



FOR IMMEDIATE RELEASE:

August 6, 2013

CONTACT:

Haley Turner, Advocate Supervisor

512-407-2714

hturner@drtx.org

**AFTER FOUR YEARS, SAN ANTONIO FACILITY STILL FAILS TO COMPLY WITH
MOST CRITICAL HEALTH AND SAFETY REQUIREMENTS
RESIDENTS REMAIN AT HIGH RISK FOR ABUSE AND NEGLECT**

SAN ANTONIO, TX—According to the latest U.S. Department of Justice (DOJ) monitoring report for the San Antonio State Supported Living Center (SASSLC) operated by the Texas Department of Aging and Disability Services (DADS), the facility remains out of compliance in 117 out of 171 areas *after four years of efforts to improve*. The facility's current overall compliance is 28.03 percent. The deadline for 100 percent compliance for this facility and all SSLCs in Texas was June 26, 2012 – more than one year ago.

“If a prospective doctor or attorney incorrectly answered more than half of the questions on their licensing exam, no one would think twice about not allowing them to practice. And yet the state allows these digressing facilities with less than 27 percent compliance to be responsible for the basic health and safety needs of a vulnerable population of people,” said Haley Turner, advocate supervisor for Disability Rights Texas (DRTx), the federally designated legal protection and advocacy agency for Texans with disabilities. “The deadline for 100 percent compliance was over 12 months ago, and it causes us grave concern that all SSLCs in Texas are *still* significantly behind where they should be in improving the protections, supports and services they provide to individuals under their care.”

According to the current DOJ report, major areas of failure for the San Antonio SSLC in Settlement Agreement Provisions include:

- The facility still needs to ensure that all restraints are correctly identified, documented, monitored, and reviewed.
- There was one confirmed case of physical abuse, one confirmed case of sexual abuse, and 20 confirmed cases of neglect.
- An additional 44 other serious incidents were investigated by the facility, all involving serious injuries.
- There were 1017 injuries reported between 9/1/12 and 2/28/13 including 20 serious injuries resulting in fractures or sutures.
- The monitoring team could not determine how, when, or if the majority of Corrective Action Plans (CAPs) were or were not implemented.
- Individual Support Plans (ISPs) that teams had spent hours developing were not accessible to staff responsible for implementing the plan. ISPs were out of date in a majority of the individual records reviewed.
- In the provision area of Minimum Common Elements of Critical Care, ***no progress was observed***. There was no facility policy and the monitoring team did not find any specific planning on the part of the facility that would result in any substantive progress.
- Teams were often waiting until a critical incident occurred or until the annual Interdisciplinary Team (IDT) meeting before aggressively addressing the risk.
- A sample of individual records was reviewed in various homes at the facility, and Integrated Health Care Plans (IHCPs) were not found in any of the 27 individual notebooks reviewed.
- The psychologists continued to remain the responsible party for the majority of the informed consents for prescription of psychotropic medication. This needs to be changed.

- The medical department did not make a great deal of progress since the last compliance review. There appeared to be some level of regression in documentation of many areas, such as acute medical problems and hospital follow-up.
- The number of neurology clinic hours was inadequate to meet the needs of the individuals.
- Mortality management remained problematic at SASSLC. There continued to be no organized process for ensuring implementation and follow-up of corrective actions.
- Review of compliance in the Medical Care area was impeded by problems related to the provision of the requested documents. Several active records requested were never provided.
- After more than two years of encouraging the facility to fully reconcile medications, it was discovered that a significant number of medications could not be reconciled.
- There continued to be some inconsistencies on Dining Plans and PNMPs, some critical to staff accuracy of implementation. Review of these plans is needed in order to make corrections in a timelier manner.
- There was minimal progress in the provision of dental services since the last compliance review.
- IDTs continued to need training to determine each individual's functional capacity to render informed decisions.

Visit <http://www.dads.state.tx.us/monitors/reports/index.html> for view the latest DOJ monitoring reports for SSLCs in Texas. For additional information on how all the state supported living centers are performing, visit the Disability Rights Texas onsite Press Room at www.disabilityrightstx.org/who-we-are/press-room/.

###

Disability Rights Texas (formerly named Advocacy Inc.) is a nonprofit organization that protects and advances the legal, human and service rights of Texans with a broad range of disabilities. Disability Rights Texas is federally funded and designated as the protection and advocacy agency (P&A) for the state of Texas.