

Validation Survey Summary

Final Report

April 26, 2016

In March and April 2016, the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH) conducted a Validation Survey of group homes operated by a select group of licensed Developmental Disability Organizations (DDOs). The Validation Survey was precipitated by events that led to the recent closure of College Park, a group home operated by Rhode Island Community Living and Supports (RICLAS). The purpose of the Validation Survey was twofold: (1) to ensure the health and safety of Participants who are receiving residential supports throughout the DD residential service delivery system and (2) to determine if the issues that led to the closure of College Park were specific to the operation of College Park or systemic throughout the DD residential service delivery system.

The Validation Survey was conducted during a three (3) week time frame which began on March 28, 2016. The Validation Survey was led by the Office of Quality Assurance at BHDDH and conducted by staff from BHDDH (Office of Quality Assurance and Office of Facilities and Program Standards and Licensure) and two (2) staff on loan from the Department of Health (DOH). Oversight was provided by the Executive Office of Health and Human Services (EOHHS).

Group homes were selected for review during the Validation Survey based on the number of serious reportable incidents that were reported to the Office of Quality Assurance from January 1, 2015 through March 25, 2016. Fourteen (14) Developmental Disability Organizations (DDOs) were identified – thirteen (13) providers from the private sector and one (1) a state operated residential provider, RICLAS. A total of thirty (30) group homes, twenty-five (25) from the private sector and five (5) state operated RICLAS group homes were selected for review. The number of incidents per group home ranged from a high of thirty-six (36) to a low of twelve (12).

A Validation Survey tool was developed and utilized during this review. A copy of the Validation Survey tool is attached to this report.

The Validation Survey tool identified some of the regulatory requirements contained in the “Rules and Regulations for the Licensing of Developmental Disability Organizations” (DD Regulations) that are necessary to achieve quality care, included interviews with Participants, staff, as well as interviews with members of the Human Rights Committee (HRC) for each organization. Surveyors also reviewed Plans of Correction from previous Licensing Audits and Plans of Corrections and Incident Reports reported to the Office of Quality Assurance.

A weekly schedule was developed for the surveyors that included the surveyor service delivery location assignment and the HRC schedule. Surveyors were at each group home for two (2) to three (3) days. Each group home visit was unannounced. The surveyors were also given an emergency protocol sheet should any crisis situation occur or reports of abuse be made while performing the survey. At the end of each day, each surveyor gave a verbal update to the Administrator or the Associate Administrator of the Office of Quality Assurance.

The following is a list of the licensed DDOs and their respective group homes that were reviewed during the Validation Survey:

Seven Hills Rhode Island:	200 Pound Hill Road, North Smithfield
	41 Forestdale Drive, Cumberland
	94 East Killingly Road, Foster
	133 Mitris Blvd., Woonsocket
	3 Old Clark Road, Smithfield
Justice Resource Institute:	818 Dyer Avenue, Cranston, RI
RICLAS:	66 West Independence Way, S. Kingstown
	265 Hallville Road, Exeter
	551 Putnam Pike, Smithfield
	9 Wood Road, Wyoming
	2 Pasture Lane, Charlestown
Opportunities Unlimited for People with Differing Abilities:	13 Lawrence Street, West Warwick
J. Arthur Trudeau Memorial Center:	2001 West Shore Road, Warwick
	61 Titus Lane, Warwick
	233 Northbridge Avenue, Warwick
Perspectives Corporation:	2 Teaberry Lane, Hopkinton
	8 Brook Lane, West Warwick
	446 Moonstone Beach Road, Wakefield
	27 Whipple Drive, Charlestown
	1 Bear Swamp Road, East Greenwich
	185 Division Road, East Greenwich
West Bay Residential Services, Inc.:	6 Dawn Drive, Johnston

	22 Tartaglia Street, Johnston
Refocus, Inc.:	210 Olney Arnold Road, Cranston
James L.Maher Center:	100 Wood Street, Bristol
Looking Upwards, Inc.:	8 Willow Lane, Portsmouth
Gateways to Change, Inc.:	9 Woodcliff Avenue, North Providence
Ocean State Community Resources, Inc.:	150 Dartmouth Street, Pawtucket
The ARC of Blackstone Valley:	195 Manton Street, Pawtucket
The Fogarty Center:	22 Buratti Road, Johnston

Conference calls were arranged to conduct interviews with each HRC. This enabled HRC members to call in at their convenience so as not to disrupt their daily routines as the HRC is a volunteer committee. Members were provided with a specific time on a specific day during a two to three (2 – 3) hour time period to call in. Members of the HRCs were asked questions about the HRC roles and responsibilities and about each home that was surveyed. All interviewees stated they met regularly, review incidents, and review behavior support plans. All reported that follow-up is provided in cases.

The sample size of Participants interviewed was fifty percent (50%) of the Participants who live in each group home and the Participants were selected through a random sample (minimum number of Participants interviewed at each group home was three (3)). Overall, Participants expressed that they were pleased with their home, activities, day program and support staff. One (1) individual expressed boredom and that staff were always using their cell phone, two (2) individuals expressed that they would like a day program and one (1) individual expressed a desire to move to another home. *** Surveyors were not able to achieve all of the target goals for interviews with Participants because of the inability of some Participants to communicate or agitation/escalation for some Participants during the interview process.***

Staff interviews were conducted as well. The staff interviews were also chosen at random among all shifts. The amount of the staff interviewed was left to the discretion of each surveyor. As with the Participant interviews, overall, staff expressed that they felt positive about their work environments. Staff did express a desire for additional training and some expressed that additional staffing would be beneficial to assist them with providing better supports for the individuals they provide services for. Staff from six (6) different DDOs expressed dissatisfaction with communication with management.

A time study of staffing levels for each residence was also attempted for the time period March 1, 2016 through March 31, 2016. However, due to unreliable information contained in the databases at BHDDH a thorough, accurate time study could not be completed for each service delivery location.

During the Validation Survey numerous incidents were reported that had not been previously reported to the Office of Quality Assurance. Incidents ranged from serious medication errors, medical concerns (pressure sores, g-tube issues), unreported falls, verbal abuse, sexual abuse while at Ladd School, and financial exploitation. Each reported incident was entered into the Office of Quality Assurance database and triaged. Incidents were assigned to BHDDH staff for follow-up and/or further investigation when necessary.

Identified system issues found during this survey were:

- Outdated Individual Support Plans
- Lack of Documentation
 - Individual Support Plans not fully executed
 - Behavior Support Plans not fully executed
 - Lack of Consumer and Family Satisfaction surveys
 - Outdated face and emergency fact sheets
 - Lack of appropriate information on Human Rights Statements
 - Lack of social histories of Participants
 - Inappropriate use of “legal guardian” (signing ISPs) also no verification that an individual is Participant’s legal guardian
 - Lack of staff notes
 - Lack of Participant notes
 - Next of kin not identified
 - Participant Rights not contained in record with Participant’s signature
- Perceived staffing issues
- Medical concerns
 - Overdue physical exams (annuals, eye, dental, OBGYN)
 - Lack of name of Pharmacy contained in central record
 - Medication errors
 - Medication administration sheets not properly executed
 - Medications not stored and/or locked appropriately
 - Schedule 2 medications not appropriately stored and/or locked

Listed below is a breakdown of the findings of the Validation Survey:

5 of the 30 DDOs have Incident Reporting Issues

10 of the 30 DDOs have Participants in their programs that do not have current Individual Support Plans

15 of the 30 DDOs have Participants in which their Individual Support Plans are not fully executed

2 of the 30 DDOs have Participants in which their Individual Support Plan does not support the individual’s goals

9 of the 30 DDOs did not have individual Behavior Support Plans in central records

17 of the 30 DDOs did not have individual Behavior Support Plans that were fully executed

4 of the 30 DDOs did not have a Functional Analysis contained in Participants' records to support their Behavior Support Plans

3 of the 30 DDOs Participant records did not contain a medical care plan as indicated in their Individual Support Plan

14 of the 30 DDOs staff expressed that there were staffing issues at the group home

3 of the 30 DDOs lacked current assessments of Participants' ability to evacuate

3 of the 30 DDOs lacked PCP information in Participants' central records

1 of the 30 DDOs Participant's central record lacked the name and phone number of other relevant healthcare professionals

10 of the 30 DDOs failed to have medication orders currently filled

1 of the 30 DDOs failed to list Participant's diagnosis in the central record

9 of the 30 DDOs failed to obtain annual physical exams

9 of the 30 DDOs failed to obtain annual OBGYN exams

16 of the 30 DDOS failed to obtain annual eye exams

8 of the 30 DDOs failed to obtain annual dental exams

9 of the 30 DDOs failed to contain current physician orders in Participant's central record

4 of the 30 DDOs failed to have medications filled timely

9 of the 30 DDOs had medication administration concerns/issues

8 of the 30 DDOs had "other" medical concerns/ issues

28 of the 30 DDOs had a lack of documentation issues

4 of the 30 DDOs had a lack of shift notes

1 of the 30 DDOs had a lack of Participant notes

5 of the 30 DDOs had incident reporting issues

3 of the 30 DDOs failed to have a daily schedule posted

4 of the 30 DDOs failed to have a meal plan posted

1 of the 30 DDOs failed to have restraint reports

2 of the 30 DDOs failed to have a seven (7) day supply of food present in the group home

4 of the 30 DDOs failed to have an emergency supply of food

4 of the 30 DDOs failed to post the Participant Grievance Procedure

5 of the 30 DDOs failed to post the Code of Ethical Conduct

4 of the 30 DDOs failed to post the information on the QA/QI hotline

6 of the 30 DDOs failed to post the Participant Rights

1 of the 30 DDOs failed to lock medications properly

1 of the 30 DDOs failed to lock schedule 2 medications properly

5 of the 30 DDOs have Participants that expressed displeasure with their residential program

6 of the 30 DDOs have staff persons that expressed concerns with management

3 of the 30 DDOs failed to have clean, odor free and sanitary homes

Next Step:

The Office of Quality Assurance will notify each DDO of the findings pertaining to its group homes and request written Plans of Correction to be submitted to BHDDH within thirty (30) days of receipt of the findings.

PARTICIPANT INTERVIEW:

What activities do you do during the day?

Do you like these activities? (If no ask why)

Are there any other activities you would like to do?

What activities do you do on the weekends?

Do you like these activities? (If no why)

Are there any other activities you would like to do on the weekends?

How does staff help you? Do you want more help/less help? Why?

STAFF INTERVIEW:

How long have you worked for this agency? _____

What Training have you received?

What is the protocol when an incident occurs?

What is the protocol when a restraint is utilized?

What is the name and phone number of the professional nurse?

What shift do you typically work?

How many staff members work your typical shift?

Do you feel there is adequate staffing in the home? Why?

Is there a daily schedule? What does the schedule consist of?

What are your responsibilities while on your shift?

Do you have the opportunity to meet with supervisors/managers to discuss concerns and give input?

Do you feel your voice is heard? Why?

If you have had an issue at the workplace do you feel appropriate action was taken?

Human Rights Committee Interview:

Agency: _____

Name: _____

Date: _____

What is your role and responsibilities as a member of the Human Rights Committee?

How often does the Human Rights Committee meet?

What does a typical Human Rights Committee Meeting consist of?

Are incidents within the agency reviewed at this meeting?

What is the process for reviewing incidents?

Are incidents followed up on? How, what is the process?

SURVEYOR SIGNATURE _____

DATE _____