u> B. Verbal Abuse <u> </u> C. Barrier Free Design <u> </u> D. Business & Personal Affairs <u> </u> E. Competency <u> </u> F. Dignity <u> </u> G. Discrimination <u> </u> H. Education <u> </u> I. Labor & Compensation <u> </u> J. Marriage & Divorce <u> </u> K. Media <u> </u> L. Personal Search <u> </u> M. Privacy <u> </u> N. Religion <u> </u> O. Sexuality <u> </u> P. Harassment <u> </u> Q. Voting <u> </u> R. Immigration 4. COMMUNICATION & VISITS <u>5</u> <u> </u> A. Attorney/Legal Matters <u> </u> B. Clergy <u>1</u> C. Visitors <u> </u> D. Stationery & Postage <u>2</u> E. Telephone <u>1</u> F. Mail <u>1</u> G. Interpreter Service 5. CONFIDENTIALITY & DISCLOSURE <u>0</u> <u> </u> A. Records <u> </u> B. Privileged Communication <u> </u> C. Photocopying <u> </u> D. Photographing 6. ENVIRONMENTAL <u>3</u> <u> </u> A. Clothing <u> </u> B. Diet <u> </u> C. Personal hygiene <u>1</u> D. Safety <u>1</u> E. Sanitary <u>1</u> F. Humane 7. FREEDOM OF MOVEMENT <u>0</u> <u> </u> A. Building & Grounds <u> </u> B. General Restrictions <u> </u> C. Least Restrictive Alternative <u> </u> D. Leave of Absence <u> </u> E. Restraint <u> </u> F. Seclusion <u> </u> G. Quiet Room	8. MONEY <u>0</u> <u> </u> A. Dissipation of Assets <u> </u> B. Easy Access <u> </u> C. Facility Account <u> </u> D. Limitations <u> </u> E. Safekeeping <u> </u> F. Use of Funds <u> </u> G. Exploitation <u> </u> H. Entitlements/Benefits 9. NEGLECT <u>1</u> 10. PERSONAL PROPERTY <u>2</u> <u>1</u> A. Exclusion <u> </u> B. Limitations <u> </u> C. Protection <u> </u> D. Purchase or Receive <u> </u> E. Receipt <u>1</u> F. Storage <u> </u> G. Theft/Loss/Destruction 11. RIGHTS PROTECTION SYSTEM <u>1</u> <u>1</u> A. Complaint Forms <u> </u> B. Explanation of Rights <u> </u> C. Notification of Rights <u> </u> D. Rights Advisor <u> </u> E. Timely Impartial Investigation <u> </u> F. Complaint Procedure <u> </u> G. Retaliation <u> </u> H. Legal Case Review 12. TREATMENT RIGHTS <u>20</u> <u>18</u> A. Individual Treatment Plan <u> </u> B. Informed Consent <u>1</u> C. Medical Care <u>1</u> D. Medication <u> </u> E. Periodic Review <u> </u> F. Research/At Risk Procedures <u> </u> G. Knowledge of <u> </u> H. Name of Treatment Staff <u> </u> I. Alternate Treatment Services <u> </u> J. Clinical Review Panel <u> </u> K. Minor Placed With Adults <u> </u> L. Aftercare Plan <u> </u> M. Advance Medical Directive <u> </u> P. Pain Management 13. OTHER <u>0</u> <u> </u> A. Forensic Issues <u> </u> B. Guardianship <u> </u> C. Rights Outside Jurisdiction 14. NO RIGHT INVOLVED <u>2</u> 15. RESIDENT/RESIDENT ASSAULT <u>0</u> 16. DEATH <u>0</u> TOTAL CASES <u>51</u> FACILITY <u>AGGREGATE</u> FISCAL YEAR <u>2012</u>
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DEMOGRAPHIC INFORMATION FY 2012
AGGREGATE GRIEVANCES (DDA)

SEX	#	%
Female	8	16
Male	39	76
Class	4	8
Total	51	100

AGE	#	%
<18	0	0
18-44	28	55
45-64	18	35
65+	1	2
Class	4	8
Total	51	100

RACE	#	%
African-American	35	69
Asian	0	0
Caucasian	12	23
Hispanic	0	0
Other	0	0
Class	4	8
Total	51	100

CATEGORIES OF RIGHTS ISSUES
INFORMATION ASSISTANCE

1. ABUSE <u>6</u> <u>4</u> A. Physical <u>1</u> B. Sexual <u>1</u> C. Mental 2. ADMISSION/DISCHARGE/TRANSFER <u>2</u> <u> </u> A. Admission <u> </u> B. Hearing <u> </u> C. Transfer <u>2</u> D. Discharge <u> </u> E. Respite Care 3. CIVIL RIGHTS <u>7</u> <u> </u> A. Abortion <u>3</u> B. Verbal Abuse <u> </u> C. Barrier Free Design <u> </u> D. Business & Personal Affairs <u> </u> E. Competency <u>4</u> F. Dignity <u> </u> G. Discrimination <u> </u> H. Education <u> </u> I. Labor & Compensation <u> </u> J. Marriage & Divorce <u> </u> K. Media <u> </u> L. Personal Search <u> </u> M. Privacy <u> </u> N. Religion <u> </u> O. Sexuality <u> </u> P. Harassment <u> </u> Q. Voting <u> </u> R. Immigration 4. COMMUNICATION & VISITS <u>2</u> <u>1</u> A. Attorney/Legal Matters <u> </u> B. Clergy <u>1</u> C. Visitors <u> </u> D. Stationery & Postage <u> </u> E. Telephone <u> </u> F. Mail <u> </u> G. Interpreter Service 5. CONFIDENTIALITY & DISCLOSURE <u>0</u> <u> </u> A. Records <u> </u> B. Privileged Communication <u> </u> C. Photocopying <u> </u> D. Photographing 6. ENVIRONMENTAL <u>5</u> <u> </u> A. Clothing <u> </u> B. Diet <u>1</u> C. Personal hygiene <u>4</u> D. Safety <u> </u> E. Sanitary <u> </u> F. Humane 7. FREEDOM OF MOVEMENT <u>183</u> <u>6</u> A. Building & Grounds <u>1</u> B. General Restrictions <u>3</u> C. Least Restrictive Alternative <u>1</u> D. Leave of Absence <u>172</u> E. Restraint <u> </u> F. Seclusion <u> </u> G. Quiet Room	8. MONEY <u>1</u> <u> </u> A. Dissipation of Assets <u> </u> B. Easy Access <u> </u> C. Facility Account <u> </u> D. Limitations <u> </u> E. Safekeeping <u> </u> F. Use of Funds <u> </u> G. Exploitation <u>1</u> H. Entitlements/Benefits 9. NEGLECT <u>5</u> 10. PERSONAL PROPERTY <u>0</u> <u> </u> A. Exclusion <u> </u> B. Limitations <u> </u> C. Protection <u> </u> D. Purchase or Receive <u> </u> E. Receipt <u> </u> F. Storage <u> </u> G. Theft/Loss/Destruction 11. RIGHTS PROTECTION SYSTEM <u>2</u> <u> </u> A. Complaint Forms <u> </u> B. Explanation of Rights <u> </u> C. Notification of Rights <u> </u> D. Rights Advisor <u> </u> E. Timely Impartial Investigation <u>1</u> F. Complaint Procedure <u> </u> G. Retaliation <u>1</u> H. Legal Case Review 12. TREATMENT RIGHTS <u>339</u> <u>171</u> A. Individual Treatment Plan <u> </u> B. Informed Consent <u>65</u> C. Medical Care <u>100</u> D. Medication <u>3</u> E. Periodic Review <u> </u> F. Research/At Risk Procedures <u> </u> G. Knowledge of <u> </u> H. Name of Treatment Staff <u> </u> I. Alternate Treatment Services <u> </u> J. Clinical Review Panel <u> </u> K. Minor Placed With Adults <u> </u> L. Aftercare Plan <u> </u> M. Advance Medical Directive <u> </u> P. Pain Management 13. OTHER <u>4</u> <u>2</u> A. Forensic Issues <u> </u> B. Guardianship <u>2</u> C. Rights Outside Jurisdiction 14. NO RIGHT INVOLVED <u>2</u> 15. RESIDENT/RESIDENT ASSAULT <u>18</u> 16. DEATH <u>3</u> TOTAL CASES <u>579</u> FACILITY <u>AGGREGATE</u> FISCAL YEAR <u>2012</u>
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**DEMOGRAPHIC INFORMATION FY 2012
AGGREGATE**

INFORMATION/ASSISTANCE (DDA)

SEX	#	%
Female	235	41
Male	340	58
Class	4	1
Total	579	100

AGE	#	%
<18	0	0
18-44	419	72
45-64	141	24
65+	15	3
Class	4	1
Total	579	100

RACE	#	%
African-American	284	48
Asian	1	0
Caucasian	281	48
Hispanic	9	3
Other	0	0
Class	4	1
Total	579	100

RESIDENT GRIEVANCE SYSTEM

FISCAL YEAR 2012

HOLLY CENTER

**Roshanda Roberts
Rights Advisor**

HOLLY CENTER
FISCAL YEAR 2012

GRIEVANCES	8
INFORMATION/ASSISTANCE CASES	78
TOTAL RIGHTS ADVISOR CONTACTS	86

<u>RIGHTS CATEGORY</u>	<u>GRIEVANCES</u>	<u>INFORMATION/ ASSISTANCE CASES</u>
ABUSE	4	3
ADMISSIONS/DISCHARGE/TRANSFER	0	0
CIVIL RIGHTS	0	3
COMMUNICATIONS/VISITS	0	1
CONFIDENTIALITY	0	0
ENVIRONMENTAL	0	1
FREEDOM OF MOVEMENT	0	3
MONEY	0	1
NEGLECT	1	5
PERSONAL PROPERTY	0	0
RIGHTS PROTECTION SYSTEM (RGS)	0	0
TREATMENT RIGHTS	2	44
OTHER	0	2
NO RIGHT INVOLVED	1	1
RESIDENT/RESIDENT ASSAULT	0	11
DEATH	0	3
TOTAL	8	78

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE 4

4 A. Physical

 B. Sexual

 C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 0

 A. Admission

 B. Hearing

 C. Transfer

 D. Discharge

 E. Respite Care

3. CIVIL RIGHTS 0

 A. Abortion

 B. Verbal Abuse

 C. Barrier Free Design

 D. Business & Personal Affairs

 E. Competency

 F. Dignity

 G. Discrimination

 H. Education

 I. Labor & Compensation

 J. Marriage & Divorce

 K. Media

 L. Personal Search

 M. Privacy

 N. Religion

 O. Sexuality

 P. Harassment

 Q. Voting

 R. Immigration

4. COMMUNICATION & VISITS 0

 A. Attorney/Legal Matters

 B. Clergy

 C. Visitors

 D. Stationery & Postage

 E. Telephone

 F. Mail

 G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 0

 A. Records

 B. Privileged Communication

 C. Photocopying

 D. Photographing

6. ENVIRONMENTAL 0

 A. Clothing

 B. Diet

 C. Personal hygiene

 D. Safety

 E. Sanitary

 F. Humane

7. FREEDOM OF MOVEMENT 0

 A. Building & Grounds

 B. General Restrictions

 C. Least Restrictive Alternative

 D. Leave of Absence

 E. Restraint

 F. Seclusion

 G. Quiet Room

8. MONEY 0

 A. Dissipation of Assets

 B. Easy Access

 C. Facility Account

 D. Limitations

 E. Safekeeping

 F. Use of Funds

 G. Exploitation

 H. Entitlements/Benefits

9. NEGLECT 1

10. PERSONAL PROPERTY 0

 A. Exclusion

 B. Limitations

 C. Protection

 D. Purchase or Receive

 E. Receipt

 F. Storage

 G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 0

 A. Complaint Forms

 B. Explanation of Rights

 C. Notification of Rights

 D. Rights Advisor

 E. Timely Impartial Investigation

 F. Complaint Procedure

 G. Retaliation

 H. Legal Case Review

12. TREATMENT RIGHTS 2

 A. Individual Treatment Plan

 B. Informed Consent

1 C. Medical Care

1 D. Medication

 E. Periodic Review

 F. Research/At Risk Procedures

 G. Knowledge of

 H. Name of Treatment Staff

 I. Alternate Treatment Services

 J. Clinical Review Panel

 K. Minor Placed With Adults

 L. Aftercare Plan

 M. Advance Medical Directive

 P. Pain Management

13. OTHER 0

 A. Forensic Issues

 B. Guardianship

 C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 1

15. RESIDENT/RESIDENT ASSAULT 0

16. DEATH 0

TOTAL CASES 8

FACILITY Holly Center

FISCAL YEAR 2012

DEMOGRAPHIC INFORMATION FY 2012

GRIEVANCE (Holly Center)

SEX	#	%	AGE	#	%	RACE	#	%
Female	0	0	<18	0	0	African-American	7	88
Male	8	100	18-44	0	0	Asian	0	0
Class	0	0	45-64	7	88	Caucasian	1	12
Total	8	100	65+	1	12	Hispanic	0	0
			Class	0	0	Other	0	0
			Total	8	100	Class	0	0
						Total	8	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE 3

2 A. Physical

B. Sexual

1 C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 0

A. Admission

B. Hearing

C. Transfer

D. Discharge

E. Respite Care

3. CIVIL RIGHTS 3

A. Abortion

3 B. Verbal Abuse

C. Barrier Free Design

D. Business & Personal Affairs

E. Competency

F. Dignity

G. Discrimination

H. Education

I. Labor & Compensation

J. Marriage & Divorce

K. Media

L. Personal Search

M. Privacy

N. Religion

O. Sexuality

P. Harassment

Q. Voting

R. Immigration

4. COMMUNICATION & VISITS 1

A. Attorney/Legal Matters

B. Clergy

1 C. Visitors

D. Stationery & Postage

E. Telephone

F. Mail

G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 0

A. Records

B. Privileged Communication

C. Photocopying

D. Photographing

6. ENVIRONMENTAL 1

A. Clothing

B. Diet

C. Personal hygiene

1 D. Safety

E. Sanitary

F. Humane

7. FREEDOM OF MOVEMENT 3

A. Building & Grounds

B. General Restrictions

C. Least Restrictive Alternative

D. Leave of Absence

3 E. Restraint

F. Seclusion

G. Quiet Room

8. MONEY 1

A. Dissipation of Assets

B. Easy Access

C. Facility Account

D. Limitations

E. Safekeeping

F. Use of Funds

G. Exploitation

1 H. Entitlements/Benefits

9. NEGLECT 5

10. PERSONAL PROPERTY 0

A. Exclusion

B. Limitations

C. Protection

D. Purchase or Receive

E. Receipt

F. Storage

G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 0

A. Complaint Forms

B. Explanation of Rights

C. Notification of Rights

D. Rights Advisor

E. Timely Impartial Investigation

F. Complaint Procedure

G. Retaliation

H. Legal Case Review

12. TREATMENT RIGHTS 44

A. Individual Treatment Plan

B. Informed Consent

43 C. Medical Care

1 D. Medication

E. Periodic Review

F. Research/At Risk Procedures

G. Knowledge of

H. Name of Treatment Staff

I. Alternate Treatment Services

J. Clinical Review Panel

K. Minor Placed With Adults

L. Aftercare Plan

M. Advance Medical Directive

P. Pain Management

13. OTHER 2

A. Forensic Issues

B. Guardianship

2 C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 1

15. RESIDENT/RESIDENT ASSAULT 11

16. DEATH 3

TOTAL CASES 78

FACILITY Holly Center

FISCAL YEAR 2012

DEMOGRAPHIC INFORMATION FY 2012

INFORMATION/ASSISTANCE (Holly Center)

SEX	#	%
Female	25	32
Male	51	65
Class	2	3
Total	78	100

AGE	#	%
<18	0	0
18-44	25	32
45-64	45	58
65+	6	7
Class	2	3
Total	78	100

RACE	#	%
African-American	22	28
Asian	1	1
Caucasian	48	62
Hispanic	5	6
Other	0	0
Class	2	3
Total	78	100

RESIDENT GRIEVANCE SYSTEM

FISCAL YEAR 2012

POTOMAC CENTER

**Lisa Olinger
Rights Advisor**

POTOMAC CENTER
FISCAL YEAR 2012

GRIEVANCES	7
INFORMATION/ASSISTANCE CASES	397
TOTAL RIGHTS ADVISOR CONTACTS	404

<u>RIGHTS CATEGORY</u>	<u>GRIEVANCES</u>	<u>INFORMATION/ ASSISTANCE CASES</u>
ABUSE	6	3
ADMISSIONS/DISCHARGE/TRANSFER	0	2
CIVIL RIGHTS	1	4
COMMUNICATIONS/VISITS	0	1
CONFIDENTIALITY	0	0
ENVIRONMENTAL	0	3
FREEDOM OF MOVEMENT	0	180
MONEY	0	0
NEGLECT	0	0
PERSONAL PROPERTY	0	0
RIGHTS PROTECTION SYSTEM (RGS)	0	0
TREATMENT RIGHTS	0	196
OTHER	0	2
NO RIGHT INVOLVED	0	1
RESIDENT/RESIDENT ASSAULT	0	5
DEATH	0	0
TOTAL	7	397

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE 6

4 A. Physical

2 B. Sexual

C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 0

A. Admission

B. Hearing

C. Transfer

D. Discharge

E. Respite Care

3. CIVIL RIGHTS 1

A. Abortion

1 B. Verbal Abuse

C. Barrier Free Design

D. Business & Personal Affairs

E. Competency

F. Dignity

G. Discrimination

H. Education

I. Labor & Compensation

J. Marriage & Divorce

K. Media

L. Personal Search

M. Privacy

N. Religion

O. Sexuality

P. Harassment

Q. Voting

R. Immigration

4. COMMUNICATION & VISITS 0

A. Attorney/Legal Matters

B. Clergy

C. Visitors

D. Stationery & Postage

E. Telephone

F. Mail

G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 0

A. Records

B. Privileged Communication

C. Photocopying

D. Photographing

6. ENVIRONMENTAL 0

A. Clothing

B. Diet

C. Personal hygiene

D. Safety

E. Sanitary

F. Humane

7. FREEDOM OF MOVEMENT 0

A. Building & Grounds

B. General Restrictions

C. Least Restrictive Alternative

D. Leave of Absence

E. Restraint

F. Seclusion

G. Quiet Room

8. MONEY 0

A. Dissipation of Assets

B. Easy Access

C. Facility Account

D. Limitations

E. Safekeeping

F. Use of Funds

G. Exploitation

H. Entitlements/Benefits

9. NEGLECT 0

10. PERSONAL PROPERTY 0

A. Exclusion

B. Limitations

C. Protection

D. Purchase or Receive

E. Receipt

F. Storage

G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 0

A. Complaint Forms

B. Explanation of Rights

C. Notification of Rights

D. Rights Advisor

E. Timely Impartial Investigation

F. Complaint Procedure

G. Retaliation

H. Legal Case Review

12. TREATMENT RIGHTS 0

A. Individual Treatment Plan

B. Informed Consent

C. Medical Care

D. Medication

E. Periodic Review

F. Research/At Risk Procedures

G. Knowledge of

H. Name of Treatment Staff

I. Alternate Treatment Services

J. Clinical Review Panel

K. Minor Placed With Adults

L. Aftercare Plan

M. Advance Medical Directive

P. Pain Management

13. OTHER 0

A. Forensic Issues

B. Guardianship

C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 0

15. RESIDENT/RESIDENT ASSAULT 0

16. DEATH 0

TOTAL CASES 7

FACILITY Potomac Center

FISCAL YEAR 2012

DEMOGRAPHIC INFORMATION FY 2012

GRIEVANCE (Potomac Center)

SEX	#	%	AGE	#	%	RACE	#	%
Female	4	57	<18	0	0	African-American	5	71
Male	3	43	18-44	5	71	Asian	0	0
Class	0	0	45-64	2	29	Caucasian	2	29
Total	7	100	65+	0	0	Hispanic	0	0
			Class	0	0	Other	0	0
			Total	7	100	Class	0	0
						Total	7	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>3</u>	8. MONEY <u>0</u>
2 A Physical	A. Dissipation of Assets
1 B. Sexual	B. Easy Access
C. Mental	C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>2</u>	D. Limitations
A. Admission	E. Safekeeping
B. Hearing	F. Use of Funds
C. Transfer	G. Exploitation
2 D. Discharge	H. Entitlements/Benefits
E. Respite Care	
3. CIVIL RIGHTS <u>4</u>	9. NEGLECT <u>0</u>
A. Abortion	10. PERSONAL PROPERTY <u>0</u>
B. Verbal Abuse	A. Exclusion
C. Barrier Free Design	B. Limitations
D. Business & Personal Affairs	C. Protection
E. Competency	D. Purchase or Receive
4 F. Dignity	E. Receipt
G. Discrimination	F. Storage
H. Education	G. Theft/Loss/Destruction
I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>0</u>
J. Marriage & Divorce	A. Complaint Forms
K. Media	B. Explanation of Rights
L. Personal Search	C. Notification of Rights
M. Privacy	D. Rights Advisor
N. Religion	E. Timely Impartial Investigation
O. Sexuality	F. Complaint Procedure
P. Harassment	G. Retaliation
Q. Voting	H. Legal Case Review
R. Immigration	
4. COMMUNICATION & VISITS <u>1</u>	12. TREATMENT RIGHTS <u>196</u>
1 A. Attorney/Legal Matters	171 A. Individual Treatment Plan
B. Clergy	B. Informed Consent
C. Visitors	22 C. Medical Care
D. Stationery & Postage	D. Medication
E. Telephone	3 E. Periodic Review
F. Mail	F. Research/At Risk Procedures
G. Interpreter Service	G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	H. Name of Treatment Staff
A. Records	I. Alternate Treatment Services
B. Privileged Communication	J. Clinical Review Panel
C. Photocopying	K. Minor Placed With Adults
D. Photographing	L. Aftercare Plan
6. ENVIRONMENTAL <u>3</u>	M. Advance Medical Directive
A. Clothing	P. Pain Management
B. Diet	
1 C. Personal hygiene	13. OTHER <u>2</u>
2 D. Safety	2 A. Forensic Issues
E. Sanitary	B. Guardianship
F. Humane	C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>180</u>	14. NO RIGHT INVOLVED <u>1</u>
6 A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>5</u>
1 B. General Restrictions	
3 C. Least Restrictive Alternative	16. DEATH <u>0</u>
1 D. Leave of Absence	
169 E. Restraint	TOTAL CASES <u>397</u>
F. Seclusion	FACILITY <u>Potomac Center</u>
G. Quiet Room	FISCAL YEAR <u>2012</u>

DEMOGRAPHIC INFORMATION FY 2012

INFORMATION/ASSISTANCE (Potomac Center)

SEX	#	%
Female	166	42
Male	231	58
Class	0	0
Total	397	100

AGE	#	%
<18	0	0
18-44	300	76
45-64	88	22
65+	9	2
Class	0	0
Total	397	100

RACE	#	%
African-American	175	44
Asian	0	0
Caucasian	218	55
Hispanic	4	1
Other	0	0
Class	0	0
Total	397	100

RESIDENT GRIEVANCE SYSTEM

FISCAL YEAR 2012

SETT - PERKINS

**Linda Simms
Rights Advisor**

**Michael Jackson
Rights Advisor**

SETT - PERKINS
FISCAL YEAR 2012

GRIEVANCES	4
INFORMATION/ASSISTANCE CASES	2
TOTAL RIGHTS ADVISOR CONTACTS	6

<u>RIGHTS CATEGORY</u>	<u>GRIEVANCES</u>	<u>INFORMATION/ ASSISTANCE CASES</u>
ABUSE	0	0
ADMISSIONS/DISCHARGE/TRANSFER	0	0
CIVIL RIGHTS	1	0
COMMUNICATIONS/VISITS	0	0
CONFIDENTIALITY	0	0
ENVIRONMENTAL	2	1
FREEDOM OF MOVEMENT	0	0
MONEY	0	0
NEGLECT	0	0
PERSONAL PROPERTY	0	0
RIGHTS PROTECTION SYSTEM (RGS)	0	1
TREATMENT RIGHTS	0	0
OTHER	0	0
NO RIGHT INVOLVED	1	0
RESIDENT/RESIDENT ASSAULT	0	0
DEATH	0	0
TOTAL	4	2

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>0</u>	8. MONEY <u>0</u>
___ A. Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>0</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
___ D. Discharge	___ H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>1</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>0</u>
<u>1</u> ___ B. Verbal Abuse	___ A. Exclusion
___ C. Barrier Free Design	___ B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
___ E. Competency	___ D. Purchase or Receive
___ F. Dignity	___ E. Receipt
___ G. Discrimination	___ F. Storage
___ H. Education	___ G. Theft/Loss/Destruction
___ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>0</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	___ B. Explanation of Rights
___ L. Personal Search	___ C. Notification of Rights
___ M. Privacy	___ D. Rights Advisor
___ N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	___ H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>0</u>	12. TREATMENT RIGHTS <u>0</u>
___ A. Attorney/Legal Matters	___ A. Individual Treatment Plan
___ B. Clergy	___ B. Informed Consent
___ C. Visitors	___ C. Medical Care
___ D. Stationery & Postage	___ D. Medication
___ E. Telephone	___ E. Periodic Review
___ F. Mail	___ F. Research/At Risk Procedures
___ G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	___ H. Name of Treatment Staff
___ A. Records	___ I. Alternate Treatment Services
___ B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	___ L. Aftercare Plan
6. ENVIRONMENTAL <u>2</u>	___ M. Advance Medical Directive
___ A. Clothing	___ P. Pain Management
___ B. Diet	
___ C. Personal hygiene	13. OTHER <u>0</u>
<u>1</u> ___ D. Safety	___ A. Forensic Issues
___ E. Sanitary	___ B. Guardianship
<u>1</u> ___ F. Humane	___ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>0</u>	14. NO RIGHT INVOLVED <u>1</u>
___ A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>0</u>
___ B. General Restrictions	
___ C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
___ E. Restraint	TOTAL CASES <u>4</u>
___ F. Seclusion	FACILITY <u>SETT - Perkins</u>
___ G. Quiet Room	FISCAL YEAR <u>2012</u>

DEMOGRAPHIC INFORMATION FY 2012

GRIEVANCE (PERKINS HOSPITAL SETT Unit)

SEX	#	%	AGE	#	%	RACE	#	%
Female	0	0	<18	0	0	African-American	1	25
Male	1	25	18-44	1	25	Asian	0	0
Class	3	75	45-64	0	0	Caucasian	0	0
Total	4	100	65+	0	0	Hispanic	0	0
			Class	3	75	Other	0	0
			Total	4	100	Class	3	75
						Total	4	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>0</u>
<u> </u> A Physical	<u> </u> A. Dissipation of Assets
<u> </u> B. Sexual	<u> </u> B. Easy Access
<u> </u> C. Mental	<u> </u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>0</u>	<u> </u> D. Limitations
<u> </u> A. Admission	<u> </u> E. Safekeeping
<u> </u> B. Hearing	<u> </u> F. Use of Funds
<u> </u> C. Transfer	<u> </u> G. Exploitation
<u> </u> D. Discharge	<u> </u> H. Entitlements/Benefits
<u> </u> E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>0</u>	10. PERSONAL PROPERTY <u>0</u>
<u> </u> A. Abortion	<u> </u> A. Exclusion
<u> </u> B. Verbal Abuse	<u> </u> B. Limitations
<u> </u> C. Barrier Free Design	<u> </u> C. Protection
<u> </u> D. Business & Personal Affairs	<u> </u> D. Purchase or Receive
<u> </u> E. Competency	<u> </u> E. Receipt
<u> </u> F. Dignity	<u> </u> F. Storage
<u> </u> G. Discrimination	<u> </u> G. Theft/Loss/Destruction
<u> </u> H. Education	11. RIGHTS PROTECTION SYSTEM <u>1</u>
<u> </u> I. Labor & Compensation	<u> </u> A. Complaint Forms
<u> </u> J. Marriage & Divorce	<u> </u> B. Explanation of Rights
<u> </u> K. Media	<u> </u> C. Notification of Rights
<u> </u> L. Personal Search	<u> </u> D. Rights Advisor
<u> </u> M. Privacy	<u> </u> E. Timely Impartial Investigation
<u> </u> N. Religion	<u> </u> F. Complaint Procedure
<u> </u> O. Sexuality	<u> </u> G. Retaliation
<u> </u> P. Harassment	<u> </u> H. Legal Case Review
<u> </u> Q. Voting	
<u> </u> R. Immigration	
4. COMMUNICATION & VISITS <u>0</u>	12. TREATMENT RIGHTS <u>0</u>
<u> </u> A. Attorney/Legal Matters	<u> </u> A. Individual Treatment Plan
<u> </u> B. Clergy	<u> </u> B. Informed Consent
<u> </u> C. Visitors	<u> </u> C. Medical Care
<u> </u> D. Stationery & Postage	<u> </u> D. Medication
<u> </u> E. Telephone	<u> </u> E. Periodic Review
<u> </u> F. Mail	<u> </u> F. Research/At Risk Procedures
<u> </u> G. Interpreter Service	<u> </u> G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	<u> </u> H. Name of Treatment Staff
<u> </u> A. Records	<u> </u> I. Alternate Treatment Services
<u> </u> B. Privileged Communication	<u> </u> J. Clinical Review Panel
<u> </u> C. Photocopying	<u> </u> K. Minor Placed With Adults
<u> </u> D. Photographing	<u> </u> L. Aftercare Plan
6. ENVIRONMENTAL <u>1</u>	<u> </u> M. Advance Medical Directive
<u> </u> A. Clothing	<u> </u> P. Pain Management
<u> </u> B. Diet	
<u> </u> C. Personal hygiene	13. OTHER <u>0</u>
<u> </u> D. Safety	<u> </u> A. Forensic Issues
<u> </u> E. Sanitary	<u> </u> B. Guardianship
<u> </u> F. Humane	<u> </u> C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>0</u>	14. NO RIGHT INVOLVED <u>0</u>
<u> </u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>0</u>
<u> </u> B. General Restrictions	
<u> </u> C. Least Restrictive Alternative	16. DEATH <u>0</u>
<u> </u> D. Leave of Absence	
<u> </u> E. Restraint	TOTAL CASES <u>2</u>
<u> </u> F. Seclusion	FACILITY <u>SETT - Perkins</u>
<u> </u> G. Quiet Room	FISCAL YEAR <u>2012</u>

DEMOGRAPHIC INFORMATION FY 2012

INFORMATION/ASSISTANCE (PERKINS HOSPITAL SETT Unit)

SEX	#	%	AGE	#	%	RACE	#	%
Female	0	0	<18	0	0	African-American	0	0
Male	0	0	18-44	0	0	Asian	0	0
Class	2	100	45-64	0	0	Caucasian	0	0
Total	2	100	65+	0	0	Hispanic	0	0
			Class	2	100	Other	0	0
			Total	2	100	Class	2	100
						Total	2	100

RESIDENT GRIEVANCE SYSTEM

FISCAL YEAR 2012

SETT - SPRINGFIELD

DeShawn Edwards	Jacqueline Short
Rights Advisor	Rights Advisor

SETT - SPRINGFIELD
FISCAL YEAR 2012

GRIEVANCES	32
INFORMATION/ASSISTANCE CASES	102
TOTAL RIGHTS ADVISOR CONTACTS	134

.....		
RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	4	0
ADMISSIONS/DISCHARGE/TRANSFER	1	0
CIVIL RIGHTS	0	0
COMMUNICATIONS/VISITS	5	0
CONFIDENTIALITY	0	0
ENVIRONMENTAL	1	0
FREEDOM OF MOVEMENT	0	0
MONEY	0	0
NEGLECT	0	0
PERSONAL PROPERTY	2	0
RIGHTS PROTECTION SYSTEM (RGS)	1	1
TREATMENT RIGHTS	18	99
OTHER	0	0
NO RIGHT INVOLVED	0	0
RESIDENT/RESIDENT ASSAULT	0	2
DEATH	0	0
TOTAL	32	102

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>4</u>	8. MONEY <u>0</u>
<u>3</u> A. Physical	_____ A. Dissipation of Assets
_____ B. Sexual	_____ B. Easy Access
<u>1</u> C. Mental	_____ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>1</u>	_____ D. Limitations
_____ A. Admission	_____ E. Safekeeping
_____ B. Hearing	_____ F. Use of Funds
_____ C. Transfer	_____ G. Exploitation
<u>1</u> D. Discharge	_____ H. Entitlements/Benefits
_____ E. Respite Care	
3. CIVIL RIGHTS <u>0</u>	9. NEGLECT <u>0</u>
_____ A. Abortion	10. PERSONAL PROPERTY <u>2</u>
_____ B. Verbal Abuse	<u>1</u> A. Exclusion
_____ C. Barrier Free Design	_____ B. Limitations
_____ D. Business & Personal Affairs	_____ C. Protection
_____ E. Competency	_____ D. Purchase or Receive
_____ F. Dignity	_____ E. Receipt
_____ G. Discrimination	<u>1</u> F. Storage
_____ H. Education	_____ G. Theft/Loss/Destruction
_____ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>01</u>
_____ J. Marriage & Divorce	<u>1</u> A. Complaint Forms
_____ K. Media	_____ B. Explanation of Rights
_____ L. Personal Search	_____ C. Notification of Rights
_____ M. Privacy	_____ D. Rights Advisor
_____ N. Religion	_____ E. Timely Impartial Investigation
_____ O. Sexuality	_____ F. Complaint Procedure
_____ P. Harassment	_____ G. Retaliation
_____ Q. Voting	_____ H. Legal Case Review
_____ R. Immigration	
4. COMMUNICATION & VISITS <u>5</u>	12. TREATMENT RIGHTS <u>18</u>
_____ A. Attorney/Legal Matters	<u>18</u> A. Individual Treatment Plan
_____ B. Clergy	_____ B. Informed Consent
<u>1</u> C. Visitors	_____ C. Medical Care
_____ D. Stationery & Postage	_____ D. Medication
<u>2</u> E. Telephone	_____ E. Periodic Review
<u>1</u> F. Mail	_____ F. Research/At Risk Procedures
<u>1</u> G. Interpreter Service	_____ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	_____ H. Name of Treatment Staff
_____ A. Records	_____ I. Alternate Treatment Services
_____ B. Privileged Communication	_____ J. Clinical Review Panel
_____ C. Photocopying	_____ K. Minor Placed With Adults
_____ D. Photographing	_____ L. Aftercare Plan
6. ENVIRONMENTAL <u>1</u>	_____ M. Advance Medical Directive
_____ A. Clothing	_____ P. Pain Management
_____ B. Diet	
_____ C. Personal hygiene	13. OTHER <u>0</u>
_____ D. Safety	_____ A. Forensic Issues
<u>1</u> E. Sanitary	_____ B. Guardianship
_____ F. Humane	_____ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>0</u>	14. NO RIGHT INVOLVED <u>0</u>
_____ A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>0</u>
_____ B. General Restrictions	
_____ C. Least Restrictive Alternative	16. DEATH <u>0</u>
_____ D. Leave of Absence	
_____ E. Restraint	TOTAL CASES <u>32</u>
_____ F. Seclusion	FACILITY <u>SETT - Springfield</u>
_____ G. Quiet Room	FISCAL YEAR <u>2012</u>

DEMOGRAPHIC INFORMATION (GRIEVANCE) FY 2012

GRIEVANCES (SPRINGFIELD HOSPITAL SETT Unit)

SEX	#	%	AGE	#	%	RACE	#	%
Female	4	13	<18	0	0	African-American	22	69
Male	27	84	18-44	22	69	Asian	0	0
Class	1	3	45-64	9	28	Caucasian	9	28
Total	32	100	65+	0	0	Hispanic	0	0
			Class	1	3	Other	0	0
			Total	32	100	Class	1	3
						Total	32	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>0</u>
___ A Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>0</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
___ D. Discharge	___ H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>0</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>0</u>
___ B. Verbal Abuse	___ A. Exclusion
___ C. Barrier Free Design	___ B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
___ E. Competency	___ D. Purchase or Receive
___ F. Dignity	___ E. Receipt
___ G. Discrimination	___ F. Storage
___ H. Education	___ G. Theft/Loss/Destruction
___ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>1</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	___ B. Explanation of Rights
___ L. Personal Search	___ C. Notification of Rights
___ M. Privacy	___ D. Rights Advisor
___ N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	<u>1</u> ___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	___ H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>0</u>	12. TREATMENT RIGHTS <u>99</u>
___ A. Attorney/Legal Matters	___ A. Individual Treatment Plan
___ B. Clergy	___ B. Informed Consent
___ C. Visitors	___ C. Medical Care
___ D. Stationery & Postage	<u>99</u> ___ D. Medication
___ E. Telephone	___ E. Periodic Review
___ F. Mail	___ F. Research/At Risk Procedures
___ G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	___ H. Name of Treatment Staff
___ A. Records	___ I. Alternate Treatment Services
___ B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	___ L. Aftercare Plan
6. ENVIRONMENTAL <u>0</u>	___ M. Advance Medical Directive
___ A. Clothing	___ P. Pain Management
___ B. Diet	
___ C. Personal hygiene	13. OTHER <u>0</u>
___ D. Safety	___ A. Forensic Issues
___ E. Sanitary	___ B. Guardianship
___ F. Humane	___ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>0</u>	14. NO RIGHT INVOLVED <u>0</u>
___ A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>2</u>
___ B. General Restrictions	
___ C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
___ E. Restraint	TOTAL CASES <u>102</u>
___ F. Seclusion	FACILITY <u>SETT -Springfield</u>
___ G. Quiet Room	FISCAL YEAR <u>2012</u>

DEMOGRAPHIC INFORMATION FY 2012

INFORMATION/ASSISTANCE (SPRINGFIELD HOSPITAL SETT Unit)

SEX	#	%	AGE	#	%	RACE	#	%
Female	44	43	<18	0	0	African-American	87	85
Male	58	57	18-44	94	92	Asian	0	0
Class	0	0	45-64	8	8	Caucasian	15	15
Total	102	100	65+	0	0	Hispanic	0	0
			Class	0	0	Other	0	0
			Total	102	100	Class	0	0
						Total	102	100

RESIDENT GRIEVANCE SYSTEM

LEGAL ASSISTANCE PROVIDER SERVICES

FISCAL YEAR 2012

**LEGAL ASSISTANCE PROVIDERS
STATE RESIDENTIAL CENTERS
DESCRIPTION OF REQUIRED SERVICES**

The Legal Assistance Providers are obtained through State procurement to provide the following legal services.

1. Representation of individuals proposed for admission to a State Residential Center in accordance with Annotated Code of Maryland, Health General §7-503, which requires that it, must be affirmatively shown by clear and convincing evidence that the conclusions leading to the decision to admit the individual are supported by the following findings:
 - a. The individual has mental retardation;
 - b. The individual needs residential services for the individual's adequate habilitation; and
 - c. There is no less restrictive setting in which the needed services can be provided that is available to the individual or will be available to the individual within a reasonable time after the hearing.

In Fiscal Year 2012, the Legal Assistance Providers spent 39.48 hours representing 22 individuals at admission hearings.

2. Review of the current status of residents on an annual basis to determine whether the individual continues to meet retention criteria in accordance with Annotated Code of Maryland, Health General §7-505, which requires determination of the following:
 - a. Whether this individual continues to meet the requirements of this subtitle for admission to a State Residential Center;
 - b. Whether the services which the individual requires can be provided in a less restrictive setting;
 - c. Whether the individual's plan of habilitation as required by §7-1006 of this title is adequate and suitable; and
 - d. Whether the State residential center has complied with and executed the individual's plan of habilitation in accordance with the rules, regulations, and standards that the Secretary adopts.

In Fiscal Year 2012, the Legal Assistance Providers spent 1283.54 hours conducting annual reviews for 207 residents.

3. Representation of individuals who elect to petition for release pursuant to the Annotated Code of Maryland, Health General:

§7-506 Habeas Corpus

Any individual who has been admitted to a State residential center or any person on behalf of the individual may apply at any time to a court of competent jurisdiction for a writ of habeas corpus to determine the cause and the legality of the detention.

§7-507 Petition for Release

Subject to the limitations in this section, a petition for the release of an individual who is held under this subtitle from a State residential center may be filed, at any time, by the individual or any person who has a legitimate interest in the welfare of the individual.

In fiscal year 2012, the Legal Assistance Providers spent 32.4 hours representing 1 individual in habeas corpus/petition for release.

4. Representation of residents at transfer hearings pursuant to Annotated Code of Maryland, Health General

§7-801 Authority of Director

The Director may transfer an individual with developmental disability from a public residential program or a public day program to another public residential program or public day program or, if a private provider of services agrees, to that private program, if the Director

finds that the individual with developmental disabilities either can receive better treatment in, or would be more likely to benefit from treatment at the other program; or the safety or welfare of other individuals with developmental disability would be furthered.

§7-802 Transfer to a Mental Health Program

The Developmental Disabilities Administration may ask the Mental Hygiene Administration to accept primary responsibility for an individual in or eligible for admission to a State residential center, if the Developmental Disabilities Administration finds that the individual would be provided for more appropriately in a program for individuals with mental disorders. The Mental Hygiene Administration shall determine whether transfer to a mental health program is appropriate.

A dispute over a transfer of an individual from the Developmental Disabilities Administration to the Mental Hygiene Administration shall be resolved in

accordance with procedures that the Secretary sets, on request of the Developmental Disabilities Administration or the Mental Hygiene Administration. The Director shall give the individual with developmental disability the opportunity for a hearing on the proposed transfer.

In fiscal year 2012, the Legal Assistance Providers spent 218.6 hours representing 24 individuals at transfer hearings.

The services provided by the Legal Assistance Providers for each facility is detailed on the following pages.

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT
CONTRACT YEAR
(September 1, 2011 – August 31, 2012)
(Reporting Period: July 1, 2011 – June 30, 2012)**

HOLLY CENTER
State Residential Center (SRC)
Facility

JOHN P. HOULIHAN, ESQUIRE
Legal Assistance Provider

Summary of Services Provided

	<u>Number of Clients Served</u>	<u>Total Hours</u>
Admission Matters	12*	16.48
Annual Reevaluations	89**	597.39
Petitions for Release	0	0.00
Transfer Matters	0***	0.00
Total		614.27

* Includes 2 Formal Admissions and 10 individuals receiving services during 60 Respite Stays under Md. Ann. Code, Health, 7-509

** 80 residents as of July 1, 2012, after 2 admissions, 4 transitions to community placement, and other events of natural attrition.

***Release and Transfer Matters included within number of clients served; 4 transitions to community placement occurred during Reporting Period as a result of annual re-evaluation process and outcome thereof.

**Holly Center SRC
LAP Annual Report
(7/1/11-6/30/12)**

Representative Admission Matters:

1. The LAP' services included representation of two (2) individuals at formal admission hearings and ten (10) individuals receiving ongoing respite services during sixty respite stays including:
 - a. Monitoring SRC compliance with applicable due process standards related to the rights to an admission hearing provided under Maryland law and respite stays authorized by statute. Monthly, the number of active respite care averaged two individuals in care. The LAP advocated and obtained SRC development of written plans of care for extended respite stays consistent with due process standards. The LAP monitored accumulation of respite services by certain individuals to ensure compliance with the statutory maximum period for such stays and compliance with the rights that would attach by admission proceedings for individuals exceeding the maximum number of respite days allowed by statute; conferred with SRC staff and the Rights Advisor about any due process concerns.
 - b. Representing two clients at statutorily mandated hearings before an Administrative Law Judge to obtain judicial approval of the admission to the SRC recommended by the DHMH Secretary, after appropriate investigation, evidentiary hearing and due process.
 - c. Providing SRC and Community Resource Staff with historical information about prior legal proceedings and ongoing legal proceedings affecting individuals residing at Holly Center including guardianships, the guardian's proper role, and the effect of Court ordered admission on changes in placement.

Representative Annual Review Matters:

1. The LAP provided all clients at Holly Center with legal services related to their annual treatment plans including health care, vocational, and habilitation services, as follows:
 - a. Assisting the Rights Advisor in her investigation of grievance matters resulting in some instances in modification to the overall care or practice standards at the SRC for certain individuals, their standards or level of care, related to feeding issues, injuries, staffing, vocational and residential settings and assignments, personal rights including visitation, privacy rights, behavioral plans, and delivery of medical care in vocational settings as well as in the residence to the fullest extent practicable.

Representative Annual Review Matters *(continued)*:

- b. Communicating relevant information to the Rights Advisor for further action or investigation as developed from SRC data, reports, meetings, client, interested person, surrogate or guardian request, at request of SRC staff.
- c. Participating in the interdisciplinary team process related to development and implementation of annual plans adequate to meet each client's social, medical, psychological needs including appropriate vocational and social experience and/or an enhanced level of medical care or attention to medically fragile or infirm clients. Assuring the occurrence of interim team meetings when necessary to discuss and obtain input of team members related to service in the most or plan modifications when individual rights were potentially at issue. Tracking medical leaves from the SRC to hospital or other care settings to ensure continuation of services in the most integrated setting to the fullest extent possible consistent with any limitations imposed by the medical condition necessitating treatment in a more restrictive environment.
- d. Reviewing client medical, social, psychological, and related file data and records on a monthly basis to ensure implementation and compliance with annual plan requirements, and whether the Plan's objectives are being attained or advanced, by each of the treating disciplines.
- e. Promoting discussion between SRC staff and the Community Resource Advisor and other advocates about opportunities to meet the individual's needs in a more integrated setting, if practicable and appropriate for the individual client, whether vocationally, residentially, or both, as part of the recurring assessment of an individual's care needs.
- f. During this reporting period, the LAP also provided:
 - (i) comprehensive review of all client directed choice of residence at SRC and accessible services at SRC residences.
 - (ii) comprehensive review of guardianship status; i.e., person and/or property and the extent of authority granted under Court Orders including changes in placement and access to community resources; consultation with County Department of Social Services as the default "guardian"; review of legal pleadings and other court actions filed related to clients.

**Holly Center SRC
LAP Annual Report
(7/1/11-6/30/12)**

Representative Annual Review Matters *(continued)*:

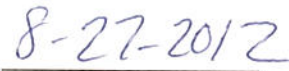
- (iii) advice to guardians, medical and care staff, and records' custodians about end of life care options, advance directives, court guardianship orders, and surrogate decision-making at the SRC and the effect on services provided at non-SRC facilities including emergency or more intense care settings such as hospitals; as well as opportunities for palliative care/end of life care models to be instituted for an individual receiving care at Holly Center.
- (iv) Consistent with changes in State Law and applicable regulations, the LAP is participating with social service and medical staff in a facility wide effort to obtain completion of Maryland Medical Orders for Life Sustaining Treatment (MOLST) on an individual's behalf by his/her attending physician or authorized practitioner. The Governor recently approved legislation passed during the 2011 legislative session that authorizes the development of a Medical Orders for Life-Sustaining Treatment form ("MOLST" form) to better implement the provisions of the Health Care Decisions Act. The MOLST Form used at the SRC was created through the joint effort of the Maryland Attorney General's Office, the Department of Health and Mental Hygiene, the State Advisory Council on Quality Care at the End of Life, and the Maryland Institute for Emergency Medical Services Systems.

Representative Release or Transfer Matters:

1. During the prior reporting period, four (4) individuals left care at the SRC for community placements after appropriate assessment and development of a plan to accomplish transition as part of a collaborative process utilizing the same team participation methods used in the annual assessment process at the SRC. In these cases, the LAP's role ensured that the individual's transition to a non-SRC setting was both one of his/her choice, included the guardian's participation (if applicable), and included appropriate levels of service to provide a foundation of probable success in the new placement. (For reporting purposes, transitions are included in the numerical count for clients served in annual re-evaluations.)



John P. Houlihan, Esquire
John P. Houlihan, P.A.
Legal Assistance Provider
Holly Center SRC



Date

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT
FISCAL YEAR ENDING JUNE 30, 2012
THE POTOMAC CENTER
Patricia A. Patton, 21 Summit Avenue
Hagerstown, MD 21740**

	No. of Clients Served	Total Hours
Admission Hearings	10	23.0
Annual Reviews	50	91.25
Petitions for Release	0	0
Transfer Hearings	2	2.0
Discharge Hearings	0	0
Deceased Clients	1	
TOTAL	55*	116.25

*Note: Some clients were represented at both an annual review and an admission/transfer hearing.

Patricia A. Patton

Date

LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT
FISCAL YEAR 2012

Sett Units (Jessup & Sykesville Locations)
Formally Known as Rosewood Center

Ria P. Rochvarg, P.A.
P.O. Box 1907
Ellicott City, Maryland 21041

	<u>Number of Clients Served</u>	<u>Total Hours</u>
Admission Hearings	0	
Annual Reviews	68	594.9
Petition for Release	1	32.4
Transfer Issue/Hearings	22	397.1
Discharge	12	216.6
Deceased Clients	0	
Total Number of Clients/Hours	68	1241.



Attorney's Signature

10/29/12
Date

Narratives

Annual Reviews

Client was committed to the Sett Unit for competency attainment, and evaluation pending 2nd Degree Assault Charges. While at Sett, LAP clarified the client's DDA eligibility, monitored the progress of the client, and ensured that the Treatment Team carried out all recommendations in a timely manner accordingly to the COMAR Regulations. As soon as the treatment team recommended that the client was ready to transition back into the community, the LAP worked with the Service Coordinator and Social Worker to facilitate the discharge process. Through the LAP's diligence, the LAP became aware that the client was unlawfully committed to the SETT Unit, and worked alongside the Public Defender and Treatment Team to expedite the corrective action. The client's charges were dismissed and the client was immediately discharged.

Petition for Release

Client was transferred from an MHA Facility to the Sett Unit, on an emergency basis, without a hearing on the proposed transfer. The LAP investigated the transfer and appropriately filed a Habeas Corpus for a violation of the client's right to a hearing. The LAP represented the client before the Circuit Court. The LAP spoke with the client regarding the transfer, and client reiterated his desire to be treated at the MHA facility. The Judge ruled in favor of the client to continue his treatment at the MHA facility and client was discharged from the Sett Unit and returned to the MHA Facility.

Transfer Issue/Hearings

A client had been residing on the Sett Unit for quite some time, due to her behavioral issues. The treatment team worked on developing and implementing a behavioral plan specifically for property destruction, verbal and physical aggression. The LAP monitored and advocated for the prompt implementation of the Individual Behavior Plan. Client was not able to meet outcomes and goals initially outlined in the new plan. However, once the Individual Behavior Plan was amended to include 1:1 therapy, the client's behavior began to dramatically improve. The LAP was in frequent contact the client's Service Coordinator and provided her with recent progress notes regarding client's change in her behavior. In addition, LAP conducted a Legal Case Review and noticed a Forensic Evaluation which indicated a change in client's legal status that could potentially change her commitment to the unit. LAP immediately contacted the Public Defender's office to advise, and offer assistance if warranted. Public Defender requested documentation, LAP received consent from the client, and said documentation was forwarded. At the hearing a 21 day Order was initiated. LAP monitored timeframe, and confirmed client was release to a less restrictive environment pursuant to court's order. Therefore, client was not illegally detained past the 21 day order.

Discharge

Client was found IST in 2004 and transferred to the Sett Unit following the closing of Rosewood Center in 2008. On February 24, 2012, the client was opined incompetent to stand trial, dangerous and unrestorable. At this time a 21-day order was submitted to the court. Through active correspondence with the treatment team and State's Attorney, the LAP was able to advocate for a less restrictive setting for the client. The client was transferred to Potomac Center following a competency hearing.

After a thorough review of a client's file it was notated that said client, had not had a hearing in a year and six months, despite his legal status of IST. The LAP immediately spoke with the Clerk of the Court, and hearing was docketed immediately. At the client's hearing, Ria P. Rochvarg, P.A., served as a "Friend of the Court" and offered valuable evidence regarding his treatment and progress. The client was discharged from the Sett unit in a swift manner to a group home, where he continues to reside.

Grievance

The LAP filed a grievance on behalf of the client, for which an individual behavior support plan was recommended but never written and implemented. The grievance was found valid at stage 1, and corrective action was prompted by the rights advisor. The lack of an expedited plan, despite prompting, moved the grievance to stage 2 and 3b. Despite the invalid report of the Unit Director, an individual behavior support plan was promptly written and implemented for the client at the conclusion of the grievance.

Deceased Clients

N/A

Admission Hearings

N/A