

**Office of the Independent Ombudsman  
for State Supported  
Living Centers**



**2017**  
**Biannual Report**

*July through December*



## Table of Contents

Executive Summary .....	2
Background.....	4
Mission and Principles.....	5
Duties and Activity of the Office.....	5
Central Office.....	13
Abilene State Supported Living Center .....	15
Austin State Supported Living Center .....	17
Brenham State Supported Living Center.....	19
Corpus Christi State Supported Living Center .....	22
Denton State Supported Living Center.....	24
El Paso State Supported Living Center .....	26
Lubbock State Supported Living Center .....	28
Lufkin State Supported Living Center .....	31
Mexia State Supported Living Center.....	33
Richmond State Supported Living Center .....	36
Rio Grande State Center.....	38
San Angelo State Supported Living Center.....	40
San Antonio State Supported Living Center .....	42
Appendix: Data .....	44
Appendix: Certified Person-Centered Thinking Trainers.....	45

## Executive Summary

Since the creation of the Office of the Independent Ombudsman by the 81st Legislature, the Office has been dedicated to advocating for and protecting the rights and welfare of residents and families of the state supported living centers. The Ombudsman at each center is called upon to significantly impact the quality of the lives of the residents and improve the outcomes of services and protections. Residents, families, guardians and staff turn to the Office to provide assistance and answer complex questions concerning their needs. Being visible and engaged in the operations of the SSLC is the hallmark of the AIO's role at each center and grants the Ombudsman the ability to be integrated into the fabric of the center.

As the population of the centers decrease, the role of the Ombudsman becomes more essential. Residents that presently make up the population many times present challenging issues, be they health concerns, significant behavioral challenges and the complex issues that arise from the aging process. The role of the Ombudsman provides comfort, protection and is a resource to the residents and their families.

One of the most essential duties of the Office is to provide recommendations to the administration at each center. This ongoing responsibility grants the ombudsman the opportunity to address case specific recommendations and to identify the possible systemic or isolated issues to prevent reoccurrence. This report requires and affords me the occasion to provide recommendations on a much broader and bolder scale. Senate Bill 643 Sec. 555.056(a) (3) state that our report should include: "(3) any recommendations that the Independent Ombudsman has in relation to the duties of the independent ombudsman; and (4) any recommendations that the Independent Ombudsman has for systemic improvements needed to decrease incidents of abuse, neglect, or exploitation at an individual center or at all centers." Pursuant to this charge, past reports have included recommendations that bear repeating once more. These include the following:

- 1) Protections for individuals transitioning from SSLCs into community-based settings need to be strengthened and maintained.
- 2) Expand the scope of the Office of the Independent Ombudsman to provide protections for patients in the State Hospitals.
- 3) Make efforts to improve Person Centered Practices at the SSLCs by providing on-going training to the leadership and staff.

The Ombudsman's Office is a resource for positive change at the centers and for the entire HHS system. My hope is that our recommendations will lend itself to successful outcomes for the most vulnerable citizens of our state. My thanks to the Governor and his staff, the Legislature, as well as the leadership of HHSC for their continued support. I extend my gratitude to the AIOs and the staff of the Office for their continual dedication, as well as their assistance in preparing this report.

Respectfully Submitted,

A handwritten signature in blue ink that reads "Dr. George P. Bithos" followed by a long horizontal flourish.

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



### **Office of the Independent Ombudsman**

*Members of the OIO, back row left to right: Adam Parks (Mexia), Jerome Young (Denton), Marvin Stewart (Lufkin), Brenda Frausto (San Angelo), Phyllis Matthews (Austin), Isabel Ponce (El Paso). Second Row left to right: James Arnold (Rio Grande Center), Gevona Hicks (San Antonio), Carrie Martin (Central Office), George Bithos (Central Office), Candace Jennings (Central Office), Aletrice Jones (Central Office), Robin Seale-Gutierrez (Lubbock). Front row left to right: Kellen Davis (Corpus Christi), Jill Antilley (Abilene), Susan Aguilar (Brenham), Deatrice Potlow (Richmond). Not pictured: Sharon Nielsen (Central Office).*

## **Background**

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**

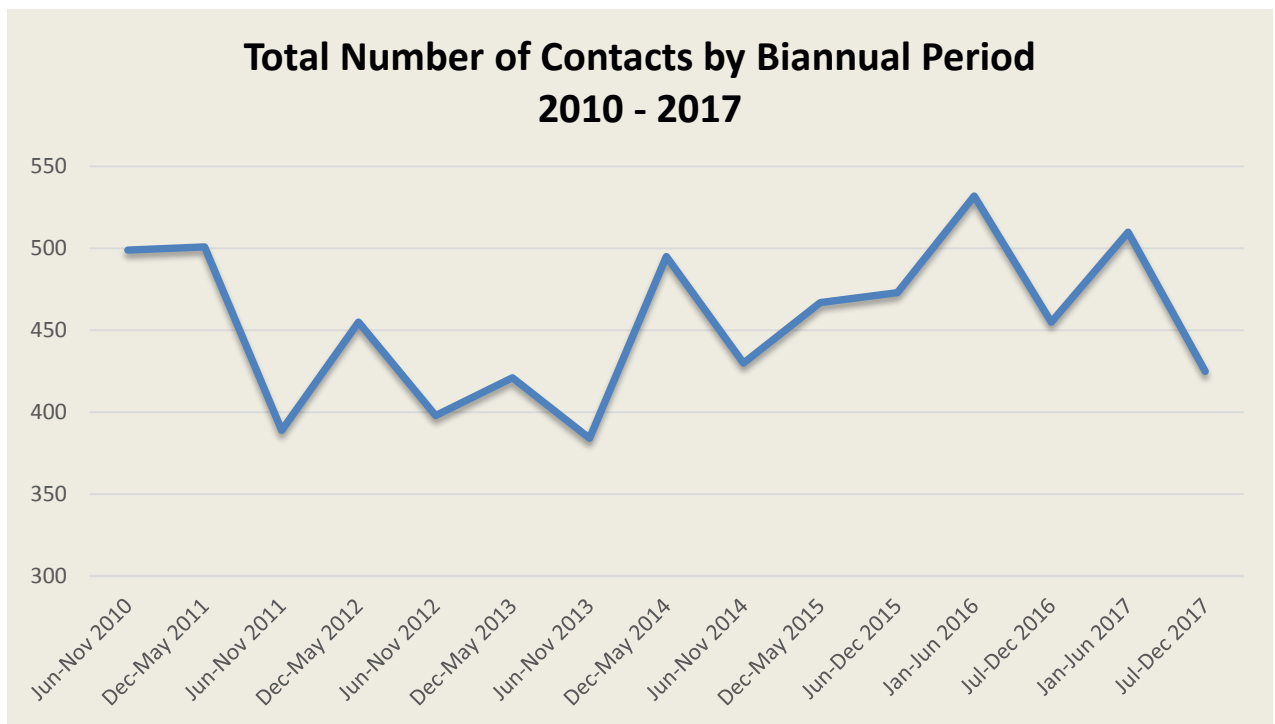
The Office maintains a reputation that is credible among residents, family members, advocates, staff, the legislature and general public of the state.

## **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 (AIOs) at each SSLC. There is also an AIO at central office responsible for managing the required audit (referred to as Program Review), as

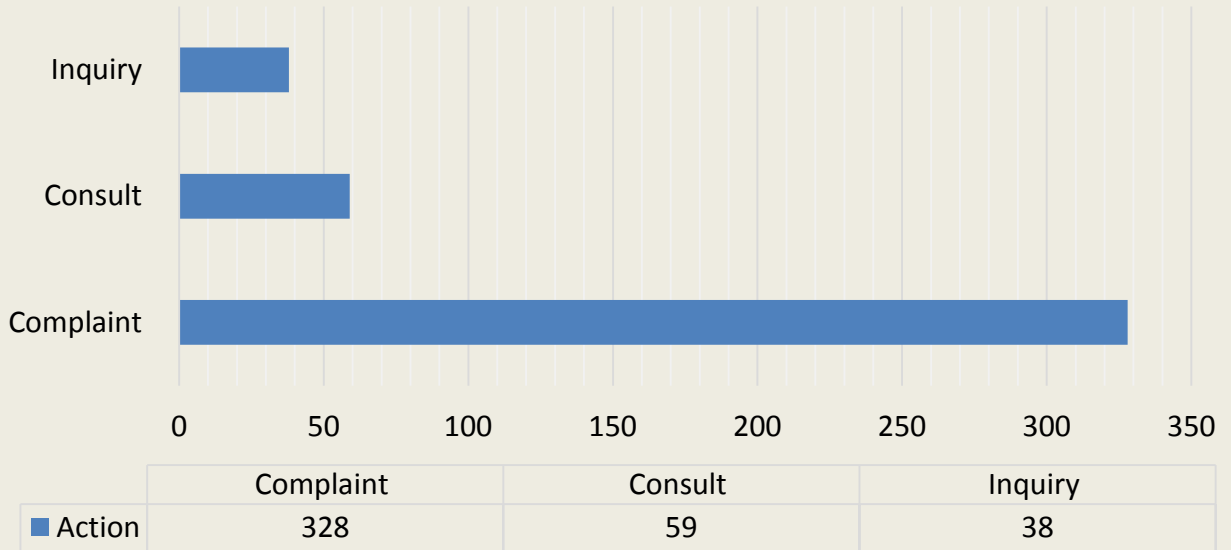
well as training and filling in for AIOs at the SSLCs. The AIOs have the same duties and powers as outlined for the Independent Ombudsman. In addition to the Independent Ombudsman and Deputy Independent Ombudsman, there is administrative staff at central office to support operations.

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.). H.E.A.R.T.S. serves as a permanent record of all contacts received 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, a total of 6,834 contacts have been recorded.

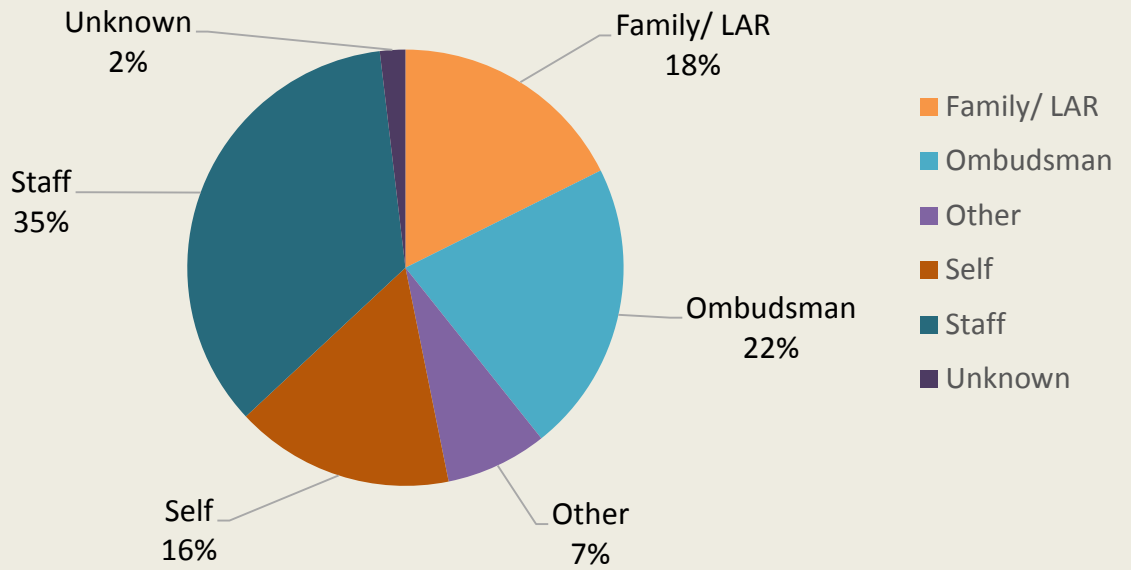


Over this six-month biannual period from July 2017- December 2018, the AIOs recorded a total of 425 contacts: complaints (328); inquiries (38); consults (59). Of these contacts, the majority were brought to the ombudsman’s attention by staff members for a total of 149 contacts (35%). The ombudsmen initiated 92 investigations (22%) and residents contacted the ombudsman with a concern 69 times (16%). Family members and LARs initiated contact 75 times (18%).

### Total Number of Contacts by Action Type July 1,2017 through December 31,2017



### Contacts by Caller's Relationship to Client July 1,2017 through December 31,2017

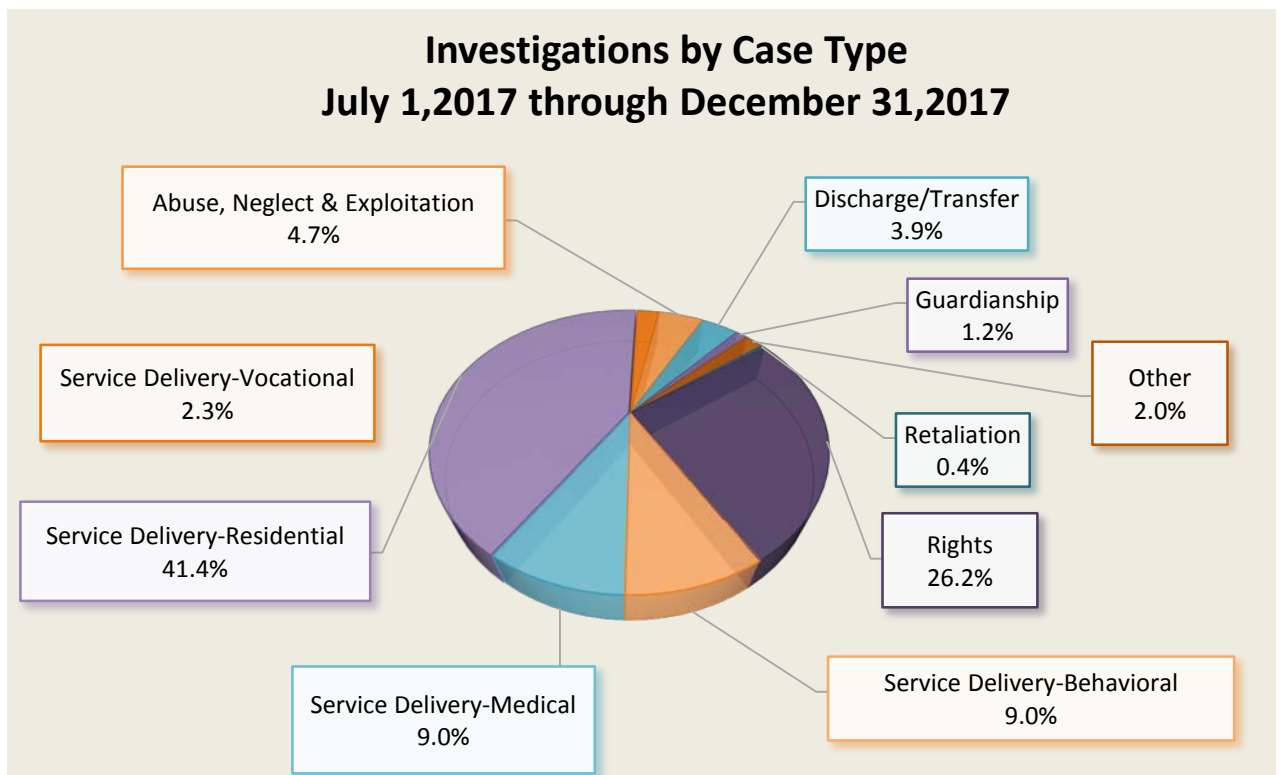




## Investigations

The AIOs follow standard investigative procedures for complaints and concerns 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 256 complaints in this biannual period. Most of the complaints investigated were regarding residential service delivery, with 106 complaints (41.4%). AIOs also investigated complaints regarding rights (26.2%), medical service delivery (9%), and behavioral support services (9%). Complaints related to Abuse, Neglect, or Exploitation (ANE) were investigated on 12 occasions; AIOs may investigate complaints related to ANE allegations however the AIOs investigation focuses on SSLC policies, procedures, practices, or may involve reviewing completed DFPS investigations.



## **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 AIO 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. There were no referrals made to Regulatory Services during this period.

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 have been a total of 74 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 (31) and concerns regarding, or initiating ANE investigation (7).

## **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 reviews all final reports of unusual incidents, ANE allegations, criminal activity, and ICF standard violations.

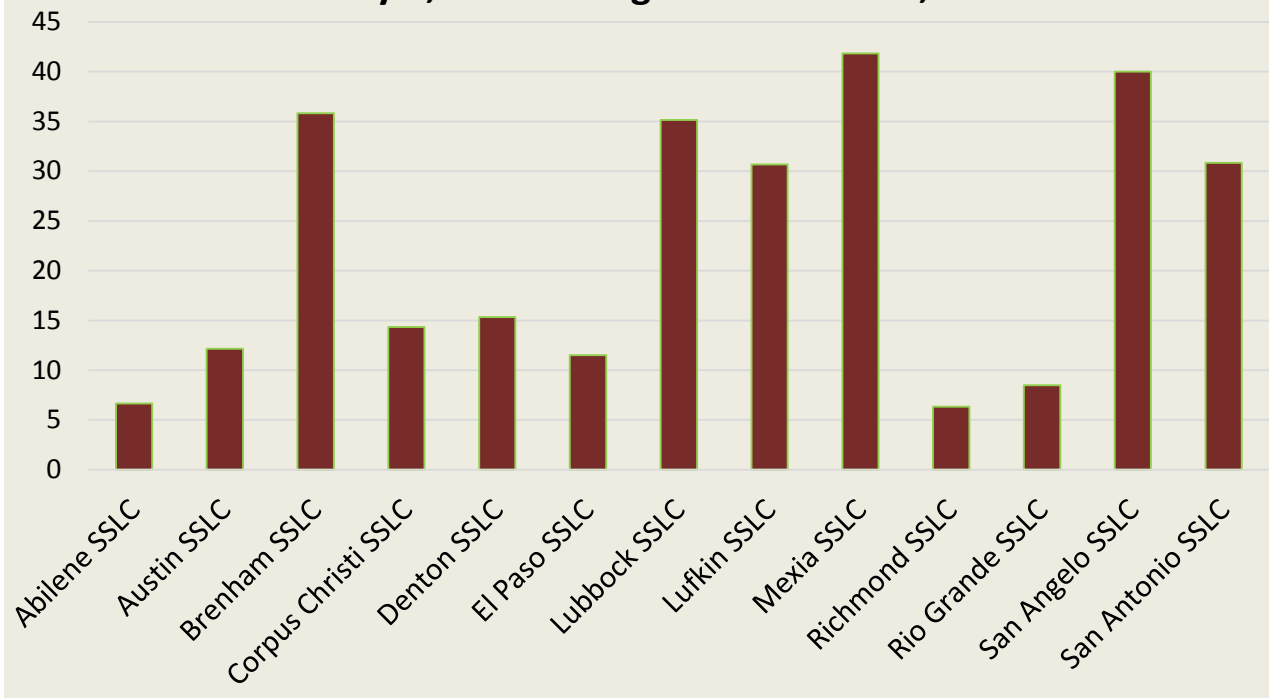
In order to evaluate the center’s investigative process, the AIO reviews whether the investigation is complete, protections for residents are adequate, recommendations are addressed completely and within a reasonable timeframe, and preventative measures are considered. The AIO also looks for any reoccurring 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.

### Unusual Incident Reviews July 1,2017 through December 31,2017

SSLC	July	August	September	October	November	December	Total	Average
Abilene SSLC	6	5	8	11	1	9	40	7
Austin SSLC	19	19	15	9	7	4	73	12
Brenham SSLC	52	15	70	37	28	13	215	36
Corpus Christi SSLC	21	13	11	19	13	9	86	14
Denton SSLC	15	11	19	25	11	11	92	15
El Paso SSLC	10	10	0	22	14	13	69	12
Lubbock SSLC	29	31	44	28	50	29	211	35
Lufkin SSLC	22	40	24	32	35	31	184	31
Mexia SSLC	23	35	71	29	19	74	251	42
Richmond SSLC	5	5	9	7	8	4	38	6
Rio Grande SSLC	4	10	11	9	9	8	51	9
San Angelo SSLC	4	54	62	40	15	65	240	40
San Antonio SSLC	17	39	47	35	33	14	185	31

### Average Number of Incidents Reviewed per Month July 1,2017 through December 31,2017



## **Advocacy**

The ombudsman takes action upon determining 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 having attended 300 meetings in this reporting period, averaging four meetings per month each.

In Senate Bill 643, legislation required 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 conducts on-going monitoring and annual on-site audits, referred to as Program Review, to identify isolated incidents and/or systemic issues in the following areas at the SSLCs:

- the ratio of direct-care employees.
- the adequacy of staff training.
- and ensuring that residents are encouraged to exercise their rights and are afforded due process, including the right to file a complaint.

The figures below reflect the Program Review activity for the 2017 reporting period, including both the on-site visits at each SSLC and the on-going data collected from September 2016 – August 2017:

- 386 staffing ratio observations conducted.
- 63 Human Rights Committee meetings attended.
- 331 family questionnaires mailed (14 returned undeliverable; 89 surveys were completed for a 28% response rate).
- 298 staff in-service training feedback questionnaires completed.
- 286 staff on-the-job training surveys received.
- 145 resident interviews completed.
- 331 staff interviews conducted.
- 331 Rights Restriction Determinations documentation reviewed.

The Annual Report is comprised of all of the data collected during the reporting period, identifies outcomes of the review by center and aggregately, and includes recommendations derived from the information collected. The 2017 Program Review Annual Report will be available in February 2018. All previous Annual Reports, including the [2016 Annual Report](#), can be found on the OIO website.

## 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-care 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 most 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, Central Office*



*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.*

*Sharon Nielsen, Executive Assistant to Dr. Bithos*



*Sharon Nielsen brings over 20 years of administrative and office management experience to the team, having worked for the federal government in Virginia and private industry in California. In 2002 she received a TWIN award (Tribute to Women and Industry) from the San Diego County YWCA for her business accomplishments and her volunteer work as a tutor of English as a second language. She joined the Office of the Independent Ombudsman in February 2011.*

*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

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 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 3-24 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 minor males. The home for the males under 18 years old currently has five 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," and its own laundry system that does laundry for Big Spring State Hospital as well as the Abilene, Lubbock, and San Angelo SSLCs.

When Hurricane Harvey became a serious threat to the Corpus Christi SSLC, AbSSLC sent numerous staff and various vehicles to assist with the evacuation. The Abilene staff assisted in transporting the people who live and work at the Corpus Christi SSLC to the San Antonio SSLC. Once the evacuation had taken place, the staff members stayed in San Antonio to provide assistance. The AbSSLC staff then assisted in transporting residents back to the Corpus Christi SSLC. The Abilene staff returned to AbSSLC on September 1 and were welcomed by a small parade upon their arrival.

	Abilene SSLC	Total SSLCs
Population	281	3004
Ages ≤21	4%	6%
Ages 22-54	49%	52%
Ages 55+	47%	42%
Level of ID: Mild	10%	17%
Moderate	16%	16%
Severe	17%	16%
Profound	56%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	44%	38%
Severe	14%	9%
Alleged Offenders: At SSLC	0.0%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	1	57

Source: Demographics provided by HHSC



The Abilene facility staff also began collecting items for those in need who lived and worked at the Corpus Christi SSLC.. A large collection of toiletries, food items, and any other necessities were gathered and delivered the first weeks of September. The AbSSLC also started training personnel on the evacuation process in October 2017.

Former Commissioner Weizenbaum visited in July prior to his retirement to see the new Lone Star Coffee and Tea House that opened in June of 2017. The coffee house business has remained steady and the facility also invites various local food trucks on campus for staff to have a little variety of food.

As the flu has become rampant this year, AbSSLC's first resident to test positive was in October and others continue to contract the virus. In an effort to control the flu from spreading, homes have been somewhat restricted for those homes where residents present symptoms.

In December, the facility held its annual 5k run to raise funds. It was a night race through the large holiday light display that runs through campus with glow sticks provided. AbSSLC also invites the public to drive through the holiday light display at no cost during the month of December. The area is called Christmas Lane. Businesses or the public can reserve a spot to display lights and figures. Food and drink is also provided with a donation which serves as a major fundraiser for the residents. Both events had a great turn out of participation.

*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.*

## Austin State Supported Living Center

Austin SSLC (AuSSLC) supports 180 people with varying degrees of intellectual disabilities, a number of whom also have physical disabilities. The center is comprised of sixteen 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 support females and males respectively, both providing 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 opportunities. In addition, the facility oversees a workshop at the Austin State Hospital serving AuSSLC residents as well as individuals residing in the community.

The Department of Justice Settlement Agreement (SA) monitoring visit occurred July 24-28, 2017. Sustained high performance scores noted during the previous review resulted in reduced SA monitoring oversight in those areas. Of particular note is the significant progress in the area of protecting people from harm. The center has maintained SA compliance and reduced monitoring continues.

The expansion of current programs and implementation of new programs continues. Greater than 80% of people living at the center have significant visual impairment; these residents continue to gain greater independence with support from the recently developed vision laboratory which provides assessment and training in daily living skills. The Vision Services Team is also piloting a new Soundscape Program which uses environmental sounds, one on one listening sessions with guided exploration, and active treatment. The Soundscape Program is designed to improve functional abilities for people with lower cognitive engagement.

During the annual program review concerns were noted regarding individualized communication supports. Habilitation therapies continues changes across all services offered and continue to implement new programming. Habilitation therapies previously completed a

	Austin SSLC	Total SSLCs
Population	180	3004
Ages ≤21	0%	6%
Ages 22-54	27%	52%
Ages 55+	73%	42%
Level of ID: Mild	5%	17%
Moderate	12%	16%
Severe	22%	16%
Profound	61%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	41%	38%
Severe	14%	9%
Alleged Offenders: At SSLC	0.5%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	0	57

Source: Demographics provided by HHSC

speech laboratory and recently increased the number of people receiving direct speech therapy (64%) and expanded the use of both shared and individual assistive communication devices. There have been consistent observations of utilizing communication supports and assistive devices.

*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 candidate for certification as a Person Centered Thinking Trainer with The Learning Community for Person Centered Practices.*

## Brenham State Supported Living Center

The Brenham State Supported Living Center (BSSLC) provides services to individuals with intellectual developmental disabilities that range from profound to mild. Many of these individuals require behavioral supports and some also require psychiatric services. 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/or physical management needs, as well as older persons who have health conditions and/or physical management needs. The second unit serves individuals who have physical management needs and/or require assistance with most activities of daily living.

	Brenham SSLC	Total SSLCs
Population	254	3004
Ages ≤21	11%	6%
Ages 22-54	60%	52%
Ages 55+	29%	42%
Level of ID: Mild	7%	17%
Moderate	23%	16%
Severe	15%	16%
Profound	55%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	30%	38%
Severe	9%	9%
Alleged Offenders: At SSLC	0.0%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	4	57

Source: Demographics provided by HHSC

The third unit comprises three male homes, representing a wide range of ages and abilities and one cottage that serves males under age 18. The individuals that reside at unit 3 represent a wide range of ages and most require some level of assistance with activities of daily living. Unit 4 comprises 6 cottages. One cottage serves females under age 18, two cottages serves adult females and the other 3 cottages serves adult males. Many of the adults 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 10 residents are working part-time in supported employment in the local community. Some residents earn money by working on craft items in the Art Center that are sold on campus and in the community. School-aged residents attend local schools.

Staff changes this reporting period included promoting staff from within the center to Director of Residential Services, 2 unit directors, and Director of Maintenance. Staff physician vacancies were filled by a physician and a family nurse practitioner. An on-campus counselor was hired and the services of a community-based counselor is being utilized in select cases. The center recently contracted with a child and adolescent psychiatrist to work on campus part-time. The need for this specialty was remarked upon during the recent Settlement Agreement Monitoring visit, given the psychiatric needs of young people that have been admitted to the center.

The SA monitoring visit occurred in October. While several improvements were noted in the monitor's preliminary comments, with final report pending, these remarks included concerns regarding a lack of engagement in meaningful activities, inconsistent implementation of ISP action plans and behavior plans. Given the number of school-aged persons, including a 9 year old, that were admitted to the center since the previous SA monitoring visit, monitors did outline steps that should be taken prior to admission of school-aged individuals, and noted that discharge/transition planning should begin at the time of admission.

Annual ICF recertification survey occurred the following month and the center was found to be out of compliance with four conditions of participation (governing body, client protections, facility staffing, active treatment) and with some standard level tags. The center did clear the condition level citations upon follow up visit and most of the standard level citations; however, active treatment was recited at the standard level. The center was cited for failure to provide continuous active treatment and failure to provide sufficient staff so that supervision and other programmatic needs could be managed. Another deficient practice was the failure to ensure that the public school provided adequate school services for some of the center's residents. While center leadership and school liaison routinely communicate and meet with school staff, the plan of correction is for the center to increase advocacy to ensure individualized educational needs are met, including in the area of social integration.

A critical incident in July 2017 resulted in the death of a resident left in a van for an extended period of time. Emergency services were called and mandatory notifications were made. The center took immediate protective actions and held town hall meetings to inform and train staff, and subsequently took further corrective actions. These actions were related to safety and the use of vehicles for transporting residents, formal procedure to account for residents' location/program attendance and developing an unauthorized departure/missing person's policy to ensure an organized and systematic response to these incidents. An unauthorized departure drill was held and some modifications were made to improve this procedure. Staff were trained on the revisions of these policies and procedures.

Excessive rain from Hurricane Harvey impacted the center and there were some roof leaks and flooding under doors, as typically seen during heavier rains. Residents remained in their homes that week. Center leadership prepared for this weather event and administrative staff were on campus throughout the weekend to actively monitor needs and assist as needed. Some staff who reside in surrounding areas were impacted by flooding of their homes and/or were unable to get to work due to flooding. The center did not have linen service from the Richmond SSLC that week.

The initial phase of construction on the adaptive sports complex (adaptive field and parking lot) has been completed. Initiation of phase II is pending, which includes restrooms and concession facilities. The enclosed pool area that was located across the street from the complex has been raised and this has increased curb appeal of the campus.

The center continues to be receptive to concerns/recommendations brought forward by the AIO as related to unusual incident review and concerns investigated by the AIO.

Recommendations made to the center this reporting period included the need for timely review of unusual incident reviews that are not APS investigations, addressing guardians' concerns about behavioral needs and safety and addressing concerns related to levels of supervision. Recommendations regarding addressing programmatic requests in a timely manner were also made by the AIO this report period.

*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 Developmentally Disabled 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.*

## Corpus Christi State Supported Living Center

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 that are medically fragile 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-campus and off-campus.

The residents of CCSSLC were evacuated to the San Antonio SSLC due to Hurricane Harvey. Thankfully CCSSLC did not take a direct hit from the hurricane. The residents began evacuating on 08/24/17 and returned to the facility on 09/01/17. A lot of coordination and teamwork went into the success of the evacuation.

CCSSLC has filled key positions including the Human Rights Officer (HRO) and Director of Behavioral Health. The Assistant Director of Programs (ADOP) position was also vacated during this biannual period.

CCSSLC encourages employment readiness through the Vocational Apprenticeship Program and off-campus positions at local businesses. Two residents were recognized for their work performance with Texas Industries for the Blind and Handicapped contracts.

Residents celebrated the seasons with a Fall Festival, Christmas decorating contest, poinsettia sale and a Christmas program and party. Other special activities included a paint class with a guest instructor, a Monster Mash themed dance, self-advocates election and Star Wars nights.

	Corpus Christi SSLC	Total SSLCs
Population	206	3004
Ages ≤21	1%	6%
Ages 22-54	53%	52%
Ages 55+	46%	42%
Level of ID: Mild	21%	17%
Moderate	12%	16%
Severe	13%	16%
Profound	54%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	51%	38%
Severe	5%	9%
Alleged Offenders: At SSLC	3.4%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	1	57

Source: Demographics provided by HHSC

*Kellen 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.*



## Denton State Supported Living Center

The Denton SSLC (DSSLC) currently provides services to 446 individual 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 are that medically fragile 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 in order to move independently. The other units are home to individuals who are able to walk without assistance and may require behavioral intervention. Although most of the population consists of older individuals, three individuals still attend public school.

	Denton SSLC	Total SSLCs
Population	448	3004
Ages ≤21	1%	6%
Ages 22-54	43%	52%
Ages 55+	55%	42%
Level of ID: Mild	12%	17%
Moderate	14%	16%
Severe	17%	16%
Profound	56%	50%
Unspecified	0%	0%
Not Indicated	1%	1%
Health Status: Moderate	43%	38%
Severe	13%	9%
Alleged Offenders: At SSLC	1.1%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	3	57

Source: Demographics provided by HHSC

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.

Lipshy Park has been a centerpiece of DSSLC for several decades due to the generous support of the Lipshy Foundation. It is a place where residents and staff may relax and enjoy the outdoors while sharing companionship. It has recently received an additional grant from the Lipshy Foundation in the sum of \$200,000.00. The funds were used to revamp the park to include a more modern environment, a tranquility fountain, and open areas to accommodate activities such as dances and parties. Also included were equipment and accommodations for viewing outdoor movies.

*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.*

## El Paso State Supported Living Center

The El Paso State Supported Living Center (ESSLC) campus is divided into two Units. The homes which have always been identified by numbers now have names. Unit one is now known as the Chihuahua Desert. It consists of six homes. Unit one does not have any co-ed homes at this time. Presently there are numerous individuals in this unit working with food services, maintenance, motor pool and recycling collection. Aside from these, many others work in the central work shop in different stations such as shredding and sorting.

	El Paso SSLC	Total SSLCs
Population	94	3004
Ages ≤21	4%	6%
Ages 22-54	65%	52%
Ages 55+	31%	42%
Level of ID: Mild	7%	17%
Moderate	16%	16%
Severe	18%	16%
Profound	59%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	27%	38%
Severe	6%	9%
Alleged Offenders: At SSLC	0.0%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	2	60

Source: Demographics provided by HHSC

Unit two, known as the Sonoran Desert, consists of one large building that contains three large dormitories formerly identified as A, B, and C are named now Jasper, Galena and Desert Rose, respectively. Tiger's Eye and Saguaro are also part of this unit. The homes in 503 Kirkland, Jasper, Galena and Desert Rose provide for those with greater medical needs. These individuals also require support with activities of daily living and many require a wheelchair or some other form of assistance in order to move around their homes. This same building located at 503 Kirkland also includes habilitation therapies, medical, dental and psychiatric clinics. A medical isolation room is also found at this location. A small number of individuals attend group activities or workshop outside their homes during the day. Others engage in similar activities in the common areas of their respective homes.

The Admissions and Placement office has a new coordinator who previously served as the Transition Specialist. This AP team has assisted two individuals in finding a place to live in the community during these last 6 months.

The facility continues to move forward with its renovation project. The last home marked for upgrades has been completed. The center however has no plans at this time to move the original occupants back into the home. This home is being considered for transitional care for individuals who may need to live in a less crowded environment on a temporary basis while their specific needs are being met.

HHSC Executive Commissioner Charles Smith visited and toured the center during the month of December. He met and spoke with both individuals and staff during his visit.

In the month of July, the vacated Behavioral Service Coordinator position was filled. During this six month period there have been three new Behavioral Health Specialists added to the team with the department now fully staffed. Also during this period the Incident Manager, Habilitation Coordinator, and Social Worker positions were filled. The Social Worker has been working closely with the HRO and will serve as a back-up for Human Rights Committee (HRC) chair.

Upon recommendation, the facility reached out to local area agencies for information assistance on how to work with individuals with IDD that have expressed a need for sex education. A representative from Volar, a local agency that provides services to people with disabilities, gave department heads a short presentation on assessment and communication to help identify the functions and needs of each individual's sexual behaviors. A small group of EPSSLC employees took a training in this area at the CCSSLC and returned with ideas and training for the El Paso teams.

Other recommendations included the re-examination of the use of tactical gloves worn during behavioral intervention and as a result, the facility removed these gloves due to the potential risk posed to the residents. There were several cases reported of individual staff making changes to resident's plan; the AIO shared that any changes to a resident's plan require instruction from the IDT after due process has been fulfilled. This concern was discussed at the final Town Hall Meeting of the year. The EPSSLC AIO also identified a pattern where residential staff were documenting challenging behavior when in fact the residents were expressing choice and exercising their rights. The facility reviewed the information provided by the AIO and implemented training for staff on discerning challenging behavior from choice.

*Isabel Ponce, Assistant Independent Ombudsman*



*Born and raised in the Sun City, Isabel Ponce went from serving the aging population to working with children. Later she came to serve adults with developmental disabilities as a residential director in the private sector. She became a certified internal investigator and began working as a case manager for a home and community service program. After seven years with the program, Ponce accepted the Assistant Independent Ombudsman position in December 2010.*

## Lubbock State Supported Living Center

The Lubbock State Supported Living Center (LbSSLC) currently serves residents who range from age 18 to 80 years at 15 homes. Three of the facility's 15 homes serve female residents while 8 serve male residents. The remaining 4 homes serve residents who are medically fragile, with 24 hour nursing provided at three of these. During this reporting period, changes were made to accommodate newly admitted residents by designating one home as the transition home. Residents are admitted to this home, receive evaluations and assessments, and transition to other homes which fit their needs better once they have adjusted to their new living environment.

	Lubbock SSLC	Total SSLCs
Population	182	3004
Ages ≤21	4%	6%
Ages 22-54	61%	52%
Ages 55+	35%	42%
Level of ID: Mild	15%	17%
Moderate	13%	16%
Severe	13%	16%
Profound	57%	50%
Unspecified	0%	0%
Not Indicated	3%	1%
Health Status: Moderate	42%	38%
Severe	8%	9%
Alleged Offenders: At SSLC	2.2%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	5	57

Source: Demographics provided by HHSC

One of the female homes was reconfigured to serve female residents with behavioral needs. During this reporting period, a total of 45 residents have moved to another home to better meet their needs. Most of these moves occurred in August (18) and October (21).

There are 123 residents working either in the sheltered workshops or in supported employment at the center and in the community. There are currently 12 residents working in the community. In addition, there are 42 residents who are working on campus in minimum wage positions.

The ADOP retired in August and a new ADOP, who was previously the HRO, started in September, along with a new HRO who started in October. Staffing within the medical department is improving with a dentist and nurse practitioner hired. A new psychiatrist and another Nurse Practitioner will join the department in January.

Over the past 6 months, Regulatory Services has exited the facility several times. In July, the facility cleared the citations received in the annual recertification survey in June. For all other visits, there were no citations until December. In December, the facility was cited for staff training in relation to staff not being trained at the resident's new home regarding their restrictions, as well as general confusion regarding how to maintain appropriate levels of supervision.

The facility sent 5 vehicles and 14 staff to assist CCSSLC's return to their campus following evacuation to San Antonio SSLC (SASSLC). The 14 staff sent included: nursing staff, who provided direct nursing care the day prior and the day of the return, maintenance staff who assisted with equipment transfer, and risk management staff who assisted with client transport.

A variety of recommendations were made over this reporting period. Three involved issues related to rights and documentation of due process. Recommendations were made addressing due process for possible restrictive practices affecting groups of residents, possible restrictive behavioral contracts, and issues related to guardians and residents not attending addendum meetings where significant decisions are made. Actions have been taken by the facility in regard to these issues and follow up is currently pending.

Two additional recommendations addressed behavioral programmatic delivery issues where plans were not revised to provide needed support in the areas of medication compliance and pica prevention. The medication compliance issue was found during a routine follow up regarding a case from August 2016 and has been corrected. The second issue was also related to pica prevention supports. A resident required another hospitalization and invasive surgery following a mass of gloves being found in his gastrointestinal tract. This was the second incident within the past year. Recommendations had been made previously for this resident following the first incident in February. The follow up period has been extended two times due to concerns related to supports not being implemented. The facility has been very responsive when these issues were brought to their attention.

Two recommendations were related to staffing requirements and staff training. As a follow up to a case from May 2017, additional recommendations were provided to the facility regarding concerns of the adequacy of the staffing requirement for one home. Given the level of need of the residents and the minimal staffing requirement, it was questionable that all of the residents' needs were being met. The final case summary was related to the failure to implement the facility's on-campus transfer procedure which resulted in a resident having access to a lighter from which he was restricted due to a history of arson. This resident started a fire in his home in November because the staff at the home that he moved to in August had not been trained on his current restrictions. The facility is currently addressing this by ensuring that all staff are aware of a resident's restrictions by adding this information to the levels of supervision forms. This issue was also cited by Regulatory Services in December and plan of correction is pending.

*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.*

## Lufkin State Supported Living Center

The Lufkin State Supported Living Center (LfSSLC) provides support services for 295 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 medical services and supports to several medically fragile people. The center also provides services to 16 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.

	Lufkin SSLC	Total SSLCs
Population	295	3004
Ages ≤21	11%	6%
Ages 22-54	43%	52%
Ages 55+	46%	42%
Level of ID: Mild	8%	17%
Moderate	13%	16%
Severe	19%	16%
Profound	60%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	34%	38%
Severe	13%	9%
Alleged Offenders: At SSLC	0.3%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	5	57

Source: Demographics provided by HHSC

The LfSSLC continues to actively seek community placement for people who are ready for transition, and needed services can be adequately provided 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 four active referrals. Over the past six months the center has transitioned five people (no adolescents) into a community setting, and admitted four people (two adolescents). Thus far, all community transitions that occurred within the past six months have been successful.

The LfSSLC currently has all full-time primary care physician and psychiatrist positions filled. Two new respiratory therapist positions, and an on-campus pulmonary clinic has been added to the array of medical services already offered. The Dental Director and Admissions/Placement Coordinator positions are currently vacant. The center is also working to fill empty positions within direct care, nursing (RN), and dieticians. Over the past six months several new department directors were hired and include the QIDP Coordinator, Safety Officer, Employee Injury Specialist, Reimbursement Officer, and an Advanced Practitioner Registered Nurse to provide management over certain aspects of medical services.



Over the last year the LfSSLC has continued to remodel residential homes and support services buildings on campus. To help with security the center updated fencing surrounding the campus. The center has begun construction of a wood-working shop and green house in order to offer people living at the center more engagement/work opportunities. The center has also begun working with local colleges to provide services to people living at the center.

HHSC Regulatory has entered the facility on several occasions to investigate complaints, and incidents requiring report by the center. The center was cited in the areas of health care services, governing body and management, active treatment, and client protections. Deficiencies concerning health care services, and governing body and management were originally from the center's annual re-certification survey in April 2017. Plans of correction were successful for these deficiencies. In late December, the center was cited a deficiency in the area of client protections. The center has also been participating in corrective action plans (CAPS) directed by SSLC State Office in the areas of pneumonia, skin integrity, quality assurance, protection from harm, and engagement. These are areas pointed out by the Department of Justice (DOJ) court monitors as needing marked improvement. The center meets regularly with the SSLC State Office staff to discuss plans of improvement due to lack of progress, or to make note of progress in these areas. Overall, it is my opinion that progress is being made in these five areas. The last DOJ court monitor visit occurred in July 2017. The next scheduled visit is in April 2018.

Immediately following Hurricane Harvey, the LfSSLC provided shelter for Spindletop Community Living from Beaumont, Texas. The center provided shelter for just under two weeks. A few of the center's Direct Support Professionals helped the SASSLC provide support services for people evacuated from the CCSSLC.

*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 of 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.*

## Mexia State Supported Living Center

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; 53% of the population is an alleged offender. MSSLC provides specialized forensics training for employees in order to better serve the individuals who are currently being admitted into the facility. Ninety percent of the total population are males; 43% of the population is under the age of 30; 70% of the population has resided at MSSLC for 10 years or less; 8% of the population is considered a minor 35% of the adult population has a guardian .

	Mexia SSLC	Total SSLCs
Population	241	3004
Ages ≤21	17%	6%
Ages 22-54	61%	52%
Ages 55+	21%	42%
Level of ID: Borderline	1%	0%
Mild	46%	17%
Moderate	27%	16%
Severe	6%	16%
Profound	19%	50%
Unspecified	2%	0%
Not Indicated	0%	1%
Health Status: Moderate	32%	38%
Severe	5%	9%
Alleged Offenders: At SSLC	53.5%	5.9%
Deemed High Risk	6.6%	0.5%
Community Transitions	22	57

Source: Demographics provided by HHSC

There are six 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 HRD 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 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. The most medically fragile individuals live within the Martin Unit and require more staff assistance than any of the other units. Martin Unit provides 24 hour nursing care. Central Unit has three homes, two of which are homes that have been decertified from the federal Intermediate Care Facilities for Individuals with Developmental Disabilities (ICF-IDD) conditions of participation. These 2 homes are secure at all times. Central 1 home is the only home certified in this unit.

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, as well as a mowing crew. There is a greenhouse which sells plants to the public year round, with a high volume of poinsettia sales during the holiday season. The facility woodshop repairs furniture in the facility and it also builds and sells wood outdoor furniture to the public. MSSLC has a

General Store in the city of Mexia. This store allows the sale of products from the woodshop as well as the greenhouse. The General Store also provides employment opportunities for the individuals of MSSLC. School aged individuals attend classes at Mexia ISD at the Mexia ISD Development Center. MSSLC 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.

Mexia SSLC is continuing their plan to remodel all the homes on campus. Progress is being made in this area. The Longhorn Unit and Central Unit have been completed. The contractors have started work on the Barnett Unit.

The facility is continuing with the HRD process for new admissions and for annual updates. MSSLC is working to facilitate transfers of individuals (who are non-forensic) to community settings or to other SSLCs. There were three new individuals designated as high risk through the HRD process: one wished to appeal without assistance from the OIO and the two others did not wish to appeal, per their guardian's request. Appeals were heard for three individuals, who were previously found to be high risk on July 14, 2017. All three were assisted by the Office of the Independent Ombudsman with their appeal. One of those individuals was identified as high risk, and the two others are pending the judge's ruling.

MSSLC cleared their directed plan of correction on 12/13/17. MSSLC with help of people from AuSSLC as well as other SSLCs were able to clear their DPOC in time for annual certification. MSSLC staff worked rigorously to ensure that the deficiencies found by Regulatory were fixed. MSSLC is still working on a plan of correction for standard level deficiencies.

MSSLC has seen a few key positions change: The facility has hired a new Director, new ADOP, and HRO. They currently have an interim Chief Nursing Executive and interim Medical Director.

Some restrictive practices at MSSLC, were being implemented without due process. HRC Referral's and ISPA's were taking weeks and sometimes even months to be reviewed in HRC. This is not providing for the individual's due process and is in conflict with current policy. After reviewing HRC documents and following HRC for three months it was determined that it was a prioritization issue and a training issue. The new HRO and the ADOP have been working on set deadlines for QIDPs to get this documentation to the HRC. Also, further oversight for emergency restrictions are happening at IMRT and unit morning meetings.

*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.*

## Richmond State Supported Living Center

Richmond State supported Living Center (RSSLC) opened in in 1968. The 241-acre state supported living center has a total of 24 homes. Trinity, San Antonio and Leon Homes are divided into 4 living areas on each of the homes. Trinity D is the only co-ed home on Campus. There are three work centers on campus where residents attend from 8:30 am – 4:00 pm. The Main workshop has contractual work where residents perform a variety of job tasks 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 55+ located at the Forever Young building on campus. 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.

	Richmond SSLC	Total SSLCs
Population	324	3004
Ages ≤21	2%	6%
Ages 22-54	50%	52%
Ages 55+	47%	42%
Level of ID: Mild	10%	17%
Moderate	10%	16%
Severe	18%	16%
Profound	59%	50%
Unspecified	3%	0%
Not Indicated	1%	1%
Health Status: Moderate	52%	38%
Severe	4%	9%
Alleged Offenders: At SSLC	0.6%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	4	57

Source: Demographics provided by HHSC

HHSC Regulatory entered approximately nine times during this reporting period. During those times several investigations were conducted that resulted in approximately 10 incidents unsubstantiated and not cited, one incident substantiated and not cited, four incidents substantiated with citations, and two incidents unsubstantiated with citations. In addition, HHSC Regulatory conducted an annual survey of recertification with conditions and standard level of deficiencies. The Regulatory Life Safety Team entered in October and identified issues in areas of portable fire extinguisher, corridor door spots, fire alarm horn, sprinkler pits, generator clearance/ functioning. The Team returned and cleared all deficiencies.

RSSLC continues to hire Direct Support Professionals (DSP) on an ongoing basis. Administrative and other professional vacancies were filled as well. The Incident Management Coordinator and vacant investigative positions were filled, RSSLC also appointed an Interim Director of Residential Services.

During the biannual period, there was record flooding as a result of Hurricane Harvey. Due to adequate planning and organization of available resources, RSSLC fortunately sheltered in

place. RSSLC provided resources for staff as well as provide shelter to other individuals with IDD and medical needs that live off campus.

RSSLC continued outreach to the community by hosting the Spring Provider Fair and committing to help save lives and hosting an annual blood drive. RSSLC is working to maintain the areas of engagement and active treatment by having on-campus events and utilizing the available resources on campus to promote positive engagement and participation, such as: a semi-formal Candy Cane Ball with featured guests Mr. and Mrs. Santa, taking a break at the Lite Rock Café, Gym activities with food and games, or going to the Coffee Shop for computer time while drinking a beverage of choice or to socialize, the annual provider fair, Annual Breast Cancer Walker, the 10th Annual Caroling Celebration, as well as providing and supporting religious services and events.

The AIO continues to meet the center's Director bi-monthly to share updates, emails and concerns with the ADOP. The AIO has made many recommendations to the facility resulting from cases of complaints, observations, meetings, documentation review in IRIS, and reviews of DFPS investigative reports and the center has adopted most of them. The most recent was to address a concern that a resident's name was listed on DFPS's chronic caller that seemingly did not meet the minimum criteria as listed in the APS Policy Handbook. This was discussed in detail and will be addressed in the next DFPS quarterly meeting.

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. The AIO presents to the New Employee Orientation class monthly, visit and monitors the home and share concerns with Administration and team members and most importantly with the residents, as well as communicating with guardians, family members, and off campus entities.

*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.*

## Rio Grande State Center

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 more medically fragile. The two homes serve a population that would typically be served by more than two homes at other facilities.

	Rio Grande Center	Total SSLCs
Population	62	3004
Ages ≤21	8%	6%
Ages 22-54	71%	52%
Ages 55+	21%	42%
Level of ID: Mild	5%	17%
Moderate	23%	16%
Severe	24%	16%
Profound	39%	50%
Unspecified	0%	0%
Not Indicated	10%	1%
Health Status: Moderate	19%	38%
Severe	2%	9%
Alleged Offenders: At SSLC	0.0%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	1	57

Source: Demographics provided by HHSC

The ICF Director position continues to be vacant since August of last year. The Incident Management Director position continues to be served on an interim basis, who is also the HRO. However, due to vacancies in the QIDP department, the HRO also filled in as QIDP in November and December. During that time the HRO for the mental health clinic was the designated chair of HRC.

HHSC Regulatory entered RGSC four times during this biannual period. Out of the four times that, RGSC was cited during their annual survey in September. RGSC was cited with a total of 26 deficiencies. They have since been cleared of the deficiencies.

RGSC vocational department started seeking employment with local businesses for residents. They also started to work with Texas Workforce Commission to find gainful employment. During the holiday season a number of individuals were employed with the Salvation Army as door greeters/ bell ringers.

*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.*



## San Angelo State Supported Living Center

San Angelo SSLC (SGSSLC), located about 15 miles north of San Angelo in Carlsbad, is home to 212 residents with profound to mild developmental and physical disabilities. There are currently 17 homes with two homes dedicated to geriatric residents and two for medically fragile residents. There are two homes that serve people with a pica diagnosis and autistic features. SGSSLC was 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 inappropriate sexual 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 court system because they have been found incompetent to stand trial for criminal offenses. A large number of SGSSLC's population has a dual diagnosis (IDD with a mental illness) requiring behavioral health services.

	San Angelo SSLC	Total SSLCs
Population	212	3004
Ages ≤21	9%	6%
Ages 22-54	78%	52%
Ages 55+	24%	42%
Level of ID: Mild	58%	17%
Moderate	23%	16%
Severe	8%	16%
Profound	10%	50%
Unspecified	0%	0%
Not Indicated	2%	1%
Health Status: Moderate	24%	38%
Severe	6%	9%
Alleged Offenders: At SSLC	12.3%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	7	57

Source: Demographics provided by HHSC

SGSSLC provides many employment opportunities to residents. To date, 99 residents are employed at the work center. 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. There are currently 5 residents working off campus in enclave work that includes providing recycling services to surrounding communities and one resident in supportive employment. Twenty-six residents work on campus in various positions at the Canteen, Administration, Beauty Shop, Chapel, Coffee House, Gym, and in the Occupational and Physical Therapy department. There is a greenhouse where residents grow and sell plants to the public, Unique Creations where residents sell wood work and hand-crafted items, and an endeavor to raise chickens to sell eggs. The 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.

The 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 are supported in attending religious services of their choosing off campus if desired.

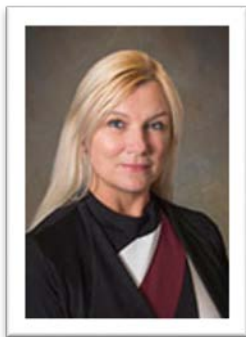
Residents hold monthly self-advocacy meetings and publish a monthly newsletter. Several residents participated in the 2017 Texas Advocacy Conference in Corpus Christi. Residents have weekly home meetings to discuss weekly activities and participate in problem solving for any concerns or issues in the home.

Over the last six months, the SGSSLC had a total of 14 visits from HHSC Regulatory resulting in zero citations for these visits.

The AIO noted that many of the residents have had traumatic events in their past that continue to negatively impact their daily lives. The AIO also noted that the SGSSLC does not employ any trauma or post-traumatic stress disorder counselors; therefore, the residents are not receiving any treatment. The AIO recommended that counseling services be sought outside of the center. The administration obtained permission to arrange for counseling through the West Texas Guidance and Counseling Center in San Angelo which employs bilingual, certified cognitive behavioral therapy for trauma and post-traumatic stress disorder.

The AIO observed critical incident meetings involving sexual occurrences where residents along with the respective IDT's were prompted to discuss detailed sensitive and personal information during the group meeting resulting in the resident's dignity and confidentiality being compromised. The AIO discussed this concern with administration and recommended training for staff on meeting the requirements of a Critical Incident meeting while respecting the resident's dignity and confidentiality. SGSSLC staff received this training and the AIO continues to monitor the critical incident meetings.

*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 Antonio State Supported Living Center

The San Antonio State Supported Living Center (SASSLC) opened in 1978 and currently provides support serves for 225 individuals with intellectual, developmental and physical disabilities, ranging in age from 19 to 83 years. SASSLC is 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 includes on-site pharmacy, on-site dental clinic, physician, psychiatry, nursing and nutrition services, and speech and habilitation therapies.

	San Antonio SSLC	Total SSLCs
Population	225	3004
Ages ≤21	2%	6%
Ages 22-54	60%	52%
Ages 55+	38%	42%
Level of ID: Mild	14%	17%
Moderate	18%	16%
Severe	20%	16%
Profound	48%	50%
Unspecified	0%	0%
Not Indicated	0%	1%
Health Status: Moderate	28%	38%
Severe	3%	9%
Alleged Offenders: At SSLC	0.9%	5.9%
Deemed High Risk	0.0%	0.5%
Community Transitions	2	60

Source: Demographics provided by HHSC

The residents have access to a developmental center which accommodates vocational workshops, habilitation programs, gymnasium, swimming pool, and computer lab. SASSLC currently has 115 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 completing Aktion Club community service projects, participation in Special Olympics, volunteering at area church and animal shelter, annually attending the Texas Advocates Conference and annually competing in SSLCs Music Festival. The campus is located near several shopping venues and business which are frequently visited by residents.

In July 2017, the ADOP position was filled by the previous Incident Management Coordinator for SSLCs. Other administrative staff positions filled in past six months included Residential Director-Unit I, Admission Placement Coordinator and Post Move Monitor. Current vacancies include HRO and Social Work Director.

Regulatory Annual Recertification Survey occurred in July 2017. Additionally surveyors have entered the center for to conduct investigations on 5 occasions in past 6 months. The facility has submitted and implemented plans of corrections for standard level deficiencies.

In preparation for Hurricane Harvey, SASSLC received 213 Individuals and over 100 staff members from CCSSLC. This number grew to more than 170 staff that included drivers and para-transit vehicles, DSPs, and other professional staff from Abilene, Lufkin, Austin, San Angelo, Lubbock, and Denton SSLCs as well as staff from the SSLC State Office.

In the past six months, the center has received three admissions: one person transferred to another SSLC, one person was transitioned to the community, and one person returned to the center after an unsuccessful community transition. At the time of this report, there are 12 individuals referred for community placement.

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 meetings, employee trainings and when developing plans for systematic changes.

The AIO has made numerous recommendations related to individual services and systemic improvements. The facility implemented these recommendations and improvement has been noted in issues consistently being addressed in accordance with policies and guidelines. One recommendation addressed the need for integration of clinical analysis. It was recommended that the center develop methods of notifying interdisciplinary teams (IDTs) of recommendations from clinical committees' health care reviews, for IDT review and integration into Individual Support Plans. The Medical Director accepted the recommendation and developed actions plans for implementation.

*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 manager, 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.*

## Appendix: Data

Contacts by Action Type by SSLC July 1, 2017 through December 31, 2017

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	State Office	Total
<b>Complaint</b>	7	15	24	13	16	70	80	17	14	26	6	11	29		<b>328</b>
<b>Consult</b>	8	4	0	0	1	5	20	9	4	0	0	1	7		<b>59</b>
<b>Inquiry</b>	2	13	1	4	4	1	0	7	0	0	1	1	2	2	<b>38</b>
<b>Total</b>	<b>17</b>	<b>32</b>	<b>25</b>	<b>17</b>	<b>21</b>	<b>76</b>	<b>100</b>	<b>33</b>	<b>18</b>	<b>26</b>	<b>7</b>	<b>13</b>	<b>38</b>	<b>2</b>	<b>425</b>

Contacts by Relationship to Resident by SSLC July 1, 2017 through December 31, 2017

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	State Office	Total
<b>Family/ LAR</b>	2	3	9	3	2	10	11	11	0	11	0	4	9	0	<b>75</b>
<b>Ombudsman</b>	4	4	2	8	3	13	18	5	3	12	6	0	14	0	<b>92</b>
<b>Other</b>	1	14	1	1	2	2	2	2	2	0	0	3	0	2	<b>32</b>
<b>Self</b>	0	0	7	1	6	3	33	0	8	1	0	5	5	0	<b>69</b>
<b>Staff</b>	7	11	6	4	8	48	34	14	4	2	0	1	10	0	<b>149</b>
<b>Unknown</b>	3	0	0	0	0	0	2	1	1	0	1	0	0	0	<b>8</b>
<b>Total</b>	<b>17</b>	<b>32</b>	<b>25</b>	<b>17</b>	<b>21</b>	<b>76</b>	<b>100</b>	<b>33</b>	<b>18</b>	<b>26</b>	<b>7</b>	<b>13</b>	<b>38</b>	<b>2</b>	<b>425</b>

Contacts per Month by SSLC July 1, 2017 through December 31, 2017

SSLC	July	August	September	October	November	December	Total
<b>Abilene SSLC</b>	5	0	4	3	3	2	<b>17</b>
<b>Austin SSLC</b>	6	5	7	1	5	8	<b>32</b>
<b>Brenham SSLC</b>	3	6	2	1	7	6	<b>25</b>
<b>Corpus Christi SSLC</b>	1	4	6	1	2	3	<b>17</b>
<b>Denton SSLC</b>	4	4	5	4	2	2	<b>21</b>
<b>El Paso SSLC</b>	10	12	16	13	13	12	<b>76</b>
<b>Lubbock SSLC</b>	16	13	27	19	14	11	<b>100</b>
<b>Lufkin SSLC</b>	3	6	7	6	7	4	<b>33</b>
<b>Mexia SSLC</b>	3	1	4	2	4	4	<b>18</b>
<b>Richmond SSLC</b>	1	4	4	1	8	8	<b>26</b>
<b>Rio Grande SSLC</b>	2	0	0	2	2	1	<b>7</b>
<b>San Angelo SSLC</b>	4	2	1	1	2	3	<b>13</b>
<b>San Antonio SSLC</b>	5	11	5	6	5	6	<b>38</b>
<b>State Office</b>	1	0	0	1	0	0	<b>2</b>
<b>Total per month</b>	<b>64</b>	<b>68</b>	<b>88</b>	<b>61</b>	<b>74</b>	<b>70</b>	<b>425</b>

## **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 provide 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 (candidate for certification)