

Office of the
Independent Ombudsman
for State Supported
Living Centers



2018

Biannual Report

January through June



OFFICE OF THE INDEPENDENT
MBUDSMAN
for State Supported Living Centers

Table of Contents

Executive Summary	2
Introduction.....	4
Mission and Principles.....	4
Duties and Activity of the Office.....	5
Investigations.....	7
Referrals	8
Incident Review	9
Advocacy.....	10
Program Review	11
Central Office.....	12
Abilene State Supported Living Center	14
Austin State Supported Living Center	16
Brenham State Supported Living Center.....	18
Corpus Christi State Supported Living Center	20
Denton State Supported Living Center.....	21
El Paso State Supported Living Center	22
Lubbock State Supported Living Center	24
Lufkin State Supported Living Center	26
Mexia State Supported Living Center.....	28
Richmond State Supported Living Center	30
Rio Grande State Center.....	32
San Angelo State Supported Living Center.....	34
San Antonio State Supported Living Center	36
Appendix: HEARTS Data.....	38
Appendix: Demographics of the SSLC population	41
Appendix: Certified Person-Centered Thinking Trainers.....	42

Executive Summary

The Office of the Independent Ombudsman for State Supported Living Centers (OIO), established by the 81st Legislature, is required to issue a biannual report on the scope and activities of the Office. This report reflects that charge from January 1, 2018 through June 31, 2018. The Office was created to protect the rights and welfare of residents and families of the 12 State Supported Living Centers (SSLCs) and the ICF component of the Rio Grande Center. The enabling legislation mandates that this report provide details of the activities of our office in an aggregate and disaggregate format regarding the types of concerns that the office handles at each center. In each center's section is a summary of the activities at each center during this reporting period.

The residents of the state supported living centers many times present challenging and complex issues be they health concerns, significant behavioral challenges, and the complex issues which are the result of the aging of the population. These concerns accentuate the role of the ombudsman as they provide comfort, protections, and act as a resource to the residents and their families.

The analysis of our current data shows a significant increase in the total number of contacts to our office during this bi-annum. This is notable in that there has been a decrease in the total number of residents. Our analysis has revealed several factors that may contribute to the increase during this reporting period. We have been fully staffed at all centers during the reporting period. The presence of the AIOs at the centers interacting with residents and with staff has engendered and strengthened a more trusting relationship so that issues are more readily being brought to the AIO's attention. This last point is borne out by the significant increase of concerns being brought to us by residents, as shown in this report. Lastly, the AIOs have been more deliberate in documenting concerns that are not within the scope of our responsibilities and are referred to the appropriate entity or administrative office. These include issues related to personnel concerns, issues referred to the Long-Term Care Ombudsman and the HHSC Ombudsman, or issues related to community or group home residents.

Senate Bill 643, Section 555.056(a)(3) states that our report should include "any recommendations that the Independent Ombudsman has in relation to the duties of the Independent Ombudsman..." Pursuant to this charge, past reports have included recommendations that bear repeating once more. These include:

- 1) As the Legislature prepares to meet in the coming session, it is essential that additional protections and advocacy for individuals in community-based settings be provided. As stated, our office is increasingly being contacted by people with questions or matters that arise outside of the current population that we serve, including this group of vulnerable citizens of our state.
- 2) An independent ombudsman for patients of the state hospitals should to be appointed so that people being served at all state supported institutions are provided the same independent oversight, protection, and advocacy.

- 3) To respond to the Center for Medicare and Medicaid Services guidelines, implementation of Person Centered Practices throughout the service delivery system of HHSC needs to be assured, especially for the residents of the SSLCs.

My thanks to Gov. Gregg Abbott and his staff for their support and confidence. My gratitude to recently retired Health and Human Services Executive Commissioner Charles Smith for his encouragement and support for the work of our office.

Respectfully Submitted,

A handwritten signature in blue ink, reading "Dr. George P. Bithos". The signature is fluid and cursive, with a long horizontal line extending to the right.

George P. Bithos D.D.S., Ph.D.
Independent Ombudsman for State Supported Living Center

Introduction

The Office of the Independent Ombudsman for State Supported Living Centers (SSLCs) was established for the purpose of investigating, evaluating, and securing the rights of residents of state supported living centers and the ICF-IDD component of the Rio Grande State Center. Pursuant to the mandate of Senate Bill 643 of the 81st Legislative session, the Office is required to report biannually to the Governor and the legislative leadership.

The Health and Human Services Commission (HHSC) provides specialized assessment, treatment, support, and medical services at state supported living centers and programs for people with intellectual and developmental disabilities. The 12 state supported living centers (SSLCs) and the Rio Grande State Center (ICF/IDD component) provide 24-hour residential services, comprehensive behavioral treatment services and healthcare services, including physician, nursing and dental services. Other services include skills training, occupational, physical and speech therapies, vocational programs and employment, and services to maintain connections between residents and their families/natural support systems.

Mission and Principles

The mission of the Office of the Independent Ombudsman (OIO) is to serve as an independent, impartial and confidential resource, assisting residents, their families and the public with services and related complaints and issues, which deal with the SSLCs. The Office prescribes to six principles as a foundation of practice.

Independence

The Office is impartial and independent in structure, function and appearance to the highest degree possible. The Office reports directly to the state's elected leaders in the executive and legislative branches. The employees of the Office do not act as agents of HHSC and do not hold positions within the agency that present a conflict of interest. The Office exercises sole discretion over whether or how to respond to a concern, except as directed by state law.

Flexibility

As the ombudsmen act according to standardized procedures, the Office exercises a flexible approach to meet the needs and requests for assistance in serving residents of SSLCs.

Accessibility

The Office is accessible to residents, family members, staff members or other interested parties. An Assistant Ombudsman has an office at each facility and can be contacted via email, fax, telephone, mail or in person at each state supported living center. The Office maintains a toll-free number and a comprehensive web presence to continuously seek innovative avenues to increase awareness and approachability.

Confidentiality

The Office respects the confidentiality of the resident, family member(s), the SSLC staff or other involved party, as well as associated records and documents. The Office is not required to notify HHSC or the SSLC administration of communications made to the Office.

Integrity

The ombudsmen will maintain the highest level of professionalism in demeanor as evidenced by consistently displaying honesty, truthfulness, fairness and ethical behavior.

Credibility

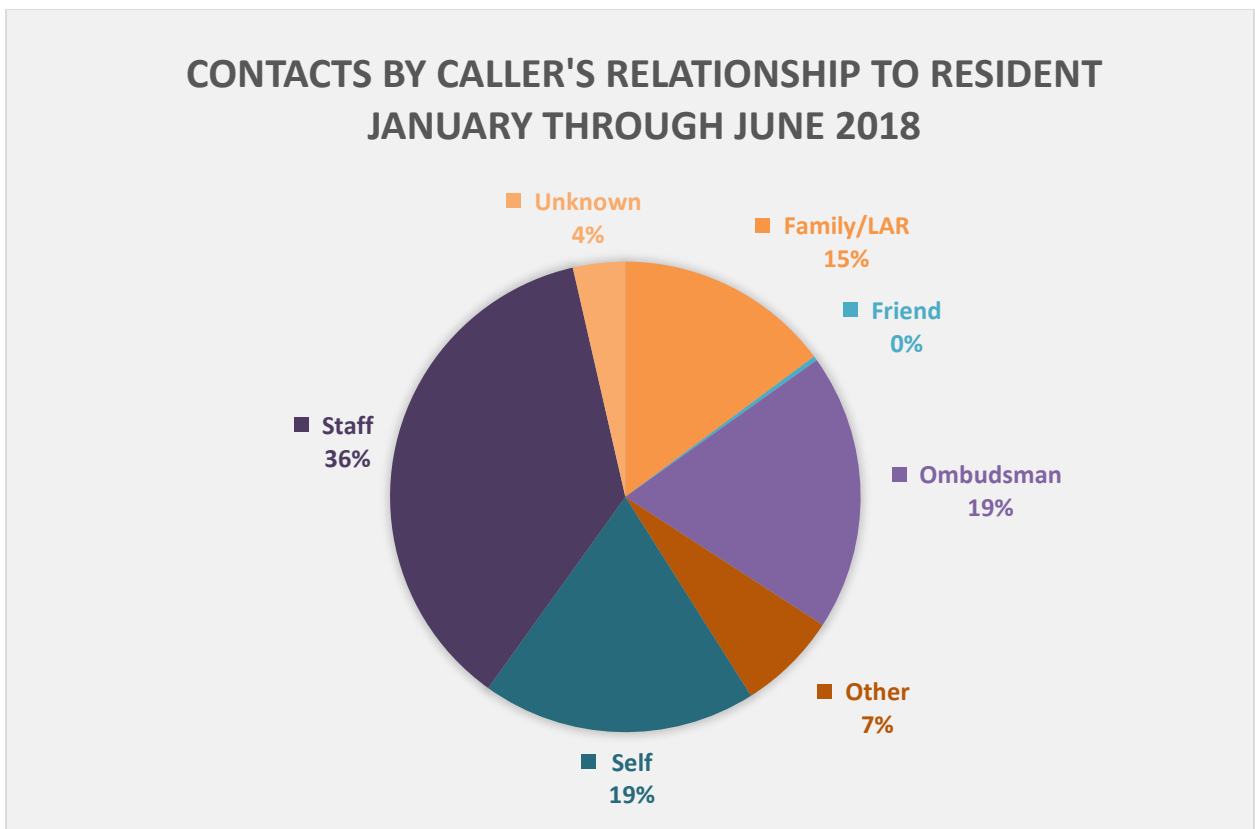
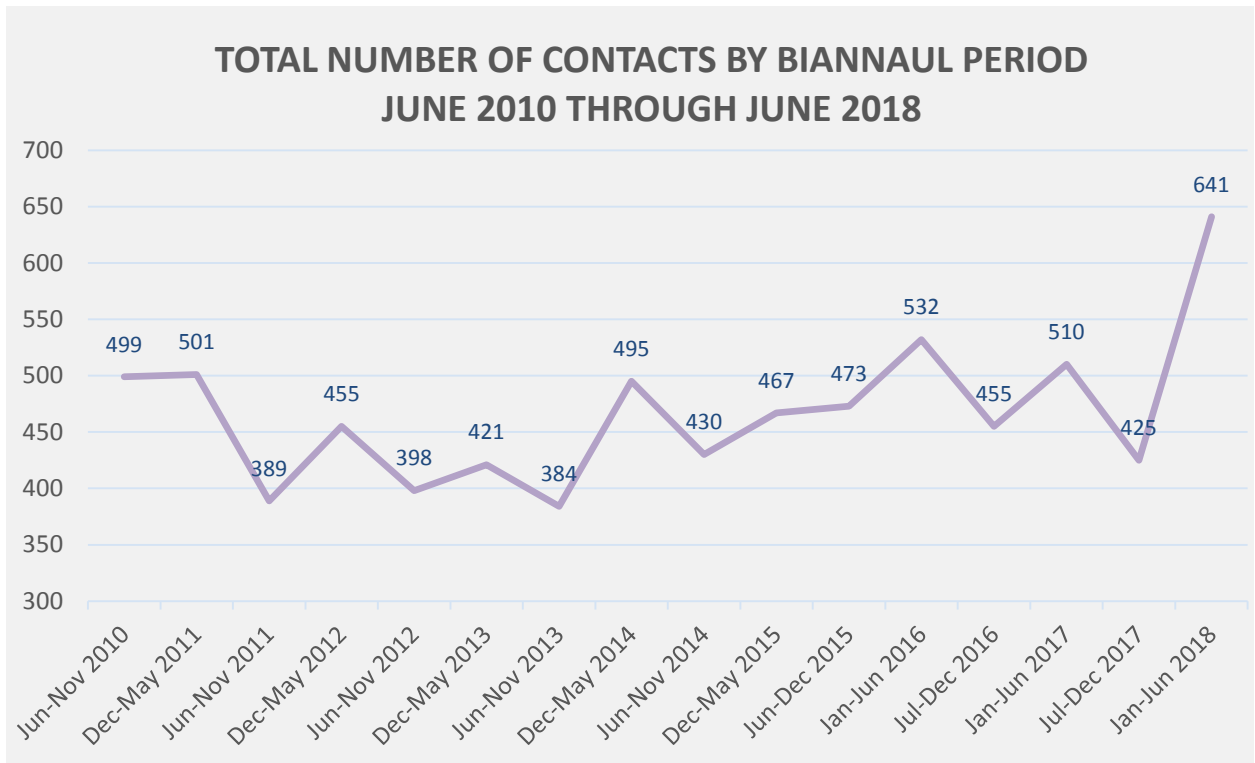
The Office maintains a reputation that is credible among residents, family members, advocates, staff, the legislature and general public of the state.

Duties and Activity of the Office

The duties and powers of the Independent Ombudsman are mandated by Texas Health and Safety Code, Title 7, §555. This statute provides the Independent Ombudsman with the ability to hire an Assistant Independent Ombudsman (AIO) at each SSLC. There is also an AIO at central office responsible for managing the required audit (referred to as Program Review), as well as training. The AIOs have the same duties and powers as outlined for the Independent Ombudsman. In addition to the Independent Ombudsman and Deputy Independent Ombudsman, there is administrative staff at central office to support operations.

Being visible and engaged in the operations of the SSLC is the hallmark of the AIO's role. The AIO at each center provides meaningful input, collaboration, and expertise on a routine basis in many ways, which includes recommendations made to the administration of the SSLC. Although it is a challenge to identify and record every instance in which the AIOs advocate on behalf of a resident or influence change at the SSLCs, when a concern is identified, the AIO completes an investigation and documents the activity of each case in the HHS Enterprise Administrative Report & Tracking System (H.E.A.R.T.S.). The HEARTS database serves as a permanent record of all contacts and allows the office to document significant action taken by the AIO. The documentation and information shared with the AIO is confidential by statute. The data collected in HEARTS is utilized for trending and reporting. Since the conception of the Office in 2010, a total of 7,475 contacts have been recorded.

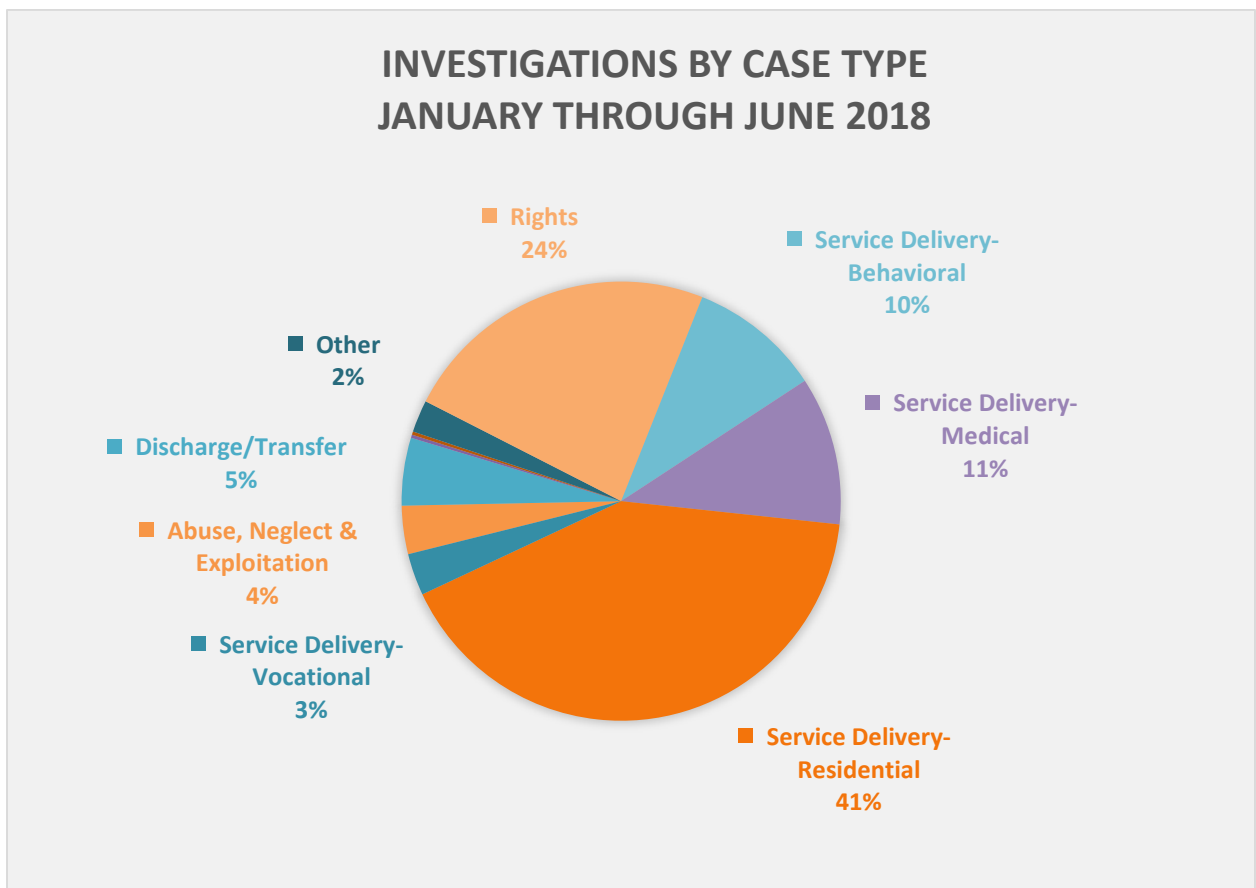
Over the six-month biannual period from January through June 2018, the AIOs recorded a total of 641 contacts. There has been a significant increase in the number of contacts since the previous biannual period and the most contacts ever recorded in a biannual period. The highest number of contacts were made from staff members of the SSLCs. There were 234 cases where staff members contacted the Assistant Independent Ombudsman. The ombudsmen initiated 122 of the recorded contacts and there were 121 contacts made by the residents advocating for themselves. In the previous biannual period reported in January 2018, there were 69 contacts made by the resident and 92 made by the Ombudsman.



Investigations

The AIOs follow standard investigative procedures for complaints in proportion to the circumstances presented. The extent of an investigation is determined by the AIO, which may include collecting evidence in various forms such as photos, video surveillance, interviews, inquiries, observations and documentation review. The findings are provided to the SSLC Director or designee with recommendations to improve services and the lives of those living at the SSLCs. The AIO then monitors the facility's efforts to address the concerns and recommendations.

In total, AIOs investigated a total of 421 complaints in this biannual period. Most of the complaints investigated were regarding residential service delivery, with 174 complaints. AIOs also investigated 99 complaints regarding rights, 46 complaints regarding medical service delivery, and 41 complaints regarding behavioral support services. Complaints related to abuse, neglect, or exploitation (ANE) were investigated on 15 occasions. AIOs may investigate complaints related to ANE allegations however the investigation focuses on SSLC policies, procedures, practices, or may involve concerns about investigations completed by the Texas Department of Family and Protective Services.



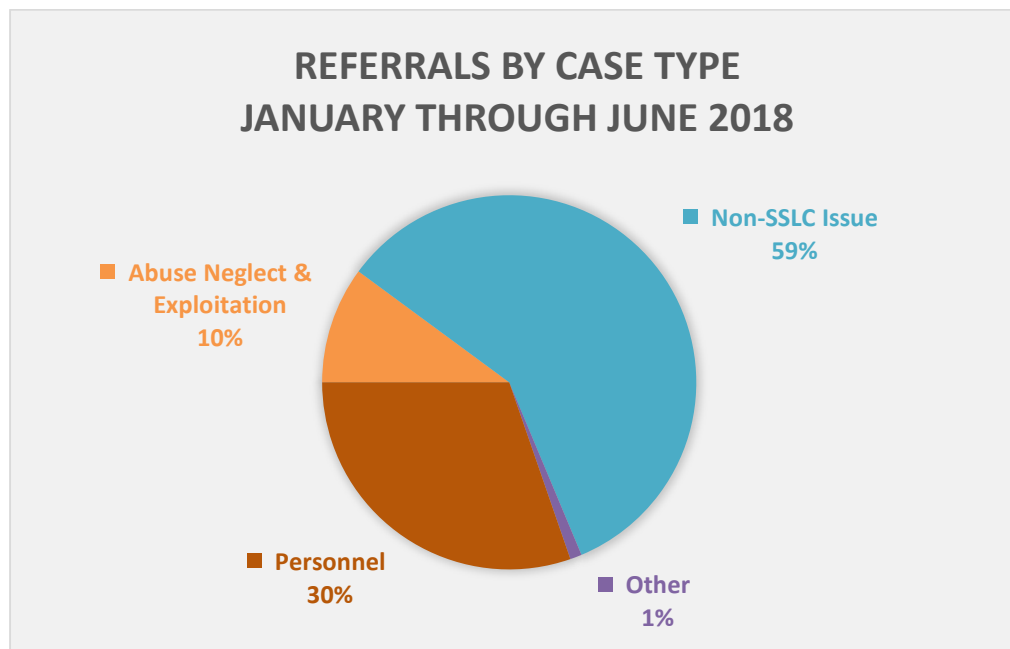
Referrals

When contacted, the AIO determines whether efforts to resolve a concern are within the scope of the OIO duties or if a referral to another entity is appropriate. Human Resource matters are outside of the scope the Office and all personnel matters are referred to HHSC Human Resources. The Office is also contacted frequently regarding issues not involving an SSLC.

When an AIO receives a complaint of ANE the ombudsman informs the complainant that the communication must be shared with the Texas Department of Family and Protective Services (DFPS), and the AIO makes a report to DFPS immediately. The AIO will then communicate to the SSLC director or designee the basic nature of the ANE, name of the alleged victim, and the name and work location of the alleged perpetrator. The AIO reviews the final report of the investigation following the DFPS referral to ensure that the complaint was given due diligence.

Upon receiving a complaint that involves employee misconduct or a possible violation of licensing standards, the AIO takes steps to ensure the problem is addressed by treating it as a complaint and providing recommendations. Should the AIO find that the facility has not addressed the issue satisfactorily or that the potential for serious harm still exists, the AIO will refer the issue to HHSC Regulatory Division. Likewise, upon receiving notification of criminal activity, the AIO notifies the Independent Ombudsman or Deputy Independent Ombudsman who, then reports the activity to the Office of the Inspector General (OIG). There were no referrals made to Regulatory Services or to the OIG during this period.

There has been a total of 99 referrals in the current biannual period, including complaints, consults, and inquiries. Referrals that were outside the scope of duties of the AIO were personnel issues (30), inquiries not related to residents of the SSLCs, such as long-term care (58) and concerns that raised a suspicion of abuse or neglect that were reported to DFPS (10).

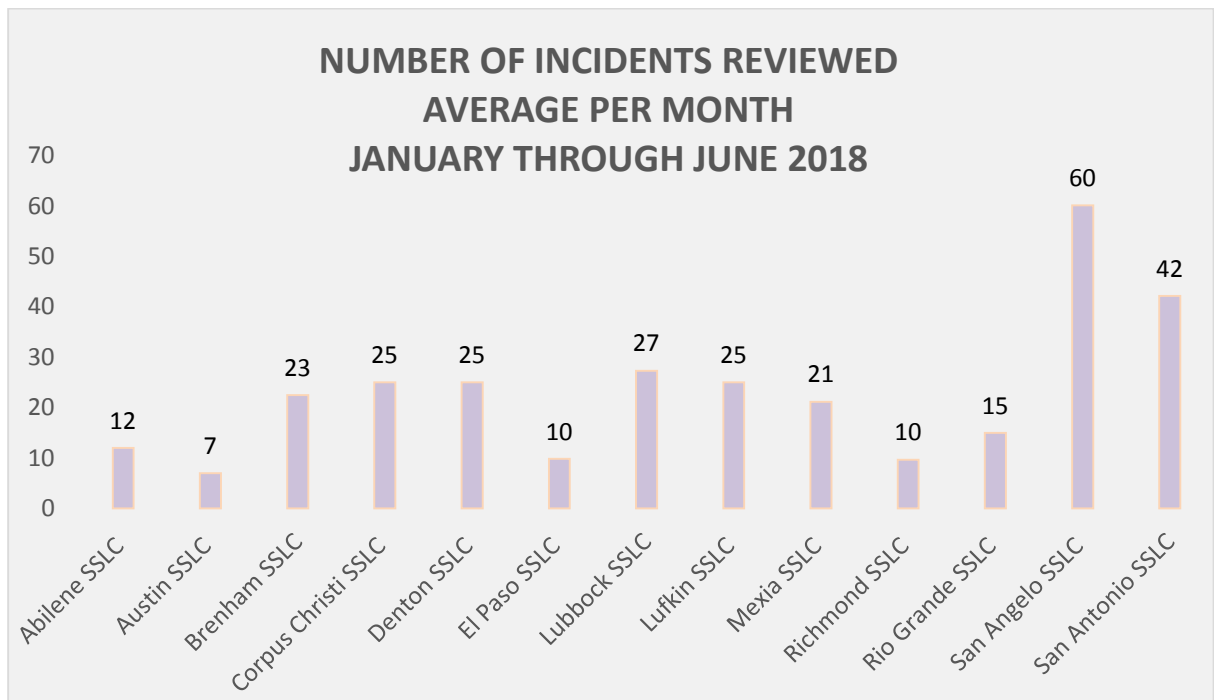


Incident Review

The statute that authorizes the Office to investigate complaints at SSLCs also defines the responsibility of reviewing incident investigations completed by the SSLC and other entities. An unusual incident is defined by HHSC as “an event or situation that seriously threatens the health, safety or life of individuals.” There are eleven types of unusual incidents ranging from choking incidents, to allegations of abuse, to deaths. The AIO is provided the final reports of unusual incidents, ANE allegations, criminal activity, and ICF standard violations by the SSLC.

To evaluate the center’s investigative process, the AIO reviews whether the investigation is complete, protections for residents are adequate, recommendations are addressed completely and within a reasonable timeframe, and preventative measures are considered. The AIO also looks for any reoccurring theme or trend in incidents revealing a systemic issue and other concerns related to services, staff, training or rights.

When a concern is noted, the AIO provides a written explanation of the concern and any recommendations to the designated SSLC liaison. The AIO tracks recommendations from final reports and monitors the facility’s efforts to implement them for an amount of time determined by the AIO.



Advocacy

The ombudsman determines if a resident, family member or LAR is in need of assistance, including advocating with an agency, provider or other person in the best interests of the resident and making appropriate referrals. This may entail attending Interdisciplinary Team (IDT) meetings, medical appointments or any special intervention determined by the circumstances. The ombudsman serves as a resource and provides information about the rights of SSLC residents to all interested parties. The Office encourages residents to express their concerns about treatment and services received at the SSLC and supports an environment that promotes self-advocacy and encourages communication between residents, family, facility staff and administration.

The ombudsman monitors activities in homes and meetings, such as planning meetings, incident management meetings, restraint reduction meetings, Human Rights Committee meetings or other instances in which relevant issues may be discussed. In addition to working on specific concerns, AIOs periodically attend IDT meetings to evaluate program service planning in general. AIOs documented attended 388 meetings in this reporting period, averaging five meetings per month each.

In Senate Bill 643, legislation requires residents admitted under criminal commitment be evaluated upon admission to determine whether they pose a high risk of harm to others, and if deemed high risk, the individual is evaluated on annual basis. This high-risk determination (HRD) process occurs at Mexia SSLC and San Angelo SSLC where all criminal court-committed residents are initially admitted. A resident who has been designated as high-risk results in a more restrictive living environment and has the right to appeal this decision. The AIO approaches each resident to offer advocacy and guidance throughout this appeal process. Our Office continues to work with HHSC Legal and advocate groups to be a resource to the residents.

The OIO continues its commitment to provide a service that is person centered. All AIOs received training and coaching to utilize a person-centered thinking (PCT) approach. Moreover, there are seven staff members, including the Independent Ombudsman and Deputy Ombudsman, who are certified PCT trainers. PCT trainers assist the HHS Person Centered Practices initiative by facilitating training throughout the state. The current Centers for Medicaid and Medicare Services rules require person-centered practices to be provided to anyone receiving long term-care services. Federal guidelines and state law direct this paradigm shift and the Office is committed to being a PCT resource for the residents of the SSLCs, staff, family, and the community.

Program Review

The Office is legislatively mandated to conduct annual on-site audits, referred to as Program Review, to identify isolated incidents or systemic issues in the areas of:

- ratio of direct-care employees;
- adequacy of staff training;
- and ensuring that residents are encouraged to exercise their rights and are afforded due process.

The audit, or Program Review, consists of conducting on-going monitoring and data collection throughout the year, in addition to an on-site review at each center annually. The data is collected by: reviewing center policies and resident records, obtaining staff and family/guardian surveys, conducting observations, and completing staff and resident interviews. All the data is analyzed and presented in the Annual Report which identifies outcomes of the review by center, and aggregately, and includes recommendations derived from the information collected.

Recommendations from the [2017 Annual Report](#) include:

- **Staffing Ratios:** Reviewing/developing statewide and local recruitment strategies to hire direct support staff; SSLC state office and individual centers analyze staff deployment strategies; and securing additional legislative funding for center staff to ensure each residents' needs are met.
- **Staff Training:** Creating/implementing a competency-based on-the-job training program and standards; developing/implementing statewide and/or locally mandated training on how best to support residents who may be alleged offenders, including alleged sexual offenders, adolescent, and geriatric individuals; and delivering training in an interactive method to optimize staff learning.
- **Rights and Due Process:** SSLC State Office develop formal processes to ensure centers are complying with the statewide Rights Policy; educating residents, guardians and support staff on how to file a complaint; making a concerted effort to ensure residents are at the center of all service planning; and developing a plan to ensure that consent for any rights restrictions, including restrictive behavior plans, is obtained prior to HRC review and implementation.

Findings and recommendations for the current 2017- 2018 reporting period will be reflected in the 2018 Annual Report and will be published and available on the [OIO website](#) in February 2019.

Central Office

George P. Bithos, D.D.S., Ph.D,
Independent Ombudsman for State Supported Living Centers



Dr. George Bithos attended The University of Texas and graduated from Southern Methodist University with a Bachelor of Science in biology and anthropology. After practicing reconstructive dentistry for 28 years, Bithos retired to change the direction of his life. He read for a PhD in theology and history at the University of Durham in Great Britain. After earning his degrees, he worked in academia in Boston. In 2004, he returned to Texas to become the executive director of the Texas Conference of Churches. Bithos was appointed the independent ombudsman for SSLCs in February 2010 by Governor Perry. Dr. Bithos is a certified Person-Centered Thinking Trainer and coach with The Learning Community for Person Centered Practices.

Candace Jennings, MPA
Deputy Independent Ombudsman

Candace Jennings earned her undergraduate education in Social Work at Southwest Texas State University. While attending college in San Marcos, she began serving people with developmental disabilities as a direct support specialist. She then gained professional experience in Bexar County as an investigator for child protective services and service coordinator and manager at the local authority. She also held the positions of rights protection officer and assistant ombudsman at the San Antonio State Supported Living Center. In 2008, she earned a Master of Public Administration degree at University of Texas at San Antonio. Ms. Jennings is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices. As Deputy Independent Ombudsman, she seeks to support the OIO by leading with compassion and integrity, expecting that the lives of SSLC residents will be positively impacted by the OIO.



Carrie Martin
Assistant Independent Ombudsman



Carrie Martin has over 10 years of experience pursuing social justice issues and over five years of experience providing advocacy, direct care and services for adults, the aging and children with disabilities. She has a consistent record of advocating for underserved populations including: providing vocational training and employment services at a residential training facility, working with special education students, ensuring due process for indigent defendants, and performing administrative operations and internal auditing for a foster care/adoption agency. Mrs. Martin has specialized education and experience in data management, training and organization development, and program management. As the central office AIO, Mrs. Martin serves as the program manager for Program Review and provides operational support for the office. Mrs. Martin completed graduate coursework in Organization

Development at St. Edward's University, earned her Bachelor of Science in Criminal Justice from Texas State University. She accepted the position of Assistant Independent Ombudsman for central office in November 2014.

Kenn Purcell

Administrative Assistant to Dr. Bithos

Kenn Purcell joined the United States Navy and worked first as an Operations Specialist (Radar Operator) within the Combat Information Centers of four ships; USS Clark, USS Estocin, USS Patriot, and USS Scout. Kenn later transitioned to the Naval Intelligence branch as an Intelligence Analyst. During the time he served onboard the USS D. D. Eisenhower, US Central Command HQ, US Pacific Command HQ Joint Intelligence Center, and the U.S. Embassy, Kuala Lumpur, Malaysia. After serving in the US Navy for 20 years, Kenn was honorably discharged and retired to a life on the shore. He joined Northrup Grumman, as an Analyst, team lead and trainer for five years. From both military and civilian sectors, Kenn Purcell brings over 10 years administrative experience to the team. Kenn came aboard the Office of the Independent Ombudsman team in February 2018, where he serves as the Administrative Assistant to Dr. Bithos and his team.



Courtney Harris

Administrative Assistant

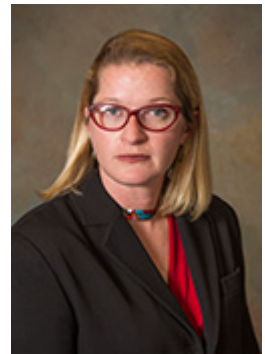


Courtney Harris worked in hospitality and business management before starting her tenure with the State of Texas. Ms. Harris began her career with the State of Texas in 2015. Courtney has held multiple positions within the HHSC family as well as an adventure at the Texas Parks and Wildlife Department as an Office Manager in the park headquarters. She recently joined the Office of the Independent Ombudsman in November 2017 as an administrative assistant. Her administrative experience spans over 10 years. She is currently pursuing her B.A. degree in Psychology and in the future plans to work more closely with individuals who are living with psychological disorders.

Abilene State Supported Living Center

Jill Antilley

Assistant Independent Ombudsman



Jill Antilley has worked for the Abilene State Supported Living Center for over 16 years. Her career began in the Recreation Department as a direct-care staff in 2000 while attending college at Hardin Simmons University (HSU). Ms. Antilley graduated from HSU in 2000 with a bachelor's degree in police administration and went to work for a juvenile correctional facility as a case manager and as a juvenile probation officer. Antilley returned to the Abilene SSLC in 2002 to serve as a qualified developmental disability professional and as the human rights officer, before accepting the position as the assistant independent ombudsman in 2010. Ms. Antilley is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

The Abilene State Supported Living Center (AbSSLC) is one of the largest employers of Abilene, Texas and the surrounding cities. AbSSLC cares for people who require 24-hour nursing assistance and total staff care, as well as people who are more independent and need less staff assistance, but may require intensive behavioral support. The AbSSLC is the home to several males (6 young men) under the age of 18. These young men attend different schools in the community. The population of this home has gradually decreased because some of the young men turned 18 or transitioned into the community. The men who have turned 18 may still attend school up to age 21.

There are currently five units and Unit Directors and an Infirmary. Each unit ranges from 4-7 homes. There are approximately 6-24 people living in each home. Usually, the homes with fewer people have more individuals who display significant behavioral issues. Each unit has homes that serve people with various needs. One unit could include a home for people that require 24-hour nursing assistance as well as a home that serves males under 18 years old. The home for the males under 18 years old currently has six young men living in it.

The AbSSLC has seven different activity centers across campus, its own Habilitation Department, a dental office, a desensitization dental office, a place where wheelchair modifications can be done, several workshops, an eatery called "The Diner," a coffee house, "Lone Star Coffee and Tea House," and its own laundry system that does laundry for Big Spring State Hospital, as well as the Abilene, Lubbock, and San Angelo SSLCs.

Plans to create a transition home for the young men who are turning 18 has begun. The young men will move to a home where the people who live there are closer to their age. This did require several moves of other men that some of their families were not happy with, but even though it did not make everyone happy the idea will benefit the young men and the older gentlemen in the future. 6350 First Street is eventually going to be the transition home.

Regulatory Services has visited numerous times this biannual period for investigations and

received citations on some. Regulatory Services arrived in January for the Annual Survey. The facility was placed on an immediate jeopardy on the first day of the review for hot water temperature violations, for which the facility received citations in the previous annual survey. The situation was remedied by a corrective action plan and consequentially released from violation during follow-up visits.

The Settlement Agreement court monitors visited during February. When the facility received the draft of their findings in May, plans of correction were immediately started. Outside consultants were utilized to assist in meeting the settlement agreement goals.

Due to the facility having a shortage of personnel in all departments, there were two “rapid hiring events” in order to recruit people in a quick fashion. Applicants came to the campus and a hiring decision was made immediately with the criminal background check and drug test results pending. The turnout was better than expected and included the hiring of an Occupational Therapist.

There have been several major staff changes. Besides the facility having a direct support and nursing shortage, several long-time employees retired within this past six months. There were three tenured Unit Directors who retired in May and June. Also, the Habilitation Therapies Director retired. Some of these positions have since been filled. These employees had vast knowledge of the people they worked for and those living here and their presence and knowledge will be missed.

During contacts with several of the family members, many were not in agreement with a facility policy that the Social Worker be the point of contact between family members and the team. It has caused problems due to lack of communication and follow-up actions. The AIO identified this concern and made recommendations to remove communication barriers. The Director and the administration worked to find a resolution to this problem.

While reading some of the DFPS investigations the AIO identified that in some instances all witnesses were not interviewed. Also, there were multiple times when surveillance video was not documented as being viewed. The Incident Management Coordinator indicated that this issue was discussed with DFPS which has led to improved thoroughness of investigations.

Austin State Supported Living Center

Phyllis Matthews

Assistant Independent Ombudsman



Phyllis Matthews has a Bachelor of Arts degree in Psychology from St. Edwards University and has many years of experience serving people with intellectual and developmental disabilities. As a contract oversight and performance manager for the Texas Department of Assistive and Rehabilitative Services Division for Early Childhood Intervention Services, she monitored contracted programs and provided technical assistance to programs that deliver services to children with developmental delays and disabilities. As a program specialist and later as a program compliance coordinator at the Texas Department of Aging and Disability Services (DADS), she engaged in improvement efforts for state facilities serving people with intellectual and developmental disabilities during the negotiations and finalization of the U.S. Department of Justice Settlement Agreement. She accepted the Assistant Independent Ombudsman position in May 2012. Ms. Matthews is a Certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

Austin SSLC (AuSSLC) supports people with varying degrees of intellectual disabilities, a number of whom also have physical disabilities. The center is comprised of 16 homes organized within four residential units. People living in homes within two units, one supporting males and one supporting females, receive extensive nursing and personal care supports. They also utilize wheelchairs for mobility to varying degrees, and many receive nutrition via enteral feeding. Homes within the third and fourth units provide a heightened level of specialized behavior supports. There is great diversity in the level of support needed to complete functional living skills among residents. The center provides on-site vocational and day programming. In addition, the facility oversees the Austin State Hospital vocational workshop serving AuSSLC residents, as well as individuals residing in the community.

Significant demographic changes over time prompted review and responsive actions enabling people with similar experiences and things important to them to live together. A large percentage of people living at the center are senior citizens. Several people experiencing the natural transition to life as an older adult, and whose support needs have changed, now live with other seniors. The center is using existing resources to serve a broader section of the population by welcoming younger people waiting for services. The center continues to develop and implement programming and the grand opening of the gym at the Recreation Center is a timely addition as younger people move to the center. A Welcome Committee allows people moving to the center an introduction to new people, experiences and services.

The center is piloting a program associated with the HHSC Health and Specialty Care System initiative examining overtime, staffing and retention across the SSLCs and state hospitals. Evaluation of operations across service areas and corresponding action plans, including data collection and analysis, began in March. Data comparison of February 2018 and May 2018 evidenced a 22% reduction, representing 5,000 hours, in overtime hours worked.

Evaluating due process practices to ensure people live free of unnecessary restrictions is a current focus. The AIO continues to consult with the center to identify opportunities and actions to improve processes while maintaining timely review of protective restrictions affecting peoples' lives.

No citations were received during the HHSC Regulatory Annual Recertification Survey the week of February 12, 2018. Department of Justice Settlement Agreement monitoring occurred the week of April 23, 2018 and the draft report issued.

The center welcomed Mr. Alan Walters as AuSSLC Director on June 4, 2018. He worked over 31 years in the Texas Juvenile Justice Department in progressively responsible positions including Superintendent of four facilities and Statewide Director of Residential Operations. Mr. Walters was AuSSLC Director of Residential Services from 2014-2016. Mr. Walters' proven leadership and knowledge of facility operations combined with knowledge specific to AuSSLC should facilitate a smooth transition.

Brenham State Supported Living Center

Susan Aguilar

Assistant Independent Ombudsman



Susan Aguilar earned a Bachelor of Arts degree in Political Science from Texas Lutheran University. She worked in the field of early childhood intervention prior to obtaining the position of Qualified Developmental Disability Professional at the Brenham State Supported Living Center.

While at the center, Aguilar has also served as program facilitator, person-directed planning coordinator, level of need coordinator and interim rights protection officer. She has held the position of Assistant Independent Ombudsman since 2010. Ms. Aguilar is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

The Brenham State Supported Living Center (BSSLC) provides services to individuals with intellectual and developmental disabilities that range from profound to mild. Many of these individuals require psychiatric and behavioral supports. Brenham is one of the designated centers to serve children and adolescents. BSSLC is made up of four residential units. Unit one primarily serves individuals with medical and physical management needs, as well as older persons who have health conditions and physical management needs. The second unit serves individuals who have physical management needs and require assistance with most activities of daily living. The third unit comprises three male homes, representing a wide range of ages and abilities and one cottage that serves males under age 18. Unit four comprises six cottages. One cottage serves females under age 18, two cottages serve adult females and the other three cottages serve adult males. Many of the adults residing at unit four work in some capacity, with most requiring some level of assistance with activities of daily living.

The center provides a variety of on- and off-campus work opportunities for adults, as well as a variety of day programming activities. One individual is competitively employed and nine others are working part-time in supported employment in the local community. Five individuals are employed part-time in a variety of jobs thru the center's client worker program. Other employment is available at the off-campus workshop, enclaves, the on-campus workshop and art center. School-aged individuals attend local schools and those at least 16 years of age are provided with paid work opportunities during the summer months.

During this reporting period, an internal staff was promoted to Director of Competency, Training and Development (CTD) Department. A new position for Director of Support Services was created and filled. The center Director, Brad Benoit, was temporarily reassigned in April to serve as acting director of ICF-IDD component at Rio Grande State Center, but returned to Brenham the first week of July. The SSLC continues to employ an on-campus counselor and a community based counselor is being utilized in select cases. The center continues to contract with a child and adolescent psychiatrist to work on campus part-time to serve adolescents that require psychiatric services.

As a result of high amounts of overtime and common practice of holding DSPs over to work the oncoming shift to meet minimum ratios, the center advertised and held a mass hiring event in March and streamlined the hiring process so that applicants can potentially leave with a conditional offer of employment. This has resulted in a significant reduction in direct support staff vacancies. The retention rate for staff hired in March is reported to be at 66% as of this time.

The AIO routinely participates in quarterly meetings with the Incident Management staff, OIG, DFPS, and HHS Regulatory. Meeting topics included changes in APS investigator staff, timeliness of APS interviews and completion of investigations, and clarification regarding APS streamlined investigation process. The center's Incident Management Coordinator tracks timeliness of APS investigations and continues to inform DFPS program administrator of any concerns. The AIO has expressed concern to leadership regarding the need for timely review of completed facility investigations by the Unusual Incident Report Committee.

Recommendations made to the center by the AIO include: having leadership address the practice of DSPs contacting off duty home managers for direction instead of consulting with designated on duty staff; the practice of IDTs addressing diet and food refusals that possibly contributed to unauthorized departure; and video review by the IMC to rule out use of inappropriate physical redirection during behavioral incidents.

Routine observations and visits to homes reveal the need to improve meaningful active treatment and engagement around campus, and this was noted in the latest Settlement Agreement Monitoring Report. This has also been evidenced through OIO Program Review monitoring. Recommendations included the need for interests and skills to be taken into account along with the goal of community engagement when planning activities for individuals. Adolescents should especially be supported in developing their interests and skills levels through appropriate means. Informal active treatment/engagement should also focus on other areas of development in addition to leisure.

Additional recommendations included: conducting IDT meetings for school-aged residents in the afternoons to accommodate their participation, especially for those adolescents who can advocate for themselves; leadership from Residential services be part of the IDT discussion in exploring whether outside resources may need to be considered to address behaviors of significant concern; additional guidance and oversight be provided at homes without DSP III or IV leadership for a period of time; provide adequate supervisory staff when taking individuals to an out of town activity in order to ensure a fun and safe experience for all individuals; evaluate the need for improved teleconferencing equipment as poor sound quality and other factors can make it difficult for family members and advocates to participate at an optimal level in team meetings.

Corpus Christi State Supported Living Center

Kelley Davis

Assistant Independent Ombudsman



Ms. Davis's career began in 1988 while going to school at Howard Payne University. She worked for the Texas Youth Commission as the Recreation Supervisor. She graduated from HPU with a degree in Physical Education and a minor in English. She went on to work for the TYC for 15 years in various roles. Ms. Davis also worked as an LVN for the University of Texas Medical Branch at a TYC facility and in nursing facilities. She was a respite supervisor for local MHMR and owned her own business. Ms. Davis worked at the Mexia SSLC for four and a half years as the Transition Specialist. She joined the Office of the Independent Ombudsman at the Corpus Christi SSLC in 2017.

The Corpus Christi State Supported Living Center (CCSSLC) serves residents who have a range of profound to mild cognitive disabilities. There are three specialized units: one supports residents requiring intensive medical supports with profound IDD; another provides services for residents with severe and profound IDD and some medical needs; the third unit supports residents with mild to moderate IDD with co-occurring mental illness or behavioral needs.

CCSSLC residents have access to a variety of classes, active treatment sites, various employment opportunities, an on-campus computer lab, gymnasium and swimming pool, among other supports to promote independence and growth. The individuals who live at CCSSLC are active in Special Olympics and Miracle League sports. Many are employed during the week and take part in an array of recreational opportunities both on- and off-campus.

It was recommended that consents are signed and due process followed for each female resident prescribed any type of birth control. This issue has been resolved by the facility administration, Human Rights Officer and the Assistant Independent Ombudsman working together to insure the appropriate procedures are in place. Other recommendations made by the AIO included: the discontinuation of a practice where teams were meeting without the attendance of the resident; training staff to communicate with hearing impaired residents; residents get their prescribed eyeglasses in a timely manner; and individuals receive haircuts the way they want and not cut all the same.

Denton State Supported Living Center

Jerome Young

Assistant Independent Ombudsman



Jerome Young earned a Bachelor's Degree in Accounting from Texas Tech University. He began his career at Lubbock State School in 1993 as an active treatment provider. After several years in Lubbock, he moved to the Dallas/Ft. Worth area and served at the Denton SSLC, holding the positions of direct support professional, building coordinator, residential supervisor and job requisition coordinator. His reputation for client advocacy, fairness and compassion attested that he would be a valuable member of the Office of the Independent Ombudsman. He joined the OIO as the Assistant Independent Ombudsman for the Denton SSLC in February 2013.

The Denton SSLC currently provides services to 447 individuals with cognitive and physical disabilities. The level of developmental disability ranges from mild to profound. The campus consists of six units. Two units serve individuals who require intensive medical support and require 24-hour nursing care. Although the majority of these individuals have physical limitations, they are provided with resources to be as independent as possible. Some need assistance with propelling their wheelchair; while others have been provided with motorized wheelchairs to move independently. The other units are home to individuals who are more physically independent but may require behavioral interventions. Although most of the population consists of older individuals, three individuals still attend public school.

There are several programming and life skills areas, including a senior activities center, throughout the campus. Individuals are also provided the opportunity to work with a job coach through campus employment. Several individuals are currently working at Exxon, Chili's, Sonic Drive-in and other well-known companies.

A prom event was held for the residents with a theme of "Summer Red Carpet Solstice," complete with a king and queen's court. Formal attire was donated from staff at the DSSLC as well as another center. Many staff members worked in collaboration to make it a special event for the residents.

El Paso State Supported Living Center

Isabel Ponce

Assistant Independent Ombudsman



Born and raised in the Sun City, Ms. Ponce went from serving the elderly population to working with children. She was employed by the El Paso Headstart Program where she provided social services to children and their families through Community Outreach. Later she came to serve adults with developmental disabilities as a Residential Director in the Private Sector. Once she became a Certified Internal Investigator, she began working as a Case Manager for a Home and Community Service Program. After seven years with the program, Ms. Ponce joined the Office of the Independent Ombudsman in December 2010 as the representative for the El Paso State Supported Living Center.

There are 95 residents at the El Paso SSLC (EPSSLC). The facility is made up of two units. Three dorms in building 503 Kirkland continue to be co-ed. The homes on the other side of campus are either all female or all male in residency. 513 Copper Canyon is home to female individuals who need full assistance with daily activities. 512 Palo Verde is home to male individuals who have similar needs. 510 Agave is home to males who require more assistance with behavioral challenges and both 508 Yucca and 509 Mezcal serve female individuals who require the same behavioral assistance. 507 Tiger's Eye is home to older male individuals who need full assistance, and home 506 Saguaro has been earmarked as home to male individuals who are getting ready to transition to the community. The home at 511 Kirkland Circle was closed in March and individuals previously residing in that home were moved to their new residences within the facility.

In the month of March, the facility announced that previously formed Individual Home Placement Program Committee would be working with individuals whom they had identified as in need of, or potentially in need, would benefit from a change of homes within the facility. In April after numerous complaints and concerns from parents, family LARs and agency guardians regarding the previous months' moves and existing policy for moves within the facility was adapted from another SSLC. The committee reviewed the new policy for El Paso and will utilize it for future moves within the center.

The facility director retired in February and the director of Richmond SSLC served as interim once again. In the month of June, Mr. Kevin Ward officially started as the new facility Director.

Regulatory Services conducted annual survey in June, which included greater periods of observation to corroborate documentary evidence presented by the facility as a focused survey.

During this period the center has had several unauthorized departures but the number has decreased from the previous reporting period. The number of serious head injuries and lacerations requiring medical treatment has also decreased. One individual was sent out of the

center to University Behavioral Hospital for stabilization and has been doing well since his return. Another individual was taken into police custody after using tools as weapons against staff and other individuals. He remains at the center until he goes to court for assault charges. He is scheduled for a competency test to ensure due process is afforded to him before his final hearing.

Early in this reporting period, there were various reports of individuals engaging in challenging behaviors while on community outings that put them, other individuals, and sometimes staff at risk. At the same time there were increasing reports of individuals who engaged in aggression or challenging behavior during team and sporting events. The AIO recommended the consideration of a training for individuals who may benefit from a code of conduct. The Active Treatment Department spearheaded the project with help from the Behavioral Department. Individuals who were identified as likely to benefit from this training were signed up and voluntarily agreed to the code of conduct and tracked by the Behavioral Department for each individual.

After the AIO identified that calls to 911 made by individuals were being cancelled by the Campus Coordinators, a training was conducted at a town hall meeting where all staff were informed they could not cancel a 911 call because individuals have the right to call 911. The facility scheduled police officers and fire department personnel to come to the facility and speak to the individual on the importance of understand why and when to call 911.

When issues with the token economy using coupons for behavioral reinforcement were discovered by the AIO, the facility agreed to look at its protocol for how coupons are redeemed. The facility agreed to develop guidelines for how behavioral staff is to redeem reinforcement coupons. Any individuals that require plans that may or may not be restrictive in nature must have those plans determined by their IDT. Any limits how coupons may be redeemed must be put through and approved by HRC.

Lubbock State Supported Living Center

Robin Seale-Gutierrez
Assistant Independent Ombudsman



A Lubbock native, Ms. Seale-Gutierrez received her Bachelors of Arts in Psychology from Texas Tech University and continues to work toward her Master's degree. Ms. Seale-Gutierrez worked at Lubbock State Supported Living Center for 10 years in varying roles including a Psychological Assistant, Qualified Intellectual Disability Professional (QIDP), QIDP Coordinator, and most recently the Assistant Director of Programs prior to joining the Office of the Independent Ombudsman. Ms. Seale-Gutierrez is a graduate of the 2009 Building the Bench program where she obtained her Certified Management Professional certificate. Prior to working at Lubbock State Supported Living Center, Ms. Seale-Gutierrez served as a parent advocate for those receiving Special Education Services by serving on multiple committees and advisory boards for two school districts. Ms. Seale-Gutierrez also assisted families of children receiving special education services in understanding their rights and the services available to them allowing the families to become strong advocates for their child. Ms. Seale-Gutierrez joined the Office of the Independent Ombudsman for State Supported Living Centers in June 2014. Ms. Seale-Gutierrez is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

The facility currently serves 183 residents who range from age 18 to 80 years at 14 homes. Three of the facility's 14 homes serve female residents while 8 serve male residents. The remaining three homes serve residents who require intensive medical support, with 24-hour nursing being provided at two of these. The units at the facility were restructured in April with the units divided from two units to three units. The units are now as follows: Unit one serves primarily residents who require intensive medical supports; Unit two serves residents with some medical needs but mostly behavioral challenges who tend to have fewer independent living skills; Unit three serves residents with intense behavioral needs. Due to maintenance projects and home restructuring this reporting period, a total of 30 residents were moved to new homes. Changes were also made to accommodate residents who have an autism diagnosis with 526 Tulip being designed to provide specific services to this population. Home 520 Willow now primarily serves residents with specialized environmental needs related to a PICA diagnosis.

Regulatory Services visited the facility multiple times during the reporting period. In January, the facility was cited under client protections (W125) related to LAR contact and the citation was subsequently cleared. The facility was cited in April for lack of staff (W186) related to physical nutritional management plan needs not being consistently met while residents attended day programs. The facility is currently working on improvements in this area.

There have been multiple staffing changes over the biannual period which includes a new Director of Incident/Risk Management, Director of Maintenance, Psychiatrist, Dentist, Chief Nurse Executive, two Unit Directors, Board Certified Behavior Analyst and a Staff Physician. The

Director of Quality Assurance remains vacant at the current time.

A variety of recommendations have been made over this reporting period both through case summary reports and through other communication with the Director. Of the nine case summaries provided to the facility over the past six months, one involved an issue related to due process which was ensuring that current consents were completed timely for restrictive Positive Behavior Support Plans. Actions have been taken by the facility regarding this issue and follow up is currently pending.

There were two sets of recommendations provided to the facility in March and April related to PICA protections for one resident and then for all residents at risk for PICA behavior. The facility has re-implemented a PICA workgroup and is currently developing a Corrective Action Plan.

There were two sets of recommendations regarding the supports residents needed while attending day programs. The first provided to the facility in March and the second in May following a citation from Regulatory Services for similar concerns. The facility has developed a Plan of Correction and is addressing the identified issues.

A second set of recommendations was provided in January regarding meeting attendance. An issue was identified in October 2017 where residents and their legally authorized representatives were not routinely invited to their meetings. A follow-up completed showed the issue to be unresolved. The facility is addressing the issue and a follow up is due to be completed in July 2018.

Recommendations were made in January regarding issues with decreased resident work attendance affecting especially those residents under 24 years old. A follow up completed in June showed that there are continued issues. The facility continues to work on this issue and most recently a meeting was held to discuss viable work opportunities in June.

Recommendations related to late reporting of unusual incidents was also provided. These recommendations focused primarily on data reporting issues. Given that there is a new Director of Incident/Risk Management, it is possible that this issue will resolve itself. A follow up is pending at the current time.

The final set of recommendations were provided in June for 504 W Sparrow. These recommendations were related to better provision of services to the current residents at the home as well as for the 7 other residents due to move there as part of a reorganization project. The AIO met with the Assistant Director of Programs regarding all recommendations and actions have been taken to address some of the concerns. A follow up will be completed in September.

The facility has been very responsive when these issues were brought to their attention and has been very helpful in providing follow up information and plans to the AIO.

Lufkin State Supported Living Center

Marvin Stewart
Assistant Independent Ombudsman



Marvin Stewart received his Bachelor of Science Degree in Psychology/Sociology and his Master of Arts Degree in Community Counseling from Stephen F. Austin State University in Nacogdoches, Texas. Mr. Stewart has worked at the Lufkin State Supported Living Center for 26 years and has lived in the Lufkin, Texas area all his life. He spent his first sixteen years of employment at the Lufkin State Supported Living Center as a Behavior Health Specialist followed by two years as a Supervising Behavior Health Specialist. Mr. Stewart then transferred to the Quality Assurance Department and worked 18 months as a Program Compliance Monitor prior to accepting his current role as the facility's Assistant Independent Ombudsman in August 2011. Prior to his current role as Assistant Independent Ombudsman, Mr. Stewart served as a standing member of the Behavioral Intervention/Human Rights Committee and while working as a Program Compliance Monitor, served as the deputy Human Rights Officer.

The Lufkin State Supported Living Center (LfSSLC), at the time of this report, provides support services for 290 people with profound to mild intellectual and physical disabilities. There are four units serving both men and women. All units are capable of providing 24-hour nursing services, but only two currently provide this service. These two units provide care to those who require intensive medical supports. The Center also provides services to 14 adolescent individuals (17 and under). Two residences for adolescents, one male and one female, are located in the Oak Hill Unit. Public school services are provided by the Central Independent School District both on the LfSSLC campus, and the CISD campus. The center provides behavioral supports for several people with challenging behaviors that can pose a threat of injury to themselves and others.

The LfSSLC continues to actively seek community placement for people who are ready for transition, and needed services can be met in the community. There are four smaller residences at the center that are designated as transition homes and are used to prepare people for transition to community living. At the time of this report, there were eight active referrals. Over the past six months the center has placed one person (not an adolescent) into a community setting, and admitted two people (one adolescent). No unsuccessful community placements occurred within the past six months.

The LfSSLC continues to work hard to recruit Direct Support Professionals and Nurses. The Center has been holding two New Employee Orientation cycles per month for the last several months in an attempt to address shortages. Administrative changes over the last six months at the center include the hiring of a new Infection Prevention/Control Nurse, Director of Pharmacy, Nurse Operations Officer, Dental Director, and Unit Director for the Woodland Crossing Unit.

Over the last six months the LfSSLC has continued to remodel residential homes and support services buildings on campus. Renovation of the 520 (A and B) Park Lane residence for adolescents has been completed. Also, the 549 Main Street residences (A-D) are now connected to a new generator capable of providing power to all four homes. The people living at 549 Main Street require medical services and supports that could be greatly hindered with a power outage, thus the generator is a welcomed addition. Currently, the dining room within the Castle Pines unit is getting a much-needed expansion and remodeling. In the near future, the Woodland Crossing Unit will undergo much needed renovation of all the bathroom facilities as well. To improve work and engagement opportunities at the center, the construction of a woodshop has been completed and a green house is under construction.

The Center will begin teaching Ukeru and SUR (Safe use of Restraint) to direct contact staff. This training uses Trauma Informed Care strategies and techniques to effectively de-escalate challenging behavior episodes, thus avoiding physical restraint. The Center currently has 25 staff trained as Ukeru Master Trainers ready to begin training. Ukeru and SUR will replace Physical Management of Aggressive Behavior (PMAB) techniques which have been taught for many years.

HHSC Regulatory has entered the facility on several occasions to investigate complaints, and incidents requiring report by the center. Most of these complaints/incidents were unsubstantiated. In March, the center underwent its Annual Recertification Survey. HHSC Regulators noted several standard level deficiencies in the areas of client protections, health care services, facility staffing, active treatment, dietary services, and physical environment. These deficiencies have all been corrected and cleared. At the time of this report, the center is deficiency free. In April, the Settlement Agreement Monitoring/DOJ Round 13 visit occurred. The center continues to work closely with SSLC State Office on putting plans in place to reduce cases of pneumonia and skin integrity issues. Also, SSLC State Office is working with departments at the center to tighten their efforts and focus on specific areas of the DOJ settlement agreement which can be moved into “less oversight” (improvement) categories, thus systematically working toward overall compliance.

The administrative and professional staff at LfSSLC have been very supportive of the efforts of the Assistant Independent Ombudsman. Aside from suggestions made to the administrative and professional staff concerning general issues, I have asked that processes for pre-treatment sedation for non-emergency medical procedures be revised to improve timely processing of requests, and the Transition Committee policy be completed. The Transition Committee policy/procedure was completed immediately. Revision of pre-treatment sedation for non-emergency medical procedures continues to be in development.

Mexia State Supported Living Center

Adam Parks
Assistant Independent Ombudsman



Adam Parks was raised in Mexia, Texas. He attended Stephen F. Austin State University where he earned a Bachelor of Arts in psychology. After graduation, he began his professional career as a conservatorship caseworker for the Department of Family and Protective Services in Angelina and Shelby County Texas. Parks then accepted the position of qualified intellectual disability professional (QIDP) at Lufkin State Supported Living Center. He was later appointed lead QIDP for the Oak Hill Unit. He also served as a standing member of the human rights committee during his time working at Lufkin State Supported Living Center. Parks accepted the position of Assistant Independent Ombudsman of the Mexia State Supported Living Center in February 2014. Mr. Parks is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

Mexia SSLC (MSSLC) provides services to individuals who function in the profound to mild range of intellectual disabilities. Senate Bill 643 designated MSSLC as the forensic facility, and all new admissions come through the court system; 54% of the population is an alleged offender. MSSLC provides specialized forensics training for employees to better serve the individuals who are currently being admitted into the facility. 91% of the total population is male. Also, 47% of the population is under the age of 30. 73% of the population has resided at Mexia SSLC for 10 years or less. 8% of the population is considered a Minor. Only 33% of the Adult Population has a Guardian Assigned.

There are 6 units on campus, and four of those units are designated as forensic. Longhorn Unit houses up to 52 juvenile male alleged offenders. Whiterock Unit houses up to 47 adult alleged offenders in 6 homes, with Whiterock 3 being designated the high-risk home. This home will only have individuals who have been deemed High Risk through the high-risk determination process. Shamrock Unit houses up to 59 adult male alleged offenders in 5 homes. Barnett Unit houses up to 51 males, ages 18 and up. Most of the individuals are physically independent and some need some staff assistance with completing their self-care and daily living skills. Martin Unit houses up to 65 individuals, both male and female. Those individuals who require the most intensive medical supports live within the Martin Unit. Individuals in this unit typically require more staff assistance than any of the other units. Martin Unit provides 24-hour nursing care. Central Unit has 3 homes, 2 of which are De-Certified homes. Central 1 home is the only one Certified.

Vocational training is provided in several areas on campus, as well as in the community. There is a large workshop that does contract work and two other smaller workshops. There is also a recycling crew that collects paper and cardboard from Mexia and neighboring cities. There is a greenhouse which sells plants to the public all year round. The facility woodshop repairs furniture in the facility and it also builds and sells wood outdoor furniture to the public. Mexia SSLC has a General Store in the City of Mexia. This store will allow products from the Woodshop

as well as the greenhouse to be sold in town at a designated retail space. The General Store will also provide employment opportunities for the individuals of MSSLC. School aged individuals attend classes at Mexia ISD at the Mexia ISD Development Center. Mexia SSLC has also started a mowing crew who will contract with community residents to provide basic lawn maintenance and a paint crew who have completed several painting jobs at Mexia SSLC.

Regulatory entered MSSLC seven times during this period. In May, the facility was placed on an immediate jeopardy due to staff not implementing levels of supervision and environmental checks as they were written for two individuals. The immediate jeopardy was lifted a month later and the facility remained on a 90-day termination due to needing to monitor their current plans. Skill Acquisition Plans (SAP) were identified as another area needing assistance. MSSLC has received support from consultants from State Office who are helping IDT's with SAP's for every individual at MSSLC.

During high-risk determinations, the IDT's asked the individual or their guardian if they wished to appeal the decision. They were doing this without the letter from the Director, which includes who can help them, and without the documentation of their high-risk determination meeting. It is already standard procedure for the AIO to present the appeal letter to the individual, so the recommendation was made that MSSLC send the letter to the guardian and the AIO would speak with them about their appeal options. During this period, two high-risk determination appeals were returned from the Administrative Law Judge. Both were confirmed to be high risk. There were two new individuals that were determined by their IDT's to be high risk. One individual appealed his decision and asked for assistance from the Assistant Independent Ombudsman. The other individual's guardian did not wish to appeal the IDT's decision.

The Human Rights Committee (HRC) does not have a community member, which was a recommendation provided by the AIO previously. This issue is being followed by Regulatory Services. The facility has made efforts to recruit people to serve in this position by presenting to several community organizations. There are believed to be several people expressing interest in serving on the committee, but not successful yet. Other recommendations made regarding HRC included ways to make the HRC meeting run more efficiently to prevent it from running too long. The Human Rights Officer has implemented the AIO's suggestions which is yielding improvements. Also, consents for psychotropic medication are being sent to HRC with the same plans to remove. This was noted in the last Settlement Agreement Monitors report as well. The AIO made the recommendation for HRO to meet with Psychiatry to train on proper due process documentation.

The AIO recommended that professional staff train DSPs on residents' programming out of sight of other individuals. This is something that goes against HIPPA as well the individual's dignity. It is becoming a practice of individuals stealing other residents' cell phone minutes. The AIO recommended that IDT's consider these concerns when purchasing cell phones. There may need to be some training involved when an individual obtains a cell phone. Also, it seems this needs to be a topic for peer council meetings and self-advocacy meetings.

Richmond State Supported Living Center

Deatrice Potlow

Assistant Independent Ombudsman



Deatrice Potlow earned a Bachelor of Science in office administration in 1997. Shortly after graduating she began working at a local hospital as a medical transcriptionist. She relocated to Houston, Texas for career advancement and began a career with the State of Texas. During her tenure of employment, she served as an investigator for children, adults and persons with disabilities. Prior to being hired in October 2012 as an Assistant Independent Ombudsman, she worked as a facility investigator who was responsible for investigating allegations of abuse, neglect and exploitation at the Richmond SSLC.

Richmond State Supported Living Center (RSSLC) opened in 1968. The 241-acre state supported living center is home to approximately 324 Residents and employs approximately 1200 staff. RSSLC has a total of 24 homes. Trinity, San Antonio and Leon Homes are divided into four living areas on each of the homes identified by side A, B, C, D. Pecos, San Jacinto and TJ5, TJ6, TJ6, TJ7, TJ8, TJ9, Nueces, Guadalupe, Lavaca, and Sabine. Trinity D is the only Co-ed home on campus.

There are three work centers on campus. The main work center includes contractual work where residents perform a variety of job skills and are paid on a production rate. The Angelina workshop provides for an extension of the main workshop. The Colorado workshop has a work program designed for individuals that exhibit pica behavior. The materials used at this workshop are approved for a safe environment. RSSLC has a work center that is catered for residents that are aged over 55. This work center provides for a calming and slower pace environment while still offering the benefits of socialization, staff engagement and maintaining skills by way of arts, crafts, music, literature, and sensory.

HHSC Regulatory entered approximately nine times during this reporting period to initiate new investigations. Several were conducted that required numerous visits to the center that yielded in approximately nine incidents unsubstantiated with no citations, three incidents substantiated with no citations, and three incidents substantiated with citations. In addition, RSSLC has its 13th visit from the Settlement Agreement Monitoring team in March.

RSSLC continues to hire Direct Support Professionals on an ongoing basis. Several director positions became vacant during this period, but two have been filled. Other professional vacancies were filled as well.

RSSLC recently celebrated 50 years of services and dedication of individuals with intellectual and developmental disabilities. RSSLC continued its outreach to the community by and hosting the Annual Spring Provider Fair. This provides an opportunity for the resident to participate and gain insight of what the term “being referred to the community” means. RSSLC is working to maintain the areas of engagement and active treatment by having on-campus events and

utilizing the available resources on campus for promote positive engagement and increased participation. To name a few, residents are provided the opportunity to take a break or choose to enjoy an alternate lunch menu at the Lite Rock Café, gym for recreational time and other sponsored campus events, the coffee shop/computer lab to enjoy computer time while drinking a beverage of choice or just to socialize. The natatorium /splash pad offers a place to cool down.

To stand by its commitment of safety awareness, RSSLC introduced Raptor, a visitor screening program that is used by most schools. There is also random testing for the intruder and facility inclement weather alarms system for a teachable moment for the familiarity of the sound, duration, meaning and the requirement to ensure the safety of all.

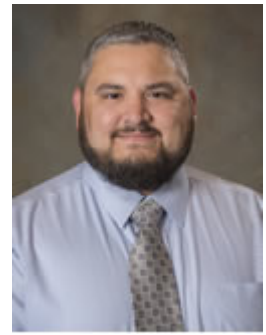
The AIO continues to meet the center's Director or Assistant Director to discuss updates, concerns, complaints and make recommendations. The AIO has made many recommendations to the facility resulting from cases of complaints, observations, meetings, documentation review in IRIS, and after reviews from DFPS investigative reports and the center has adopted most of them. The most recent was a recommendation to purchase mattress protectors instead of mattress pads as the ultimate purpose is to protect against allergens, liquids and stains while maintaining the quality of the mattress.

During the past six months, awareness of the role of the AIO increased in requests by the resident, the resident's family, or staff for the AIO's involvement, and attendance at quarterly meetings with DFPS, OIG and Regulatory Services. The AIO presents to the New Employee orientation class monthly, visit and monitors the home and share concerns with administration and team members but most importantly addresses complaints from the residents, guardians, and family members. There are ongoing efforts to have increased communication from the and off campus entities.

Rio Grande State Center

Horacio Flores

Assistant Independent Ombudsman



Mr. Horacio Flores hails from the Rio Grande Valley and attended Texas A&M Kingsville where he earned his Bachelor of Arts Degree in Psychology. He began his career with the State of Texas working for the Department of Family and Protective Services as an Investigator for Child Protective Services in Nueces, Kleberg, Duval and Jim Hogg counties. Mr. Flores then accepted the position of Qualified Intellectual Disabilities Professional (QIDP) at Corpus Christi State Supported Living Center. Shortly thereafter he was appointed to a Lead QIDP. Mr. Flores then relocated to the Rio Grande Valley and accepted the position of QIDP at the Rio Grande State Center in Harlingen. Mr. Flores accepted the position of Assistant Independent Ombudsmen of the Rio Grande Center in April 2017.

The Rio Grande State Center (RGSC) is composed of three facilities. It has a mental health clinic which includes a forensic unit, an outpatient health clinic, and an Intermediate Care Facility (ICF) component. The two homes that make up the ICF component are divided into east wings and west wings. The east sides of both homes are populated by male residents and the west wings are populated by female residents.

The El Paisano home serves younger individuals, who tend to require behavioral support. The La Paloma home has a quiet environment and the residents are require intensive medical support. The two homes serve a population that would typically be served by more than two homes at other facilities.

HHS Regulatory Services visited in January which resulted in an immediate jeopardy (IJ) due to untimely notification to a physician. The IJ was officially removed quickly after remediation however, Regulatory planned to monitor for 90 days. RGSC cleared the 90 day in May and are no longer in danger of termination of the Medicaid provider agreement.

Starting April 1, the operation of the ICF component was transitioned into the SSLC division under the direction of the Associate Commissioner for SSLCs. It will no longer report to the state hospital division. The IDD Services Director (currently an interim position) will report to the Corpus Christi SSLC Director. The CCSSLC has assisted by purchasing new sofas, recliners, and TVs for the common areas and wall decorations to make the homes look more comfortable. They also purchased tools for activities to engage individuals. RGSC administration will still be responsible for facility management. This has had a positive effect on both individuals served and staff. Home staff have been more engaging with the individuals and the individuals appear to enjoy the new furniture.

There have been personnel changes in the interim director position, as well as significant changes in other key positions. The Assistant Director of Programming and Home Manager positions are currently vacant.

The AIO continues to meet with the interim director to discuss updates, concerns, complaints and make recommendations. AIO made recommendations to interim director regarding IDT's not knowing the living options process and not knowing what living options are available for the individuals that reside at RGSC. The AIO suggested that when IDTs make a community referral that they tour the group homes and day habilitation programs to learn firsthand on what type of homes and what types of programs are available for individuals. AIO also suggested that in the short term to have the local IDD authority conduct a training on the waiver program and other community-based programs that are available. The facility coordinated a training session, however it was poorly attended. The AIO will continue to monitor this issue.

AIO also informed the Director that the newly organized morning meetings are not covering all required topics such as new abuse or neglect allegations, medication refusals, or significant issues not resulting in an injury. They are also not attended by all required members and are not organized well. This causes a disconnection between Incident Management and the IDTs having correct information. The AIO suggested that they may benefit from having a structured agenda and minutes to follow as a template. The AIO continues to monitor this issue.

San Angelo State Supported Living Center

Brenda Frausto
Assistant Independent Ombudsman



Ms. Frausto obtained a Bachelor of Science degree in Psychology with a minor in Sociology from Angelo State University. She began her career at the San Angelo State School in 1991 as an active treatment provider then later assumed the role as the Admission and Placement Coordinator. Ms. Frausto was also the Admission Coordinator for MHMR Service of the Concho Valley. For the past 13 years, Ms. Frausto has worked for the Texas Department of Family and Protective Services. Ms. Frausto has served as a Guardian Advocate with and was a member of the Tom Green County Coalition Against Violence. Ms. Frausto joined the Office of the Independent Ombudsman in November 2016.

San Angelo SSLC (SGSSLC), located about 15 miles north of San Angelo in Carlsbad, is home to 201 residents with profound to mild developmental and physical disabilities. The majority of residents are independent in their daily living skills. There are currently 18 homes with two homes are dedicated to geriatric residents and two for those residents who require more intensive medical support. There are two homes that serve people with a Pica diagnosis and autistic features. SGSSLC was recently designated as a forensic facility by the Legislature prompting the juvenile females to be moved to a home with more living space. Two homes are dedicated to serving males who have sexual deviant behavior, many of whom have been charged with sexual offenses. SGSSLC employs staff specialized in treatment for this population. SGSSLC operates a competency restoration program for residents admitted through the courts because they have been found incompetent to stand trial for criminal offenses. Many SGSSLC's population has a dual diagnosis (IDD with a mental illness) requiring behavioral health services.

SGSSLC provides many employment opportunities to residents. The work center offers a variety of jobs from assembling meal kits and marking clothing to ground keeping services and attending to the cat feeding stations. Residents have the opportunity of working off campus in enclave work that includes providing recycling services to surrounding communities and supportive employment at a chosen business. Twenty-six residents work on campus in various positions at the canteen, administration, beauty shop, chapel, coffee house, gym, and occupational/physical therapy. SGSSLC has a greenhouse where residents grow and sell plants to the public, Unique Creations where residents sell wood work and hand-crafted items, and raise chickens to sell eggs. SGSSLC's Vocational Apprenticeship Program increases the resident's level of skills in various jobs. The Apprenticeship Program is a 12-month program comprised of four quarter vocational cycles. Some of the jobs offered are carpenter assistant, painter assistant, dishwasher, janitorial, grounds keeping and waste water treatment assistant.

Residents are supported in attending religious services of their choosing off campus if desired. The SGSSLC's All Faith Chapel offers nondenominational and Catholic services and a variety of classes for the residents including bible study, band, choir, guitar, piano, hand bells, percussion, and hand signing.

Residents hold monthly self-advocacy meetings, publish a monthly newsletter, and serve on the SGSSLC's Safety Committee. Residents are encouraged to attend/participate in the Texas Advocacy Conference, Annual Music Festival and Special Olympics. Residents hold weekly home meetings to discuss weekly activities and participate in problem solving for any concerns or issues in the home.

SGSSLC had a total of 13 visits from Regulatory including the annual survey resulting in citations relating to client protections and an immediate jeopardy for water temperatures. The Annual Survey team recommended recertification with condition level deficiencies in the active treatment (active treatment not carried out due to staff shortage, plans not followed), facility staffing (unable to carry out plans or provide treatment due to staffing), physical environment (immediate jeopardy reduced to a 90 day due to water temperatures became stable and within range) and client protections (privacy issues, restrictions without due process)

AIO observed homes on multiple occasions with inadequate number of staff to provide home coverage, active treatment and programming. Recommendations were made to address lack of adequate staff on the homes. SGSSLC developed a 6-step phasing plan, express hiring, and over time up to 16 hours to address the staff shortage. This has not been resolved and the AIO continues to monitor the staff shortage.

The AIO was made aware of restrictions imposed on residents, including those receiving treatment that is part of the Sex Offender Treatment Program (SOTP), that were not receiving due process. A recommendation was made to address these restrictions and the practice of implementing modified rights without due process. The SGSSLC was also cited for lack of due process by Regulatory Services which prompted a plan of correction to be created to address the citation. The AIO will continue to monitor this issue.

San Antonio State Supported Living Center

Gevona Hicks

Assistant Independent Ombudsman



A native of Birmingham, Alabama, Ms. Hicks received her Bachelor of Science in Psychology and a certificate in Gerontology from the University of Alabama at Birmingham. She relocated to San Antonio, Texas in 2001 and worked with infants and toddlers at a local children's shelter. She began her career supporting children and adults with developmental disabilities providing direct care and then case management, supervising multiple group homes in San Antonio for an Intermediate Care Facility and Home and Community Service provider. Ms. Hicks began her employment with the state of Texas in 2006 at Austin SSLC prior to transferring to San Antonio SSLC where she worked as a QIDP and Human Rights Officer prior to joining the Office of the Independent Ombudsman for the San Antonio SSLC in April 2014. Ms. Hicks is a certified Person-Centered Thinking Trainer with The Learning Community for Person Centered Practices.

Established in 1978, San Antonio State Supported Living Center (SASSLC) recognized 40 years of providing specialty care for individuals with developmental disabilities in March 2018. The SASSLC is now comprised of eight residential homes, of which, two homes specialize in providing medical monitoring and 24-hour nursing services, two homes specialize in providing support for individuals with behavioral challenges, and the other four homes provide services ranging from total care needs and physical management to minimal assistance with activities of daily living. Clinical services include on-site pharmacy, on-site dental clinic, physician, psychiatry, nursing and nutrition services, and speech and habilitation therapies. The center currently provides support services to 224 individuals with intellectual, developmental and physical disabilities, ranging in age from 19 to 83 years.

The residents have access to a developmental center which accommodates vocational workshops, habilitation programs, gymnasium, swimming pool, and computer lab. SASSLC currently has 123 residents with vocational employment on campus and six residents working off-site at community establishments. Sensory and retirement programs are also provided as day habilitation services. Leisure and social programs are active with residents participating in Special Olympics, volunteering at area church and animal shelter, and involvement with self-advocacy groups at the SSLC and with local Texas Advocates chapter. The campus is located near several shopping venues and business which are frequently visited by residents.

There have been no changes in executive or clinical leadership during this reporting period. Other organizational staff positions filled in past six months included Human Rights Officer, Social Work Director and dietician.

HHSC Regulatory Services have entered the center to conduct investigations on six occasions in past six months. San Antonio SSLC has submitted and implement plans of corrections for standard level deficiencies.

In May 2018 San Antonio SSLC received the Department of Justice Settlement Agreement Monitoring Report from the February 2018 on-site visit. Multiple service areas achieved and maintained high performance scores requiring less oversight including protection from harm, and mental and behavioral health services. Some service indicators in the areas of communication and abuse and neglect incident management returned to active monitoring. Report also highlighted areas in which continued focus is needed, such as medical and nursing care.

Monitors shared observations of residences offering little privacy for individuals and in need of environmental improvements. To address these concerns administration reassessed room utilization to increase personal space and privacy. Additionally, maximum census capacity was examined which resulted in recommendation to decrease SASSLC capacity from 260 to 245 residents.

San Antonio has experienced direct care staffing challenges for several years with various recruitment and retention efforts. An express hiring initiative implemented May 2018 has resulted in significant reduction in Direct Support Professional (DSP) vacancies. During on-site hiring event, DSP candidates complete multiple stages of application process and receive employment offers, contingent upon clear back ground check and drug test.

The administration has been transparent in its operations. The AIO is included in review of incident investigation findings and has been welcomed to observe during departmental meeting, employee trainings and as plans are developed for systematic changes.

Through investigation of complaints and review of incidents, the AIO has made numerous recommendations related to individual services and systemic improvements. Recommendation made this reporting period have included: implementation of specialized menu calendars for gluten free diet; individualized and informed consent for general anesthesia used for dental procedures; availability of funds for personal spending at admissions; habilitation personnel increased awareness of services delivery in community settings; incident management review and oversight of emergency restrictions; specification of actions addressing abuse allegations findings; and notification of guardians and actively involved persons of outcomes of abuse investigations. SASSLC has been receptive and responsive when addressing concerns brought forward by AIO.

Appendix: HEARTS Data

Contacts per Month by SSLC January 1, 2018 through June 30, 2018

SSLC	January	February	March	April	May	June	Total
Abilene SSLC	7	5	5	2	5	5	29
Austin SSLC	1	8	6	7	6	16	44
Brenham SSLC	3	2	5	4	5	3	22
Corpus Christi SSLC	3	1	7	12	10	7	40
Denton SSLC	4	4	8	7	5	10	38
El Paso SSLC	11	9	12	14	16	14	76
Lubbock SSLC	13	12	20	16	22	8	91
Lufkin SSLC	4	2	10	5	7	9	37
Mexia SSLC	4	10	12	9	9	10	54
Richmond SSLC	9	5	5	15	19	9	62
Rio Grande SSLC	1	1	6	1	1	4	14
San Angelo SSLC	4	2	5	5	5	14	35
San Antonio SSLC	13	6	25	19	21	15	99
Total per Month	77	67	126	116	131	124	641

Contacts by Relationship to Resident by SSLC January 1, 2018 through June 30, 2018

Relationship To Client	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	Total
Family/LAR	10	0	6	1	3	18	14	9	2	7	4	6	15	95
Friend	1	0	0	0	0	1	0	0	0	0	0	0	0	2
Ombudsman	6	10	1	6	1	15	15	5	8	20	4	7	24	122
Other	0	21	1	2	4	1	7	2	1	2	0	0	3	44
Self	0	1	4	9	9	11	16	2	21	11	3	14	20	121
Staff	7	12	10	15	21	30	38	19	18	16	3	8	37	234
Unknown	5	0	0	7	0	0	1	0	4	6	0	0	0	23
Total	29	44	22	40	38	76	91	37	54	62	14	35	99	641

Contacts (Not Referred) by Action Type by SSLC January 1, 2018 through June 30, 2018

Action Type	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	Total
Complaint	14	12	19	26	17	64	58	19	32	40	10	30	80	421
Consult	7	9	0	4	2	7	12	12	16	11	0	0	12	92
Inquiry	4	3	1	0	7	1	4	3	1	0	2	1	2	29
Total	25	24	20	30	26	72	74	34	49	51	12	31	94	542

Investigations by Type (Complaints) by SSLC January 1,2018 through June 30,2018

Month	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	Total
January	0	1	3	0	1	11	11	3	4	7	1	0	6	48
February	0	8	2	0	4	8	10	2	7	2	1	0	6	50
March	2	0	2	3	6	10	16	10	5	1	6	2	14	77
April	2	2	1	0	4	13	13	4	9	15	1	5	13	82
May	4	2	0	7	4	6	20	7	9	16	1	3	13	92
June	2	7	0	7	6	3	6	9	10	9	3	0	10	72
Total	10	20	8	17	25	51	76	35	44	50	13	10	62	421

Contacts Referred by SSLC January 1, 2018 through June 30, 2018

Month	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	Total
January	0	1	0	0	1	1	2	1	0	0	0	1	0	7
February	0	2	0	1	0	2	4	0	0	1	0	0	0	10
March	2	3	1	2	3	0	3	0	0	1	1	0	3	19
April	1	3	0	3	3	0	4	0	1	5	1	2	2	25
May	1	2	1	1	1	0	4	2	2	3	0	0	0	17
June	0	9	0	3	4	1	0	0	2	1	0	1	0	21
Total	4	20	2	10	12	4	17	3	5	11	2	4	5	99

Contacts Referred by Case Type by SSLC January 1, 2018 through June 30, 2018

Case Type	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	Total
Abuse Neglect & Exploitation	0	0	0	0	0	2	5	0	0	1	0	2	0	10
Non-SSLC Issue	4	16	1	10	4	1	6	3	3	7	0	0	3	58
Other	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Personnel	0	4	1	0	8	1	6	0	2	2	2	2	2	30
Rights	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	4	20	2	10	12	4	17	3	5	11	2	4	5	99

Appendix: Demographics of the SSLC population

Demographic	Abilene SSLC	Austin SSLC	Brenham SSLC	Corpus Christi SSLC	Denton SSLC	El Paso SSLC	Lubbock SSLC	Lufkin SSLC	Mexia SSLC	Richmond SSLC	Rio Grande SSLC	San Angelo SSLC	San Antonio SSLC	All SSLCs	Percentage of All SSLCs
Population	270	176	252	207	448	95	183	290	239	324	62	201	224	2971	2971
Age ≤21	11	0	30	0	9	6	6	28	43	7	5	16	4	165	6%
Age 22-54	132	48	150	111	191	58	111	127	152	162	45	135	139	1561	53%
Age 55+	127	128	72	96	248	31	66	135	44	155	12	50	81	1245	42%
Level of ID: Mild	30	9	21	46	59	9	32	24	116	37	8	116	34	541	18%
Level of ID: Moderate	42	21	57	26	64	15	25	39	67	37	16	48	40	497	17%
Level of ID: Severe	49	38	37	26	74	17	24	54	15	62	15	16	44	471	16%
Level of ID: Profound	149	106	137	109	250	54	100	173	39	188	22	21	104	1452	49%
Level of ID: Unspecified	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0.03%
Level of ID: Not Indicated	0	2	0	0	1	0	2	0	0	0	0	0	2	7	0.24%
Health Status: Moderate	126	73	82	104	195	21	65	106	56	164	12	49	74	1127	38%
Health Status: Severe	37	23	15	9	46	6	10	31	9	19	1	17	8	231	8%
Alleged Offenders	0	1	0	7	5	0	3	1	130	2	0	18	2	169	6%
Deemed High Risk	0	0	0	0	0	0	0	0	5	0	0	0	0	5	0.20%
Community Transitions	3	1	0	2	1	1	4	1	17	1	0	5	0	36	57

Source: Health and Human Services Commission as of June 30, 2018

Appendix: Certified Person-Centered Thinking Trainers

The Centers for Medicare and Medicaid Services (CMS) requires person-centered planning and services be provided to all Home and Community-Based Services programs (HCBS), intermediate care facilities (ICF), nursing facilities, mental health services, Community First Choice (CFC) services, and home health services. The State of Texas partnered with the Institute for Person-Centered Practices for development of a person-centered thinking and person-centered plan facilitation training, which is tailored to teach facilitators to meet the person-centered planning requirements contained in the federal requirements.

The Office of the Independent Ombudsman for SSLCs endorses and strongly supports the philosophy and practices of person centeredness. Only trainers who have been certified may facilitate this essential training. Beginning in 2013, HHSC, and formerly the Department of Aging and Disability Services, and the OIO sponsored candidates for this rigorous certification program. The following members of the Office have successfully completed the training and have been certified as Person-Centered Thinking Trainers by the Institute for Person-Centered Practices and the Learning Community for Person-Centered Practices:

Dr. George P. Bithos
Ms. Candace Jennings
Ms. Susan Aguilar
Ms. Jill Antilley
Ms. Gevona Hicks
Mr. Adam Parks
Ms. Robin Seale-Gutierrez
Ms. Phyllis Matthews

