



FOR IMMEDIATE RELEASE:

August 6, 2013

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**AFTER FOUR YEARS, FACILITY IN CORPUS CHRISTI STILL FAR FROM REACHING
CRITICAL GOVERNMENT COMPLIANCE REQUIREMENTS**

RESIDENTS REMAIN AT HIGH RISK FOR ABUSE AND NEGLECT

CORPUS CHRISTI, TX—According to the latest U.S. Department of Justice (DOJ) monitoring report for the Corpus Christi State Supported Living Center (CCSSLC) operated by the Texas Department of Aging and Disability Services (DADS), the facility remains out of compliance in 128 out of 171 areas *after four years of efforts to improve*. The facility achieved nominal progress since its last review in July 2012, with current overall compliance moving from 18.24 to 20.75 percent. The deadline for 100 percent compliance for this facility and all SSLCs in Texas was June 26, 2012 – more than one year ago.

Current total compliance for all facilities in Texas is less than 29 percent.

“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.”

One particularly alarming problem highlighted in the DOJ’s latest report on the CCSSLC is the Facility’s handling of death reviews. In 2012, 14 individuals died. The CCSSLC often did not conduct a critical review of information leading to recommendations aimed at making systemic improvement. Another major concern is the lack of follow-up to recommendations from the administrative death reviews. Some of the recommendations had system implications, but were not implemented and monitored until completion.

According to the current DOJ report, other major areas of failure for the Corpus Christi SSLC in Settlement Agreement Provisions include:

- There was an overall lack of progress found regarding the nursing care plans, the nursing assessments and documentation in response to changes in health status, and the actual implementation of nursing protocols.
- Excessive unexplained medications being returned to the Pharmacy were very concerning at this juncture in the review process.
- There was little evidence of analysis of available data that led to changes in systems to improve medical services.
- Improvements are necessary in the area of Abuse, Neglect and Incident Management for the facility to progress toward substantial compliance including:
 - Addressing problems with timeliness of completion of Unusual Incident Reports.
 - Developing and implementing a semi-annual audit of injuries.
 - Providing for follow-up on recommendations from investigative reports, and document them to conclusion, including a check to assure that the desired outcome has been achieved.
 - Expanding the analysis and trending of data to determine where corrective action plans might be needed to address emerging trends in abuse/neglect findings.
- Teams were not yet effectively incorporating individuals’ preferences and strengths into action plans, or using them creatively to expand individuals’ opportunities or address their needs.
- Prioritization of individuals’ needs was not evident in the Individual Support Plans (ISPs) or ISP Preparation Meeting documentation reviewed.
- ISPs generally continued to lack measurable objectives necessary to determine whether or not the supports and strategies were having the desired outcome.
- Medical annual assessments and quarterly medical reviews remained noncompliant.

- Limited progress was noted in the timely completion of psychological assessments for newly admitted individuals, as well as in the provision of counseling supports to individuals referred for counseling.
- The provision of adequate training across the Facility for the behavioral programming of most individuals remained inadequate.
- A review of individuals' Physical and Nutritional Management Team (PNMT) assessments, Individual Health Care Plans (IHCPs), and Physical and Nutritional Management Plans (PNMPs) identified multiple missing essential components.
- Staff often did not follow prescribed PNMP strategies, which had the potential to place individuals at risk.
- Dental Department and Psychology Department had different lists of those individuals who might benefit from dental desensitization programs. This was a step that already should have been resolved.
- The Facility did not have a policy for monitoring communication supports. The Facility had identified that the monitoring data it was collecting was not reliable.
- Individuals transitioning to the community were potentially at risk due to the lack of adequately planned and implemented protections, services, and supports.

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/.

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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.