



2022



# Biannual Report

July — December

Duties and Activities of the Office



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# Executive Summary

The statute that established the Office of the Independent Ombudsman in 2009, Senate Bill 643 of the 81st legislature, stipulates that the office submit a biannual report to the governor, the lieutenant governor, the speaker of the house of representatives, and the chairs of the standing committees of the senate and the house of representatives with primary jurisdiction over state supported living centers that includes:

- 1) the work of the Independent Ombudsman,
- 2) the results of our reviews or investigations, and
- 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.

In addition to data presented here, there is a variety of brief stories from Assistant Independent Ombudsmen (AIO) across the state in the disaggregated section of this report that provide a glimpse into the varying daily work of the ombudsman. There is also a summary of the first completed systemic investigation completed by our office. The findings from this investigation yielded recommendations regarding psychotropic medication and due process. The unique role of our office provides for a constructive process that leads to improvement in the SSLC's processes. This ultimately impacts the right for residents to receive due process and person-centered healthcare.

This Biannual Report includes activity of our office from July 1<sup>st</sup> to December 31<sup>st</sup>, 2022. This office recently distributed a [Biennial Report](#) with comprehensive results and recommendations from our mandated audits in the areas of staffing, training, and rights to the 88th legislature. It is intended to equip state leaders for action that supports residents of the SSLCs. Recommendations made by this office since its inception have implored the state to address staffing challenges to recruit, retain, and train quality direct support professionals who support residents with person-centered practices. The Texas Health and Human Services administration has addressed the workforce shortage with recruitment and retention strategies. This office recommends sustained action by state leadership to fulfill requests for additional resources.

Thank you for your continued support as we strive to serve as a resource for residents, staff, and family members.





*The Office of the Independent Ombudsman for State Supported Living Centers. Front row left to right: Adam Parks, Talya Hines, Isabel Ponce, Kellen Davis, Jill Antilley, Susan Aguilar, Deatrice Potlow, Jessica Rosa, Gevona Hicks, Candace Jennings. Second row left to right: Brenda Fausto, James Clark, Horacio Flores, Edward Leal, Brian Morton, Brianna Teague, Carrie Martin, Seth Bowman.*

## Central Office



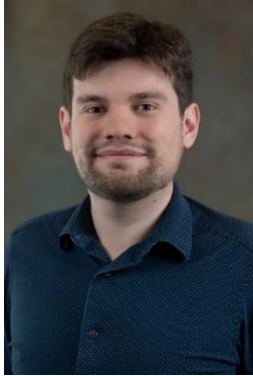
**Candace Jennings**  
**Independent Ombudsman**

In June 2021, Mrs. Jennings was appointed by Governor Abbott to lead the OIO. She joined the office as Deputy Independent Ombudsman in 2010, working alongside Dr. Bithos to establish the newly appointed office. Mrs. Jennings began serving people with developmental disabilities in direct care as a college student in San Marcos, Texas. Her professional experience includes serving the San Antonio community as a Child Protective Services investigator, service coordinator and manager at the Local Intellectual and Developmental Disabilities Authority, and Rights Protection Officer at the San Antonio SSLC. She received her undergraduate education in Social Work at Southwest Texas State University and earned a Master of Public Administration degree at University of Texas at San Antonio. She is certified by The Learning Community for Person Centered Practices as a Person-Centered Thinking trainer and is currently pursuing a PhD in Applied Demography from University of Texas at San Antonio.



**Carrie Martin**  
**Deputy Independent Ombudsman**

Carrie Martin has pursued social justice for over 15 years and has 10+ years' experience serving in various roles advocating on behalf of those living with IDD. She is a champion of change, skilled in process improvement practices, strategic planning and values systemic problem solving, open communication and enhancing our community. She is passionate about leading the ombudsmen across the state and creating a culture that facilitates meaningful change and improves the lives of the residents of the state supported living centers. Mrs. Martin formerly served as the Lead Assistant Independent Ombudsman for the OIO, then Operations Manager, and in August 2021, she was hired as the Deputy Independent Ombudsman.



**Brian Morton**  
**Lead Project Specialist**

Brian Morton joined the Office of the Independent Ombudsman in 2020. As the Lead Program Review Project Specialist, he leads development of the office's legislatively mandated reports to the legislature. He strives every day to help ensure that the Texas Legislature and people of Texas are provided with accurate and useful data regarding the rights and living conditions of residents at state supported living centers. He is passionate about human rights, using data to illuminate and solve problems, and the implementation of public policy. Prior to joining the office of the Independent Ombudsman, Brian was a Bill Analyst at the Texas Legislative Council, and before that he interned in the Colorado Governor's Office and the Colorado General Assembly. He holds a bachelor's degree from the University of Colorado Boulder.



**Brianna Teague**  
**Project Specialist**

Brianna Teague was born and raised in the Houston, TX area. After receiving a Bachelor of Arts Degree in Anthropology with a minor in English from Texas A&M University, she obtained a master's degree at the University of Houston in Anthropology, specializing in Medical Anthropology. She has previous experience as a research assistant in the Health and Human Performances department at the University of Houston and as a disability specialist with the Social Security Administration. Additionally, she is an Adjunct Professor at Austin Community College. Mrs. Teague specializes in research, data analysis and management support. She joined the Office of the Independent Ombudsman for SSLCs in December 2021.



**Jessica Rosa**  
**Administrative Assistant**

Jessica Rosa was born and raised in Austin, TX. She attended Austin Community College and Concordia University where she studied Finance. She began her professional career working for several financial institutions providing banking services for the community. She eventually moved on to provide billing and money management assistance for D&S Community Services, a leading provider of residential services and supports for individuals with intellectual and developmental disabilities where she experienced how rewarding it was to help others in need. She then transitioned into to Excel Finance Company where her results driven personality led her to effectively streamline processes and provide administrative and accounting support for over 30 offices across Texas, New Mexico, and Louisiana. Ms. Rosa has experience in report development, data management, and administrative operations. After years of tenure and much experience gained, she joined the Office of the Independent Ombudsman central office team in 2019.

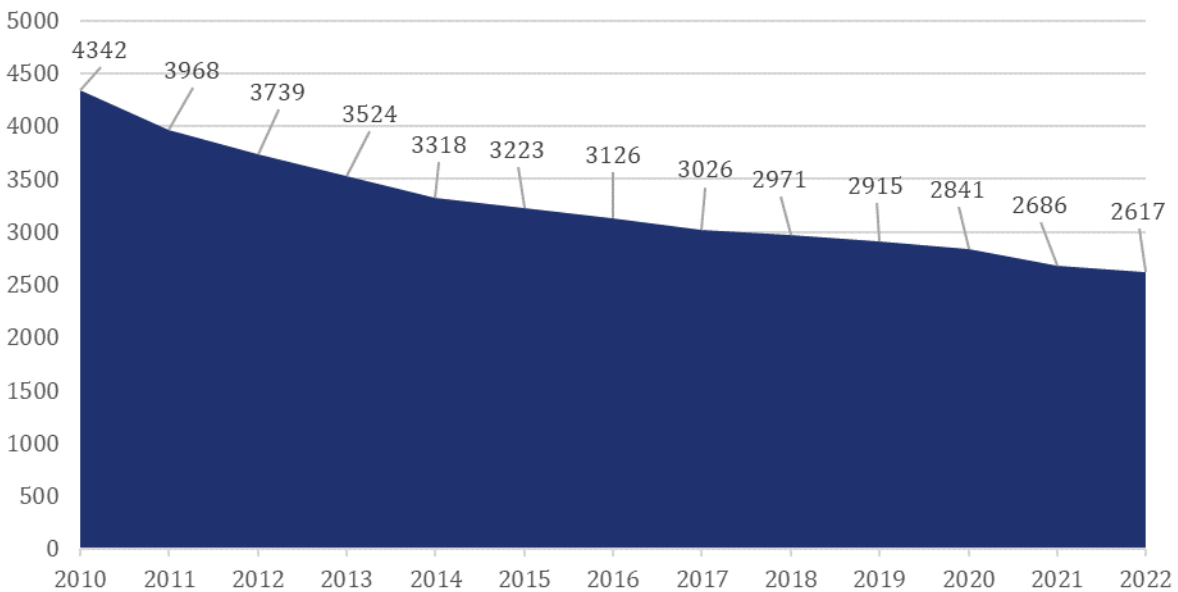
# SSLC Resident Population



Across the state of Texas there are 13 state supported living centers which are home to 2,617 people with intellectual and developmental disabilities. Residents of the SSLCs are provided with life skills training and occupational, physical and speech therapies. Additionally, each SSLC offers 24-hour residential services, comprehensive behavioral treatment, and healthcare including medical and dental services. Many residents are employed by local businesses, and children and adults up to age 22 can receive public education through local school

districts. The demographic data provided in this report was obtained on January 2, 2023, from the Health and Specialty Care System division of Texas Health and Human Services, which manages the centers. When the Office of the Independent Ombudsman for SSLCs started in 2010, the SSLC population was 4,342, and since then there are 1,725 fewer residents. This is because the number of residents moving out of the SSLC system or passing away is greater than the number of new admissions. There has been a consistent year-to-year decline in the number of residents living at the SSLCs, with San Angelo and Mexia SSLCs having the greatest decrease in population since 2010. However, centers continue to regularly admit new residents who may be best served by the SSLCs.

**SSLC Population**  
2010-2022





**Table: Resident Census and Difference in Resident Census between 2010 and 2022**

SSLC	2010	2022	Change in	Percentage
Abilene	466	238	-228	-49%
Austin	389	162	-227	-58%
Brenham	362	228	-134	-37%
Corpus Christi	305	171	-134	-44%
Denton	563	381	-182	-32%
El Paso	138	99	-39	-28%
Lubbock	231	197	-34	-15%
Lufkin	411	235	-176	-43%
Mexia	443	220	-223	-50%
Richmond	419	301	-118	-28%
Rio Grande	71	68	-3	-4%
San Angelo	262	129	-133	-51%
San Antonio	282	188	-94	-33%
<b>Aggregate</b>	<b>4342</b>	<b>2617</b>	<b>-1725</b>	<b>-40%</b>

Source: The Health and Specialty Care System division of Texas Health and Human Services, 2010 through 2022

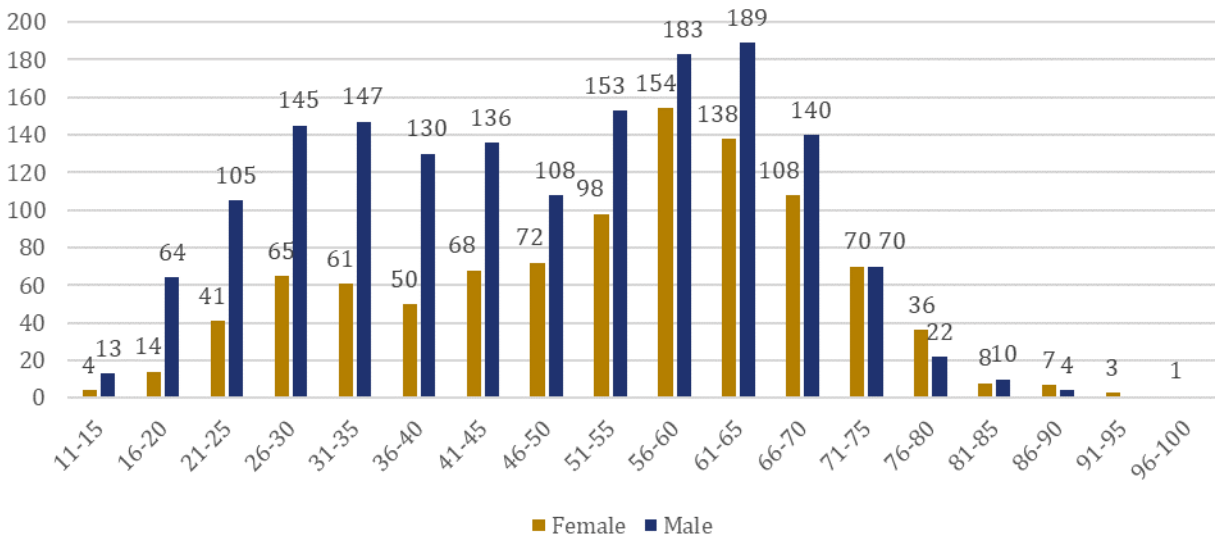
On January 2, 2023, the SSLC resident population consisted of 1,619 males and 998 females. There are significantly more males residing at the SSLCs than females in every age group except for those over 85. There are 543 residents over the age of 65, which is 21% of the total population. Most adult residents have a legal guardian, which is usually a family member, though a third of adults do not have any type of guardianship. There are 121 residents who are 22 years old or under, which is the maximum age of eligibility to attend public school, including 75 residents under the age of 18.

The average number of years a resident has lived at a SSLC is 24 years, and more than half of all residents have lived at a SSLC for over 20 years. Among current residents, the average age at the time of admission was 26 years old, which is significantly younger than the age of the general SSLC population, historically. Throughout 2022, there were 165 admissions with a median age of 32, the youngest of whom was 10 years old. Mexia SSLC has admitted 48 residents, which is the highest number of admissions at any center in this period. The Mexia SSLC admits and discharges residents more frequently than other SSLCs due its designation as a forensic facility, which provides services to individuals who have been committed under criminal statute. Individuals who are committed under criminal statute are referred to as alleged criminal offenders because they have not been convicted of the crime for which they have been charged. These residents are committed to an SSLC when a judge determines the individual has a diagnosed intellectual or developmental disability and would be better served at an SSLC than in a prison.



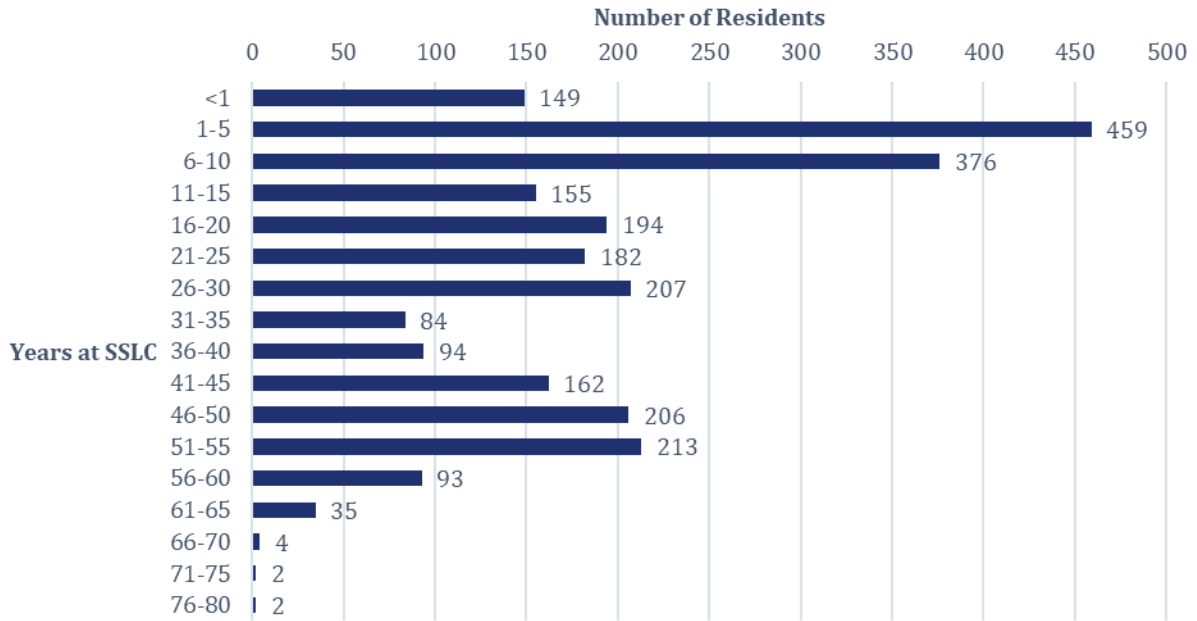
Currently, there are 157 residents who have been admitted to the facility as alleged criminal offenders. Although nine SSLCs serve at least one resident who is alleged to have committed a criminal offense, 66% of the SSLC residents who are alleged offenders reside at Mexia SSLC, and 20% reside at San Angelo SSLC. There are 104 residents living at Mexia and 31 at San Angelo that have been alleged to commit a criminal offense; four of those individuals have been determined to be a high risk of danger to themselves or others, which legally requires them to live in a highly restrictive environment. Both Mexia SSLC and San Angelo SSLC are designated as forensic centers.

### Aggregate SSLC Resident Population by Age and Sex



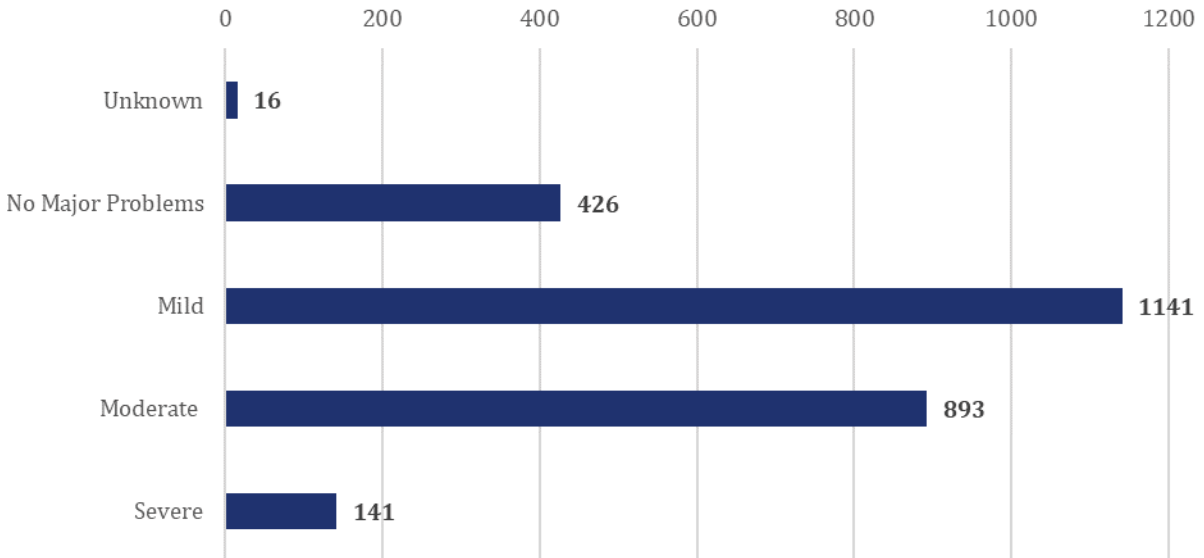
Source: The Health and Specialty Care System division of Texas Health and Human Services, January 2, 2023.

## How Long have Residents Lived at SSLCs?



Source: The Health and Specialty Care System division of Texas Health and Human Services, January 2, 2023

## Health Status of SSLC Population

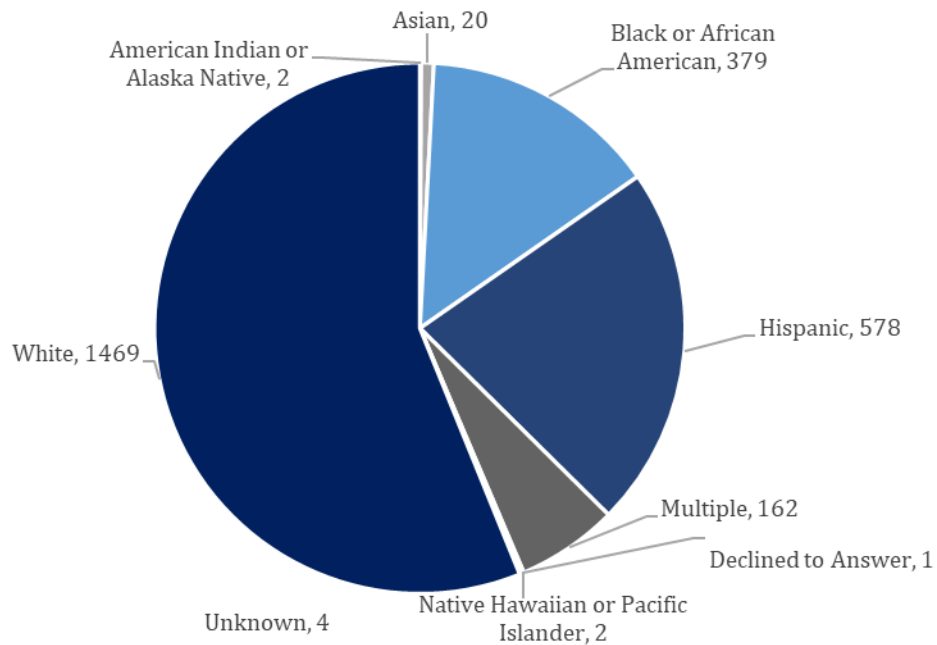


Source: The Health and Specialty Care System division of Texas Health and Human Services, January 2, 2023

In the entire SSLC population, 78% of residents have a moderate or severe health status. A moderate health status is defined by HHS as having chronic health problems which require less than daily professional intervention. HHS defines a severe health status as an individual that is unstable and/or has multiple serious health problems, and which may be life threatening, requiring daily professional intervention. A total of 141 residents are classified as having a severe health status.

Race and ethnicity demographic data are provided to acknowledge the identity of residents. The majority of the SSLC population, 56%, identifies as White, 22% identify as Hispanic, and 14% identify as Black or African American. There are 162 residents who are recorded as multi-racial.

### Race and Ethnicity of SSLC Resident Population



Source: The Health and Specialty Care System division of Texas Health and Human Services, January 2, 2023

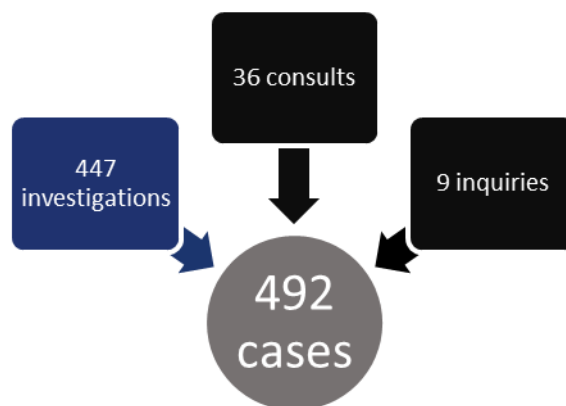
# Duties and Activity of the Office

## Overview

At each SSLC, the OIO has stationed an ombudsman who maintains a visible presence and is engaged in the SSLC’s operations. The ombudsman routinely provides meaningful input, collaboration, and expertise to the SSLC administration, including recommendations. Documentation of all contacts and investigations initiated by the ombudsman are recorded and tracked in a secure online database. A contact received that is beyond the scope of the office is referred to the appropriate entity. Documentation of investigations and actions of the ombudsman are recorded and kept confidential, except by special court order. The ombudsmen continue to be accessible in person at the centers while being cognizant of safety guidelines developed by state regulatory authorities relating to COVID-19.

For the biannual period of July 2022 through December 2022, the ombudsmen completed 492 cases in accordance with the statute. There are three types of cases: consults and inquiries are concerns that do not require an investigation, but the ombudsman provides their expertise and insight to assist those who contact the office. Complaints are concerns that require an investigation by the ombudsman. Complaints made up 91% of all cases for this biannual period.

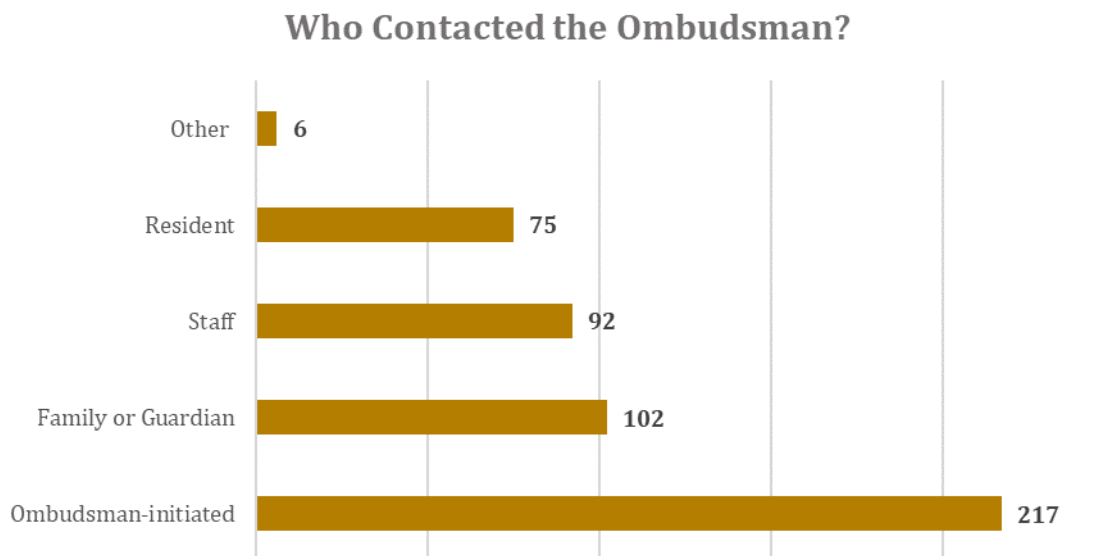
### Aggregate Number of Cases



Source: OIO - HHS Enterprise Administrative Report and Tracking System



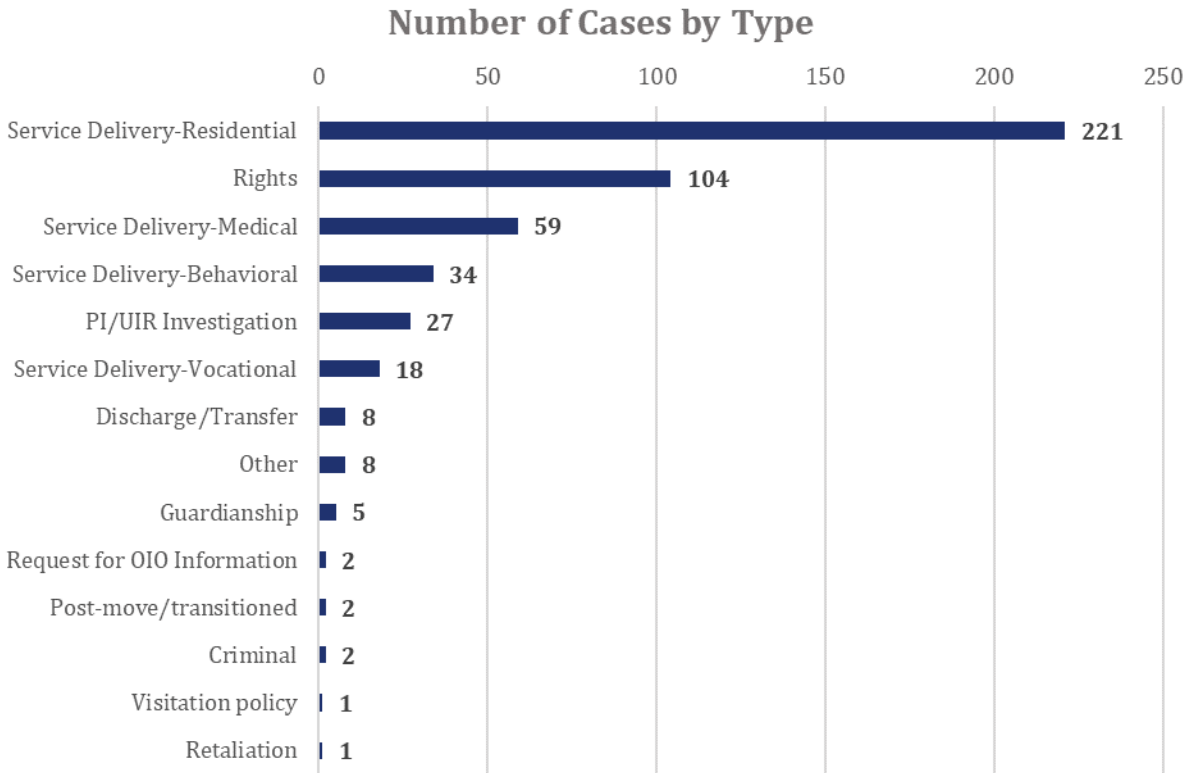
The most common source of cases during this biannual period were concerns identified by the ombudsmen, followed by family or guardians. The high volume of ombudsmen-identified cases demonstrates the unique value of the ombudsman presence at facilities.



Source: OIO - HHS Enterprise Administrative Report and Tracking System

The ombudsmen continue to receive more complaints and requests for assistance by family members and/or guardians than historically experienced. This trend has been ongoing for several biannual periods and may reflect greater awareness of the ombudsman among residents' families and guardians or that families and guardians have more concerns than in the past.

Staff, residents, family members, and others contact the ombudsman about concerns that impact residents' lives. The most common concerns investigated by the ombudsmen were issues related to residential service delivery, followed by rights-related issues. Following an investigation, the ombudsman may provide recommendations which they then monitor to evaluate if, and how, the issue is addressed by the facility.

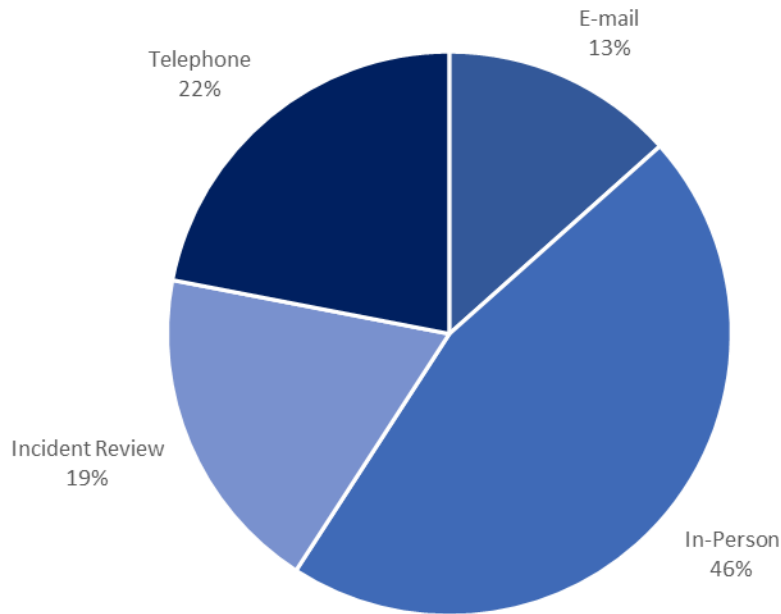


Source: OIO - HHS Enterprise Administrative Report and Tracking System

In addition to monitoring service delivery and investigating complaints, the ombudsman at each SSLC evaluates the way the center investigates serious incidents. Each ombudsman attends incident meetings, reads all SSLC investigation reports, and monitors actions taken by the SSLC after each incident. In total, the ombudsmen reviewed 1,280 incident investigations this biannual period. This biannual period, there were 93 cases initiated through incident review.

While reviewing final investigation reports or attending incident management meetings, the ombudsman may identify and investigate issues from incident reviews that relate to service delivery. Other times the ombudsman may identify that an investigation is not thorough enough and recommend that the facility conduct additional investigatory efforts to adequately complete the investigation. PI/UIR Investigation is a new case type category that was deployed in July to track concerns that address incident investigations.

## How was the Ombudsman Contacted?



Source: OIO - HHS Enterprise Administrative Report and Tracking System

It is important to note that the ombudsmen do not investigate abuse and neglect. Allegations of abuse and neglect are reported to and investigated by the HHSC Provider Investigations (HHSC PI) unit. When a report is made, the SSLC is responsible for protecting the alleged victim and taking precautions to prevent further incidents or allegations. When an allegation is confirmed, the ombudsman at each SSLC monitors recommendations made to SSLC administration by HHSC PI.

Each ombudsman has an office at the SSLC and is easily accessible to residents and staff. Most contacts are made in person, but contacts may also be made by phone or email. The office maintains a toll-free number which directly connects to the ombudsman's office phone. The toll-free number, the ombudsman's name, direct phone line, office location, and email address are displayed prominently in common areas at each SSLC on posters and brochures. The office also maintains a website that provides contact information and explains the role of the office.

## Systemic Investigations

Starting in 2022, the OIO created three senior AIO positions. One of the responsibilities of these senior AIOs is to identify and investigate systemic issues at SSLCs and make recommendations to the SSLC administration at Texas Health and Human Services based on the findings of the investigations. During the July to December 2022 biannual period, the senior AIOs conducted a state-wide investigation relating to due process of psychotropic medications.

### Case Summary: Psychotropic medication review in Human Rights Committees

Action Type	Case Type	How Complaint Was Received	Complainant Relationship to Ombudsman
•Complaint	•Rights	•In-Person	•Ombudsman

Although psychotropic medications are restrictive and should be treated as any other rights modification in terms of due process, the way Human Rights Committees (HRC) reviews psychotropic medication varies across SSLCs. Some are thorough in their review, while others pass around documentation to sign without much discussion, resulting in a lack of due process. Senior AIOs reviewed psychotropic medications reviewed in HRC from OIO Program Review data between May 20, 2021, and May 20, 2022. Though the current Rights Policy requires HRC to review each restriction for an “adequate plan of alleviation,” it was determined this was not occurring for psychotropic medications.

Program Review data collected during this period shows that 71% of psychotropic medication reviews included documentation with a plan to remove or alleviate the restriction. Of those reviews with a plan to remove, just 57% were determined to be individualized and measurable. Despite this, HRCs approved 98% of psychotropic medications. During those same HRC meeting discussions, they discussed the plan to remove only 52% of the time, and only 45% included discussion of such plans that were measurable or individualized.

The Sr. AIOs reviewed training documentation provided to HRC members and found evidence that training was inadequate on HRC psychotropic medication reviews. Specifically, the training was not clear on the HRC’s role and responsibilities in reviewing psychotropic medications. The types of documentation



presented to HRC members for psychotropic medication reviews appeared to determine if all due process elements were presented. Some SSLCs provided only the consent form to HRC, which did not include all due process elements.

A confidential survey was sent to all Human Rights Officers (HRO), who chair HRC meetings, with responses received from nine HROs. When asked, "Can HRC deny psychotropic medications," eight of the HROs selected yes, while one selected no. When asked if "HRC is qualified to review Psychotropic Medications," three out of nine stated no.

The following recommendations were provided to SSLC State Office (SSLC SO) leadership:

- Provide standardized training on psychotropic medications and the role of HRC in reviewing psychotropic medications to HROs and HRC members.
- Psychotropic medication treatment plans include reduction criteria and are included for HRC's review and consideration.
- Someone with knowledge of psychotropic medications be available to answer questions about psychotropic medications during HRC's review.
- Utilize annual rights restriction (RRD) and ongoing interdisciplinary team rights restriction discussion documentation (ISPAs) as a component of HRC's review of psychotropic medications, along with the completed consent form.
- Develop a plan to monitor proper documentation is provided to HRC for review.

OIO leadership shared the concerns, findings, and recommendations from the Sr. AIO systemic investigation with SSLC SO. In response, SSLC SO trained their HROs on their role and responsibilities in reviewing psychotropic medications. HROs have also been charged to train their current and future HRC members annually on their responsibilities, in terms of psychotropic medication reviews. SSLC SO stated the training will be tracked locally by each HRO but will also be verified when the SSLC SO Quality Review Team visits each center. HROs and HRCs have also been directed to ensure that subject matter experts be available to HRC members to answer questions about a restrictive practice, including psychotropic medications. SSLC SO is working to implement a new psychotropic consent form which includes a prompt to include the plan to remove/reduce the use of medication. SSLC SO has also directed standardizing the inclusion of other relevant rights restriction documentation (RRDs and ISPAs) when reviewing psychotropic medications. The OIO appreciates SSLC SO and each center's efforts and response to these recommendations to improve due process and better protect the rights of everyone who receives psychotropic medications at the SSLC's.

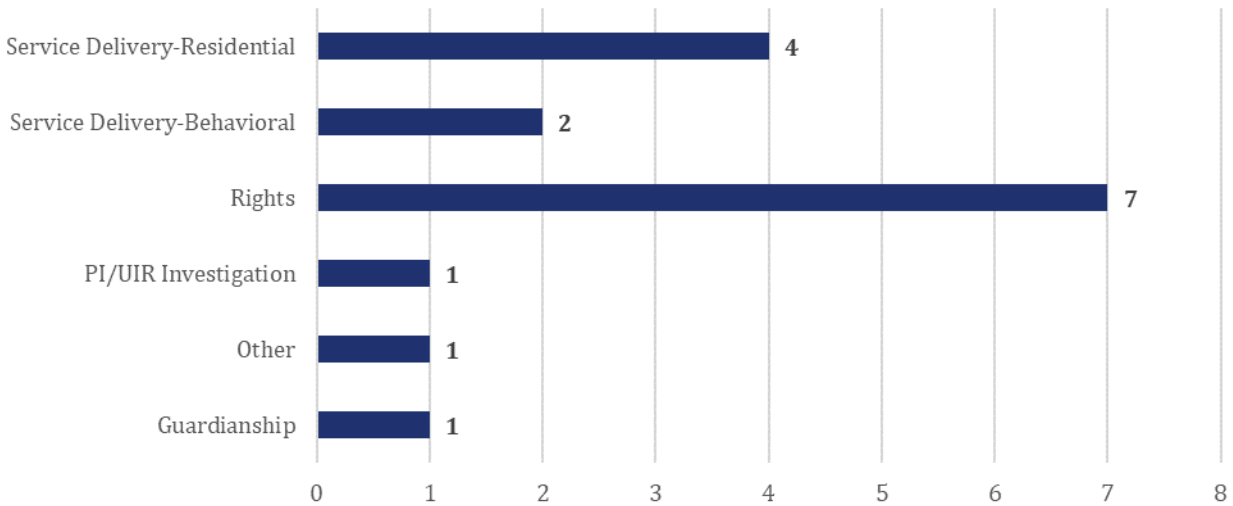
# Abilene State Supported Living Center

## Jill Antilley, Senior Assistant Independent Ombudsman



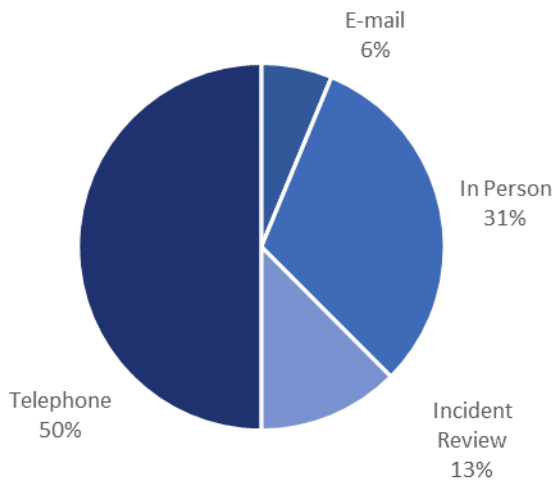
Jill Antilley has served residents at the Abilene State Supported Living Center for 18 years. Her career began in the Recreation Department as a direct-care staff in 2000 while attending college at Hardin Simmons University (HSU). Ms. Antilley graduated from HSU in 2000 with a bachelor’s degree in Police Administration and worked at 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. She joined the Office of the Independent Ombudsman as the Assistant Independent Ombudsman in Abilene SSLC in 2010.

Number of Cases by Type  
**Abilene**



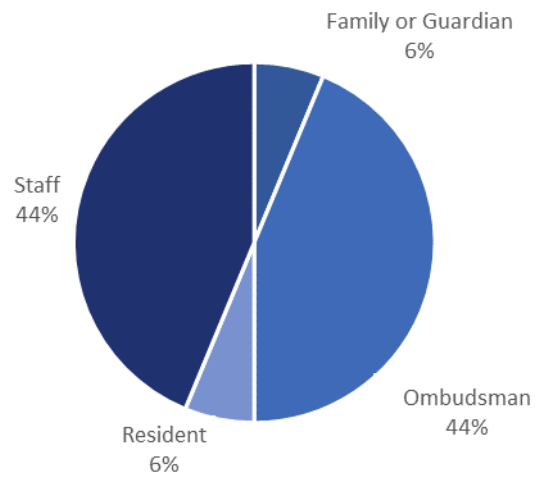
How was the contact made?

**Abilene**



Who Contacted the Ombudsman?

**Abilene**



**Abilene: Cases Opened this Biannual Period**



## Case Study: Abilene

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Residential	•Phone	•Family LAR

While the AIO was discussing an unusual incident involving a resident with their guardian, it was discovered that the interdisciplinary team had not invited the guardian to the meeting to discuss the recent incident. Interdisciplinary teams (IDT) regularly meet to discuss residents' rights restrictions, needed supports, review data, address resident requests, behavioral incidents, and anything else relating to that resident's care. Interdisciplinary teams should always invite the residents' guardian to attend team meetings or discuss the purpose of the meeting with them prior if they can't attend.

The Ombudsman reviewed documentation and found that this resident's guardian was contacted by staff only after meetings had taken place and the team had not involved the guardian in discussion, including the recent serious incident that resulted in an abuse, neglect, and exploitation investigation. The AIO reminded the Quality Intellectual Disability Professional (QIDP) and social worker that residents' guardians should always be invited to team meetings. The AIO spoke with the residents' guardian again days later and learned that they had been invited to the next meeting and indicated they felt more informed about their child's care.



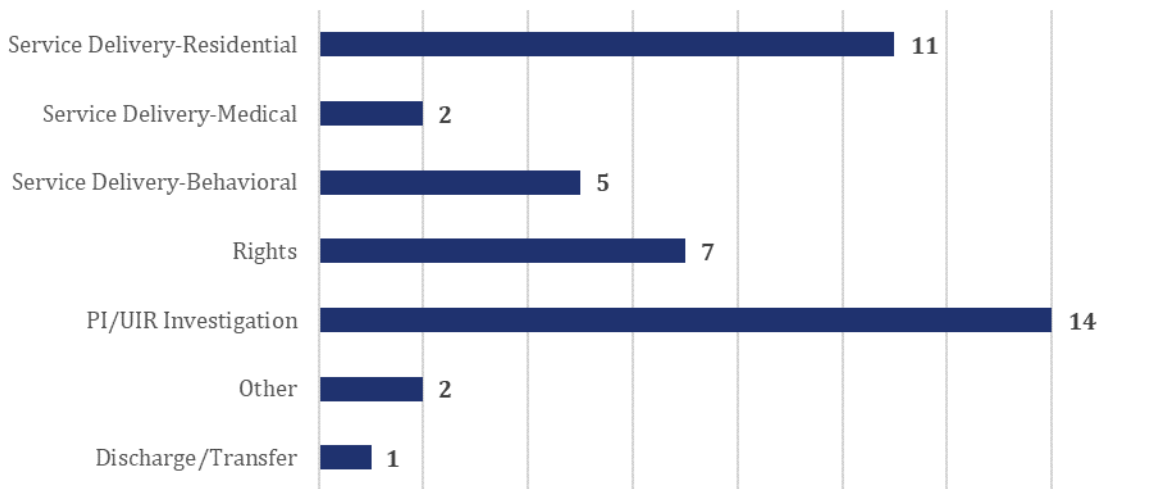
# Austin State Supported Living Center

## Talya Hines, Assistant Independent Ombudsman

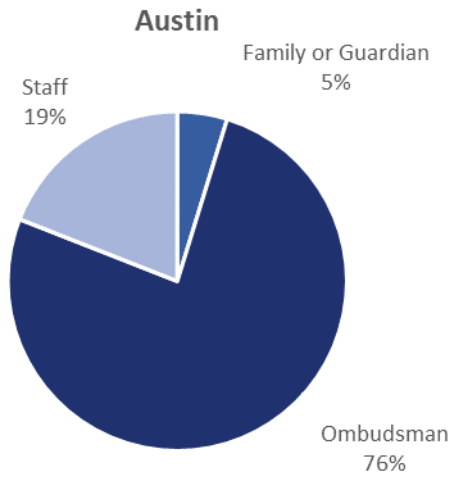


Ms. Hines was born and raised in Grayson County, Texas, and resides in Pflugerville with her family. Ms. Hines earned a Bachelor of Arts Degree in Sociology and a Master of Science Degree in Rehabilitation Counseling from the University of North Texas. She began her professional career at the Department of Family and Protective Services as a Child Care Licensing Specialist in Dallas. Ms. Hines then moved to Austin where she assisted individuals with disabilities with maintaining independence through their environment and employment as a case manager for the Department of Assistive and Rehabilitative Services. Following her passion to help others, Ms. Hines obtained the position of Post-Move Monitor at the Austin SSLC, where she supported individuals who transitioned into a community setting. Before she began serving as the Assistant Independent Ombudsman for the Austin SSLC in 2018, she developed online, and instructor led curricula for Local Authorities as a Curriculum Developer for HHS. Ms. Hines is certified as a Person-Centered Thinking trainer with The Learning Community for Person Centered Practices.

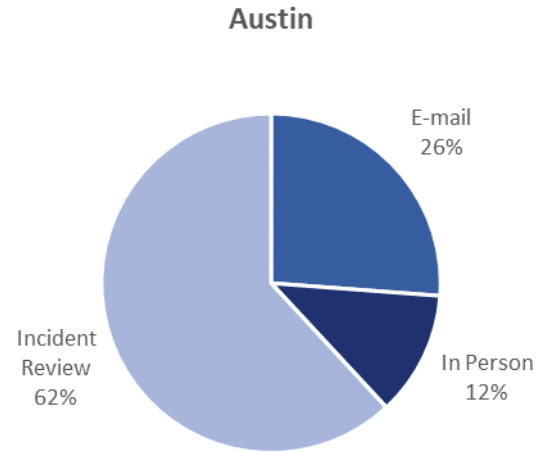
Number of Cases by Type  
**Austin**



Who contacted the Ombudsman?



How was the contact made?



Austin: Cases Opened this Biannual Period



### Case Study: Austin

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery-Residential	•In-Person	• Family LAR

While the AIO was attending the Parent Association Meeting, a family member of a resident stated their child did not feel safe in their home and that when they visited, they also did not feel safe. The AIO spoke with the family one-on-one to better understand their perspective, attended IDT meetings to learn how the center planned to address the family’s concerns, reviewed documentation of prior visits and incidents that might have occurred while they were visiting, and reviewed data of altercations between peers in the home for the last two years. The AIO also observed the home for the duration of one of their visits and followed up with the family to hear about their experience in the home while visiting. The AIO found that the center was attempting to accommodate the family by offering alternative options and was working to keep all the residents out of the home while the family visited. Ultimately, the family reported a more positive experience than in the past.

The AIO recommended that the facility ensure adequate coverage in the home during family visits and to consider exploring other living arrangements. The Ombudsman also recommended that the center provide active treatment in the home during family visits, rather than preventing those who live there from being home at that time. The facility was responsive to considering other living arrangements, but the family was not interested. The center also allowed others who lived in the home to go to workshop during the visit while others remained home and there was sufficient staff to monitor while the family visited in the common areas of the home. The Ombudsman was able to gain a more personal relationship with the resident’s family member, the family member reported they felt safer during visits with their child in the home, and the center is actively working to accommodate the family’s requests, while not infringing on other residents’ rights.

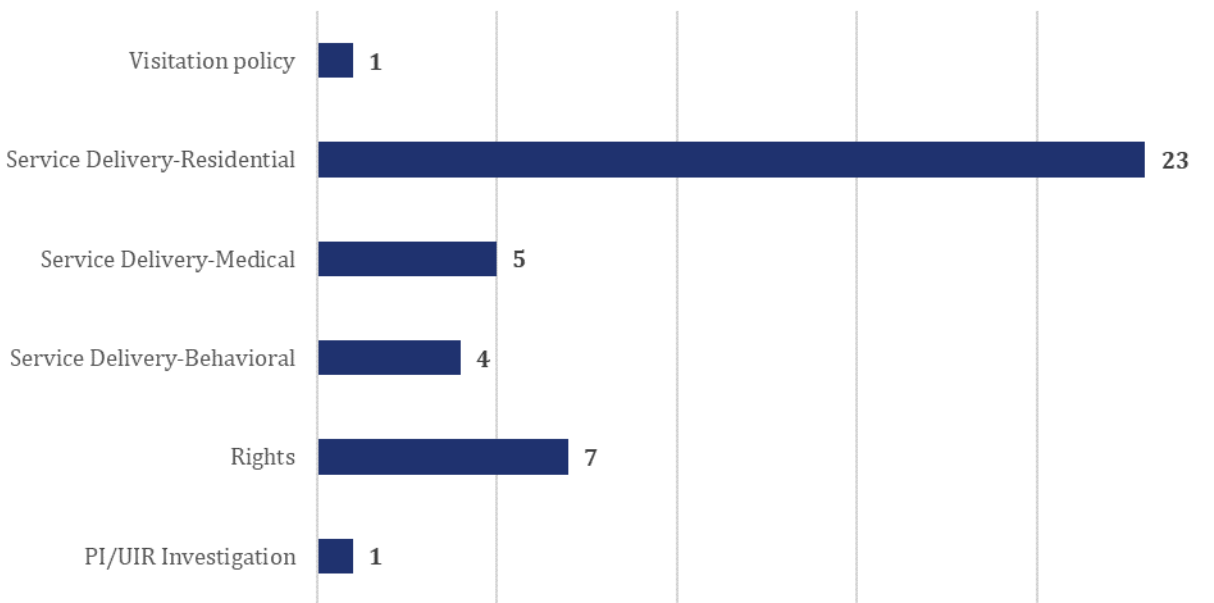
# Brenham State Supported Living Center

## Susan Aguilar, Assistant Independent Ombudsman

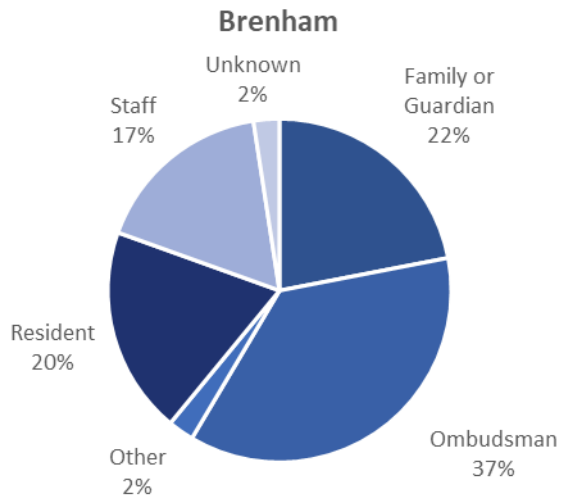


Susan Aguilar earned a Bachelor of Arts degree in Political Science from Texas Lutheran University. She worked in the field of early childhood intervention prior to obtaining the position of Qualified Developmentally Disabled Professional at the Brenham State Supported Living Center. While at the Center,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

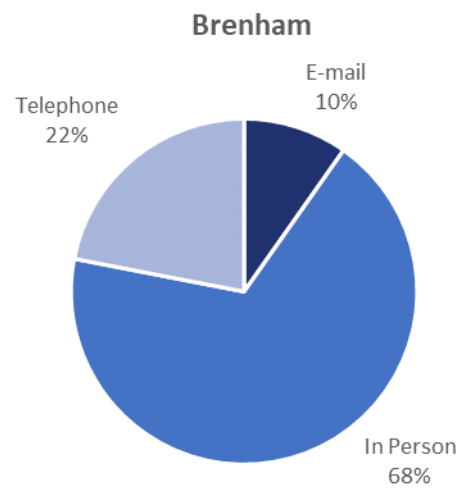
Number of Cases by Type  
**Brenham**



### Who contacted the Ombudsman?



### How was the contact made?



### Brenham: Cases Opened this Biannual Period



## Case Study: Brenham

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery-Residential	•Phone	•Advocate

The Ombudsman explored a concern that families were not provided adequate notice about restructuring residents' homes following completed building renovations. Rumors with inaccurate information circulated and fueled family concerns that their loved ones, who had resided in the same home with familiar staff and peers, would be moving. These homes also serve residents that require a lot of support with all areas of daily living and have medical and physical management needs. Facility administration was also made aware of these concerns by residents' families however, they felt facility staff were not responsive.

The AIO spoke with family members, staff and management, and reviewed documentation of team meetings. The Ombudsman discovered that families did not receive adequate notice to prepare them for a change to their loved one's living environment. An informational letter from administration was to be sent to families prior to telephone notifications from the QIDPs, but some families reported they had not received this notification and were caught off guard when contacted by the QIDP about the changes.

The Ombudsman recommended that families be given adequate notice when there were plans to move residents to another home and allow enough time for family members to have their questions and concerns addressed. The AIO expressed that these families are protective, given their loved one's reliance on staff to ensure all needs are met, and that long term bonds with peers and staff, and other quality of life factors were felt to be just as important to these families as meeting medical and basic care needs.

The center scheduled a meeting with families and arranged for them to visit the newly renovated homes. Families were informed that the reorganization of the residential building was necessary to better accommodate the needs of residents across campus and future admissions. Families were also informed that the residents will be provided with opportunities to interact with former housemates to maintain those bonds. The AIO continues to conduct ongoing monitoring of the residents who moved into their new homes.

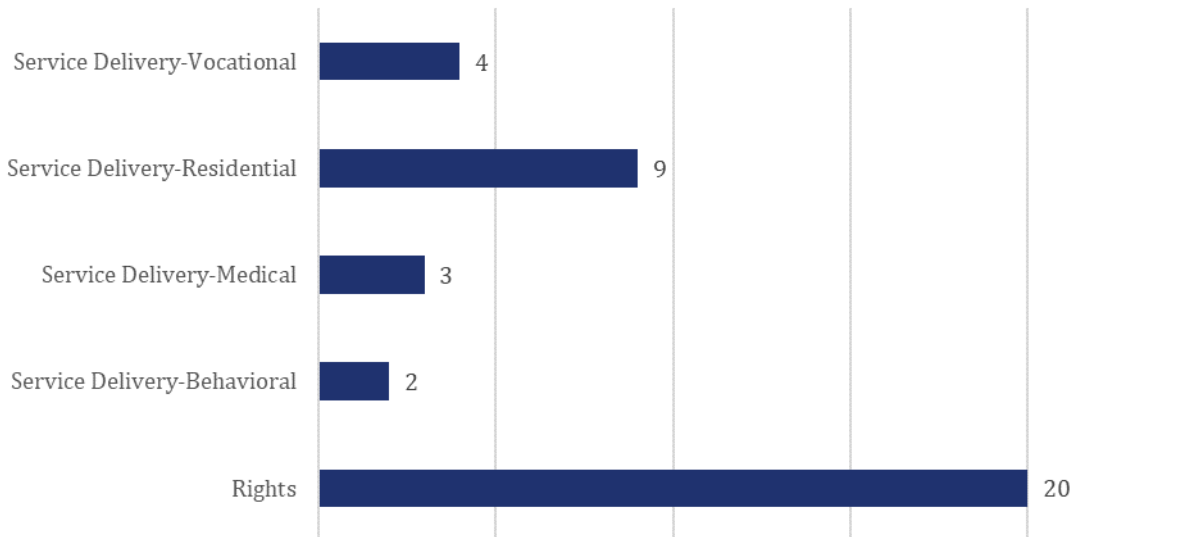
# Corpus Christi State Supported Living Center

## Kellen Davis, Assistant Independent Ombudsman



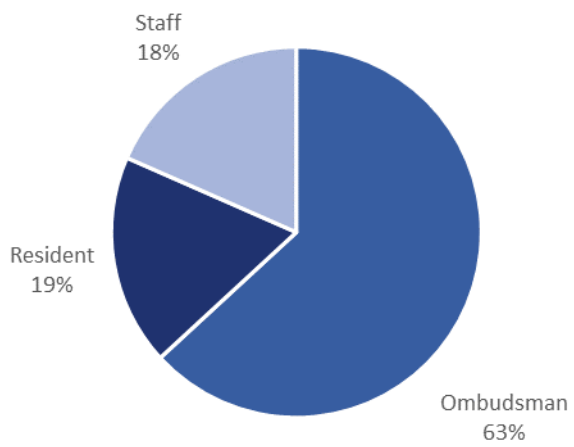
Ms. Davis's career began in 1988 while going to school at Howard Payne University. She worked for the Texas Youth Commission as the Recreation Supervisor. She graduated from HPU with a degree in Physical Education and a minor in English. She went on to work for the TYC for 15 years in various roles. Ms. Davis also worked as an LVN for the University of Texas Medical Branch. She was a respite supervisor for local MHMR and owned her own business, a doughnut coffee shop. Ms. Davis worked at the Mexia SSLC for 4 and a half years as the Transition Specialist. She joined the Office of the Independent Ombudsman at the Corpus Christi SSLC in 2017.

Number of Cases by Type  
Corpus Christi

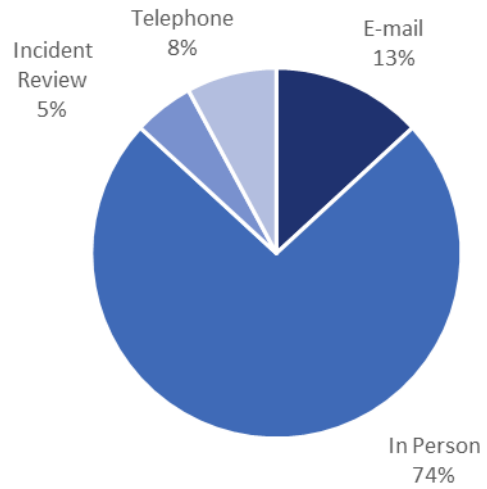




Who contacted the Ombudsman?  
Corpus Christi



How was the contact made?  
Corpus Christi



### Corpus Christi: Cases Opened this Biannual Period



## Case Study: Corpus Christi

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Rights	•In-Person	• Ombudsman

It was brought to the Ombudsman's attention that supervisors were asking employees if they had been in contact with the Ombudsman and questioning them about conversations and complaints shared with the AIO. After consulting with numerous staff, the Ombudsman confirmed that supervisors were asking staff if they had contacted the Ombudsman's office and inquiring about specifics of their conversations. The Ombudsman emailed the facility Director recommending they retrain all staff on cooperating with the Ombudsman office, the confidential nature of contacting and conversations with the Ombudsman's office, and that retaliation against anyone who makes a complaint to the Office of the Ombudsman is in violation of state law. The Ombudsman received signed and completed training rosters demonstrating that training was completed.

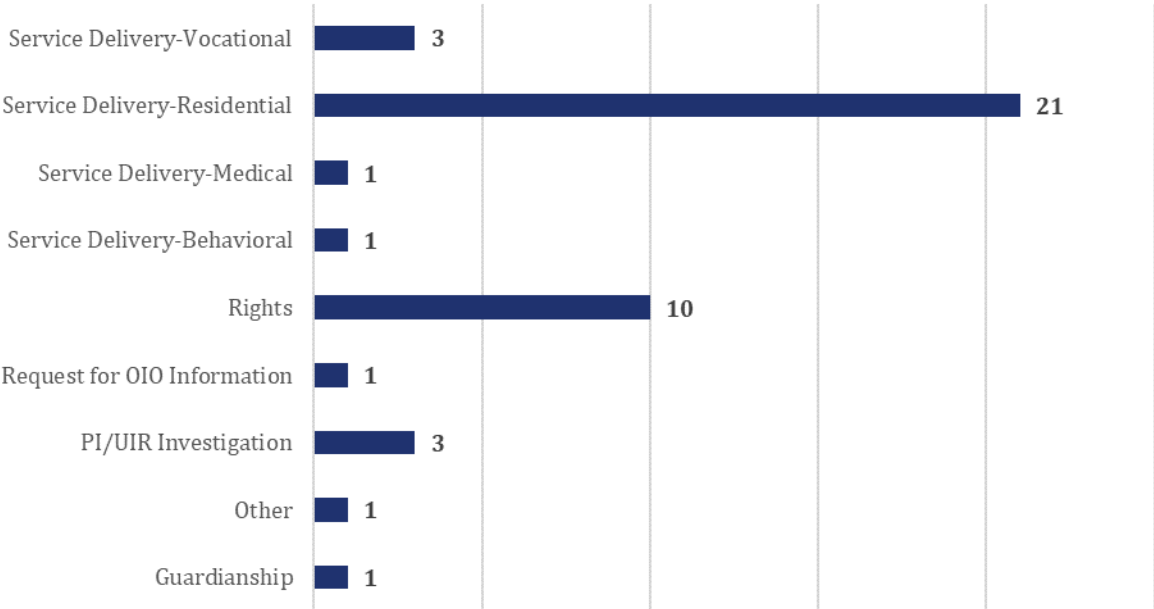
# Denton State Supported Living Center

## Edward Leal, Assistant Independent Ombudsman



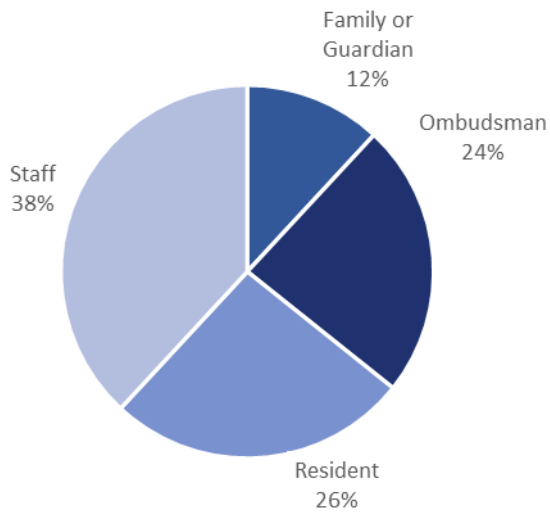
Edward Leal began his career in 2009 at the Denton SSLC where he served both as a Direct Support Professional and the Administrative Assistant to the Center Director for almost a decade. Edward then served as a Civil Rights Specialist where he received extensive training and experience conducting complex investigations of employment discrimination complaints. He has a Bachelor of Applied Arts and Sciences degree from the University of North Texas with an emphasis in Applied Behavior Analysis and Clinical Psychology and a Master of Business Administration degree. Mr. Leal joined the Office of the Independent Ombudsman as the Assistant Independent Ombudsman at the Denton SSLC in February 2020.

Number of Cases by Type  
**Denton**



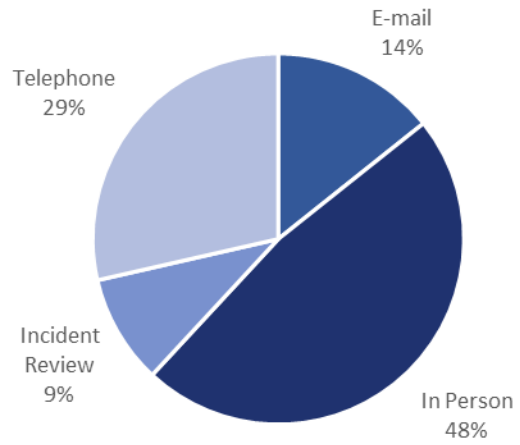
Who contacted the Ombudsman?

Denton



How was the contact made?

Denton



Denton: Cases Opened this Biannual Period



## Case Study: Denton

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery-Residential	•Telephone	• Resident

A resident at the Denton SSLC approached the AIO and requested help with getting their TV replaced. The Ombudsman visited the resident's home to inspect the TV noted there was an impact point and several cracks. It looked as if an object had been thrown at the TV or an object had been used to damage the screen. The resident reported that they were unaware of how the TV was damaged. The AIO suggested to staff they document the damage to the TV, which had not yet been done.

The resident also informed the Ombudsman that they were concerned that the TV would not be replaced in time for their post recovery bed rest for an upcoming surgery. The AIO informed the individual that they would reach out to their QIDP and inform them of the situation. The QIDP stated that the unit was actively seeking to resolve the issue and replace the tv.

The AIO followed up to check the status of the TV replacement and was informed that a staff had loaned the individual a new TV so they would have something to watch after returning from surgery. The AIO noted staff were prompt in replacing the TV and that the AIO's recommendation was well received. The AIO visited the resident to check on how they were recovering from surgery and found the resident in good spirits, stated they were healing well, and they were happy a TV had been loaned to them.

# El Paso State Supported Living Center

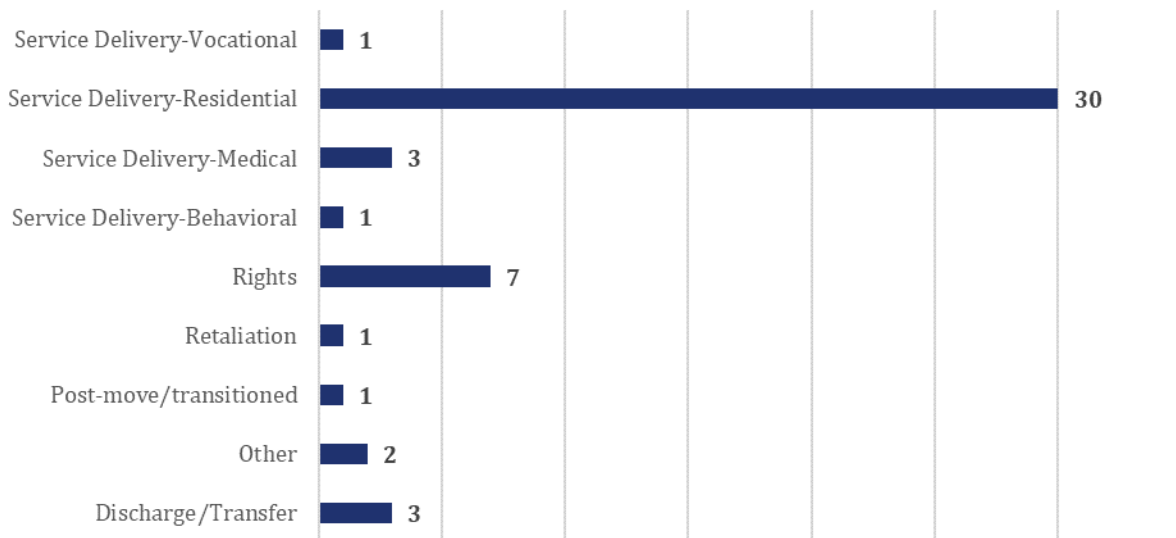
## Isabel Ponce, Assistant Independent Ombudsman



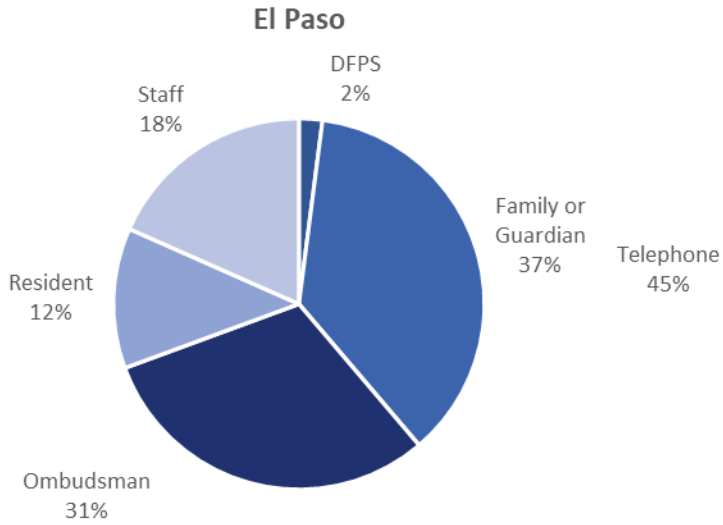
Born and raised in the Sun City, Ms. Ponce has worked in services and advocacy for the elderly, children, and individuals with disabilities for over 20 years. She was employed in nursing homes as a certified nursing assistant and then certified medication assistant before working with the El Paso Headstart program where she provided social services to children and their families through community outreach. She then went on to serve adults with developmental disabilities as a Residential Director in a Home and Community Service program in the private sector. Soon after, Ms. Ponce became a Certified Internal Investigator and began working as a Case Manager for the same HCS

Provider. After seven years with the community program, she joined the Office of the Independent Ombudsman in December 2010 as the AIO for the El Paso State Supported Living Center. She is certified in Mediation and has been trained in Person Centered Practices.

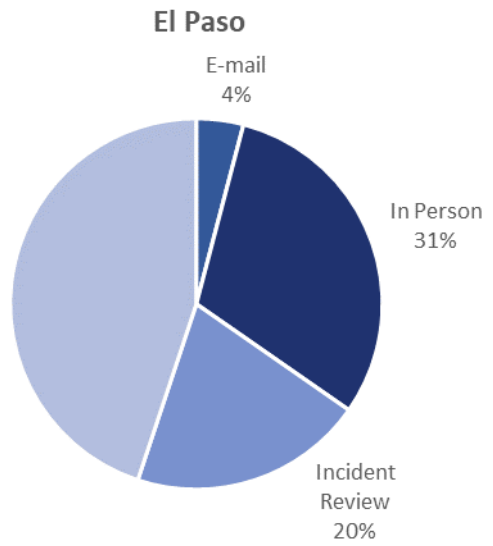
Number of Cases by Type  
El Paso



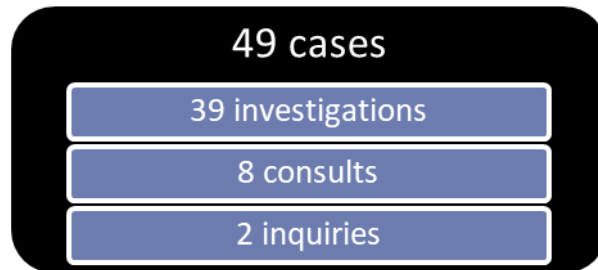
### Who contacted the Ombudsman?



### How was the contact made?



### El Paso: Cases Opened this Biannual Period





## Case Study: El Paso

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Consult	•Rights	•Telephone	• Staff

A team member asked the Ombudsman to attend an IDT meeting to provide a consult because the team was considering a one-to-one (1:1) level of supervision (LOS) restriction for an individual who was displaying verbal aggression and property destruction. During the meeting, the IDT also discussed a recent incident in which the individual had sustained a serious head injury from another peer and the team was seeking to determine the best way to protect them from future incidents.

The AIO understood the team's goal to protect the individual from further harm however to ensure due process, the Ombudsman asked the team to clarify their rationale for the 1:1 LOS. The IDT cited the victim's verbal aggression. The Ombudsman asked how a 1:1 staff was to prevent the individual from being verbally aggressive when data showed they did not respond to redirection when engaging in this behavior. The team decided verbal aggression was not an appropriate justification for the increased LOS.

The team then explained they had also considered the individual's number of incidents of property destruction to justify the 1:1 LOS. The Ombudsman asked the team if the individual's property destruction ever resulted in harm to themselves or others. Data showed few acts of property destruction, and no injuries were sustained, and the team recognized this individual's history of property destruction did not merit a 1:1 LOS.

The discussion helped established the team mistakenly felt they needed a behavioral justification to secure a higher level of protection through an increased LOS. The Ombudsman helped the IDT to see that the degree of head injuries sustained by the victim was enough to warrant the 1:1 and to help keep them safe until more secure protections could be implemented.

# Lubbock State Supported Living Center

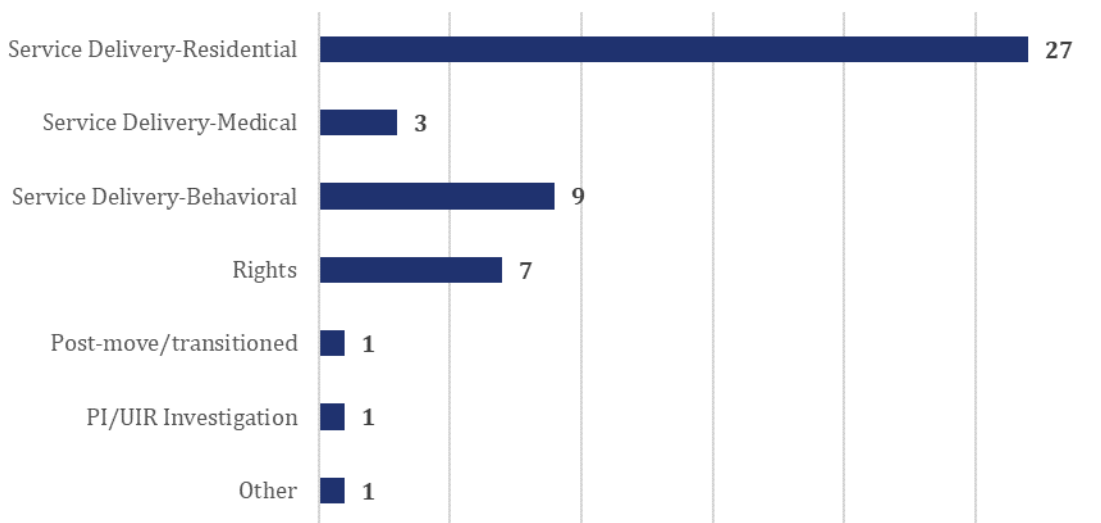
## James Clark, Assistant Independent Ombudsman



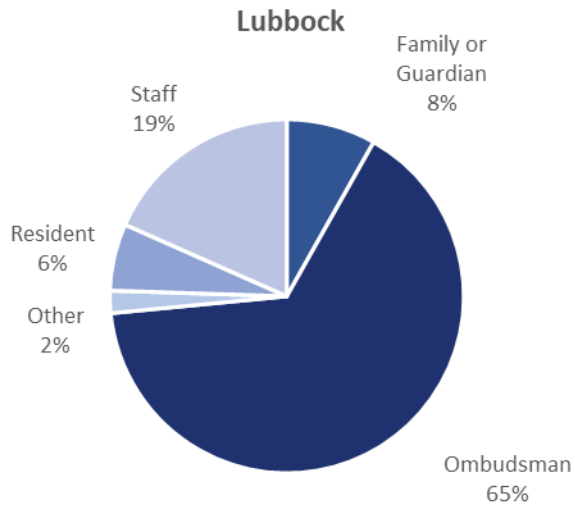
James Clark was born and raised in Lubbock, Texas, and resides in Lubbock with his family. Mr. Clark earned a Bachelor of Applied Science Degree in Human Services from Wayland Baptist University. He began his career with the State of Texas at the Lubbock State School as a Direct Support Professional in 1999, where he worked 14 years in many roles from Unit Director, Campus Administrator, and Qualified Intellectual Disability Professional. In 2013, Mr. Clark’s endeavors for career advancement led him to the Department of Family and Protective Services (Adult Protective Services) where he worked for 6 years as an APS Specialist to advocate for elderly and disabled Texans. In April of 2020, Mr. Clark’s career path led him back to the place he

began his career with the State of Texas when he accepted the role as the Assistant Independent Ombudsman of the Lubbock State Supported Living Center for the Office of the Independent Ombudsman.

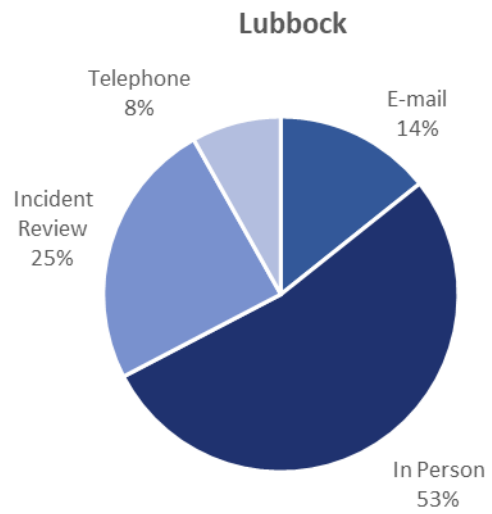
Number of Cases by Type  
**Lubbock**



Who contacted the Ombudsman?



How was the contact made?



Lubbock: Cases Opened this Biannual Period



## Case Study: Lubbock

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Residential	•In-Person	•Ombudsman

The Ombudsman witnessed an individual who continued to walk across campus without wearing shoes. The AIO initially called the home and spoke to home staff who came and picked the resident up and assisted them back to the home. Two days later the AIO noticed the resident again walking across campus with no shoes. The team reported that the resident was encouraged to wear shoes but often refused. Upon AIO investigation, it was also determined that the individual was being treated by medical personnel for a cut on their right foot with moderate callous formation and infection was likely.

The Ombudsman participated in a weekly meeting with the IDT and expressed concerns that it does not appear that the resident is being encouraged to wear shoes upon leaving the home. The Ombudsman also sent an email to the IDT and Administrative staff regarding his observations. The IDT put out an in-service to staff to encourage and document attempts to get the resident to wear shoes. The Ombudsman also mentioned a training that had occurred by a previous behavioral health staff that appeared to be effective. The training included a reinforcement schedule for the resident when they would put on their shoes. The IDT agreed to work on reimplementing the prior training referenced by the Ombudsman. Since the last meeting, the resident has been on an increased LOS and has not been seen walking across campus without shoes.

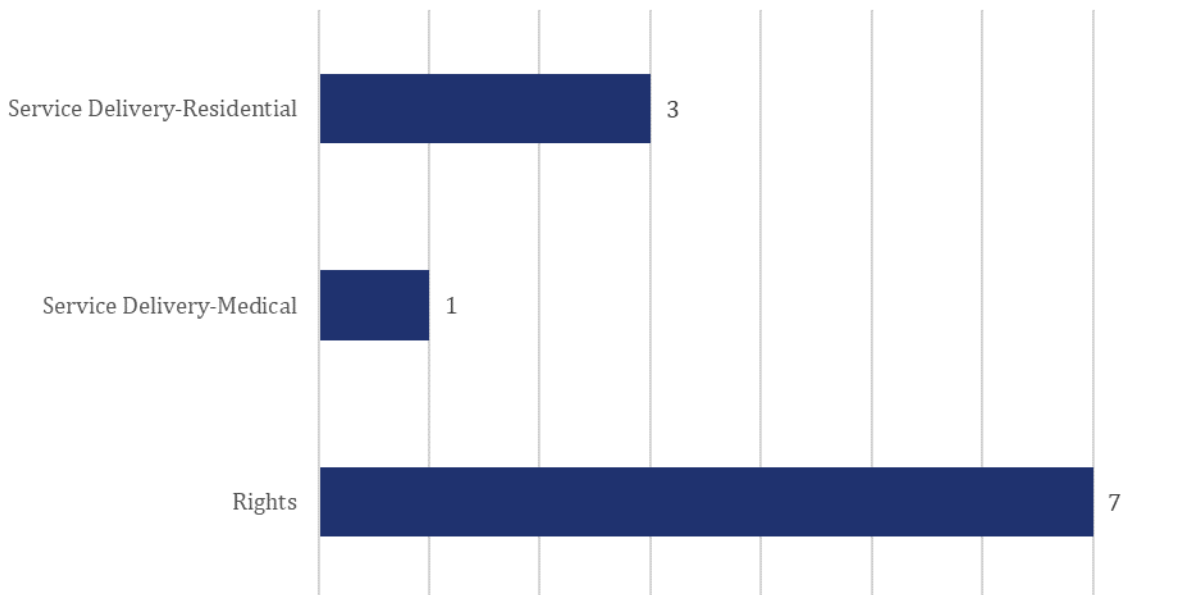
# Lufkin State Supported Living Center

## Seth Bowman, Assistant Independent Ombudsman

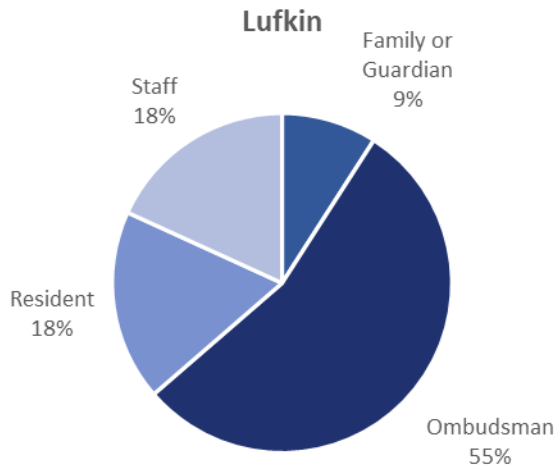


Raised in Lufkin, Texas, Seth Bowman attended Stephen F. Austin State University where he earned a Bachelor of Arts in Communication. After graduation in 2011, he began his professional career with Texas Health and Human Services as a Qualified Intellectual Disability Professional for the Lufkin State Supported Living Center. He then served as a training specialist in the Competency and Training Department where he trained employees on policies and procedures. While in this role, he was a faculty member and helped developed curriculum for the Safe Use of Restraints (SUR) program. Mr. Bowman joined the Office of the Independent Ombudsman as the Assistant Independent Ombudsman to Lufkin SSLC in May 2020.

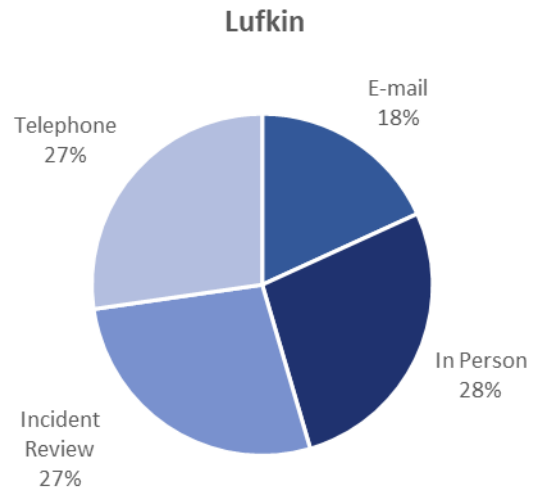
Number of Cases by Type  
**Lufkin**



Who contacted the Ombudsman?



How was the contact made?



Lufkin: Cases Opened this Biannual Period



### Case Study: Lufkin

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Residential	•Incident Review	•Ombudsman

The Ombudsman was concerned that a resident who had experienced an increased number of falls and injuries was transitioning to a new home. The Ombudsman spoke with department staff about what was contributing to the falls and what the plans were to prevent continued falls and injuries. The AIO reviewed the documented plans and data collected by the interdisciplinary team from previous months in which, the Ombudsman discovered the team was planning to provide a wheelchair for the individual to use to help prevent injuries due to falls. Ultimately, the AIO found that the IDT monitored the resident's use of the new wheelchair in their current home, and they felt comfortable with the resident moving to the new home. The Ombudsman recommended that the team collect data now that the individual was using the wheelchair to determine the effectiveness of the wheelchair to help prevent falls in the new home, which the team agreed.



# Mexia State Supported Living Center

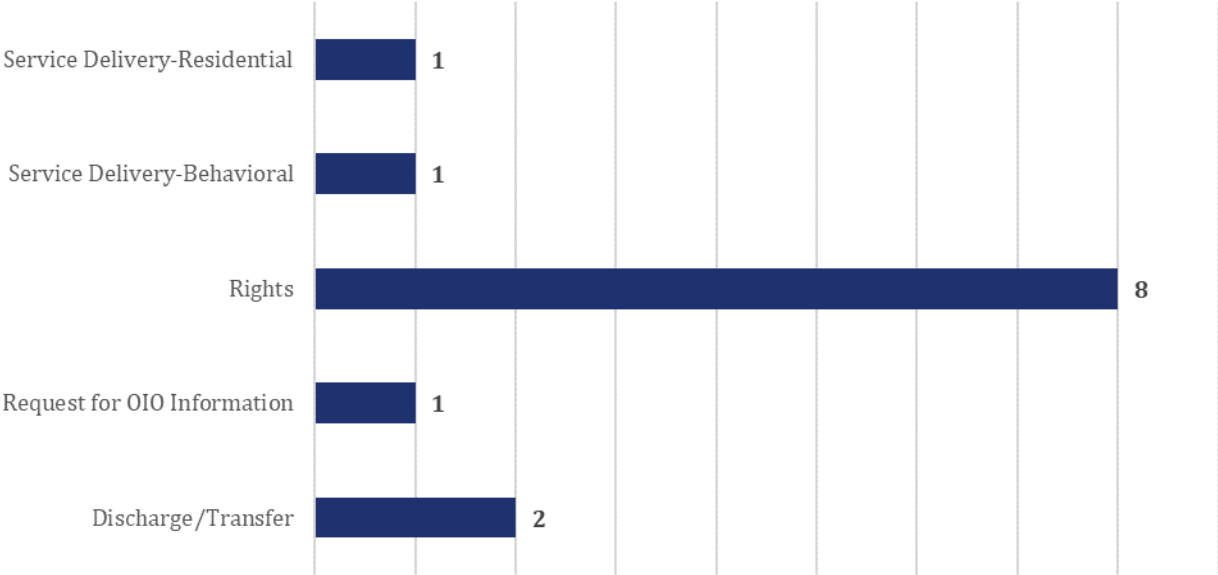
## Adam Parks, Senior Assistant Independent Ombudsman



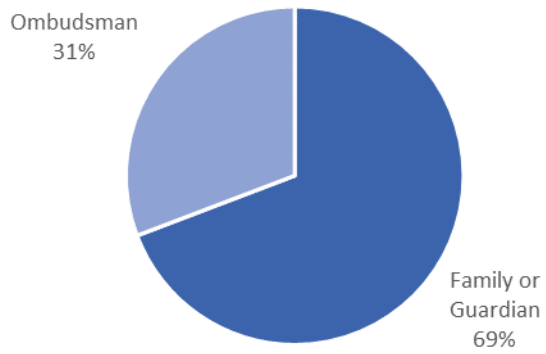
Adam Parks was raised in Mexia, Texas. He attended Stephen F. Austin State University where he earned a Bachelor of Arts in Psychology. After graduation, he began his professional career as a conservatorship caseworker for the Department of Family and Protective Services in Angelina and Shelby County Texas. Mr. 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.

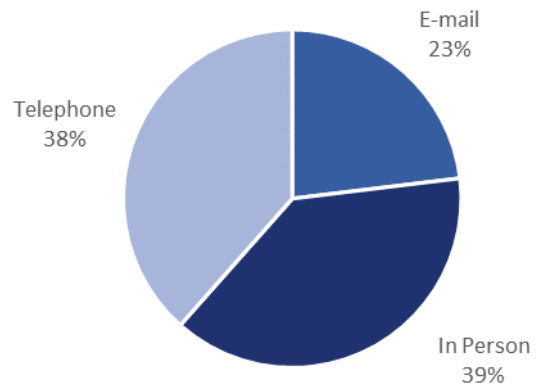
Number of Cases by Type  
**Mexia**



Who contacted the Ombudsman?  
**Mexia**



How was the contact made?  
**Mexia**



**Mexia: Cases Opened this Biannual Period**



## Case Study: Mexia

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Rights	•Email	• Family LAR

The Ombudsman received a call from a parent complaining that their visit was shortened due to staff shortages and conflicts with the individual's scheduled annual planning meeting. A staff called the parent stating that the SSLC would not facilitate transportation for their family visit and the resident needed to be back early from their visit to participate in their annual meeting. The family was visiting from out of state.

The AIO reviewed the annual meeting policy and noted that the guardian and individual are given scheduling preference, which includes moving the meeting to ensure their participation is guaranteed. According to the policy, the annual meeting needed to be scheduled within 365 days. The Ombudsman reviewed documentation and found the SSLC scheduled the meeting 11 months after the annual meeting, which would allow for the ISP to be rescheduled. The AIO also reviewed the resident's record to verify if there were any visitation restrictions in place for the individual, however nothing was found that would limit or the change the length of the visit.

The AIO spoke with the facility Assistant Director or Programs (ADOP) about the situation and recommended that the visit take place as scheduled and the planning meeting be moved to accommodate the family and individual. The Ombudsman also recommended that if a direct care staff were not available, that the IDT get creative to help the individual to get to and from their visit. The ADOP understood the complaint and ensured that the visit remained scheduled as planned and the annual planning meeting was moved. The Ombudsman's involvement and the ADOP's response ensured that the individual got to visit with their out of state parents for the holidays and provided the resident with therapeutic time with their loved ones. This case also allowed for SSLC staff to receive more education on policies and expectations to ensure therapeutic visits are properly facilitated.

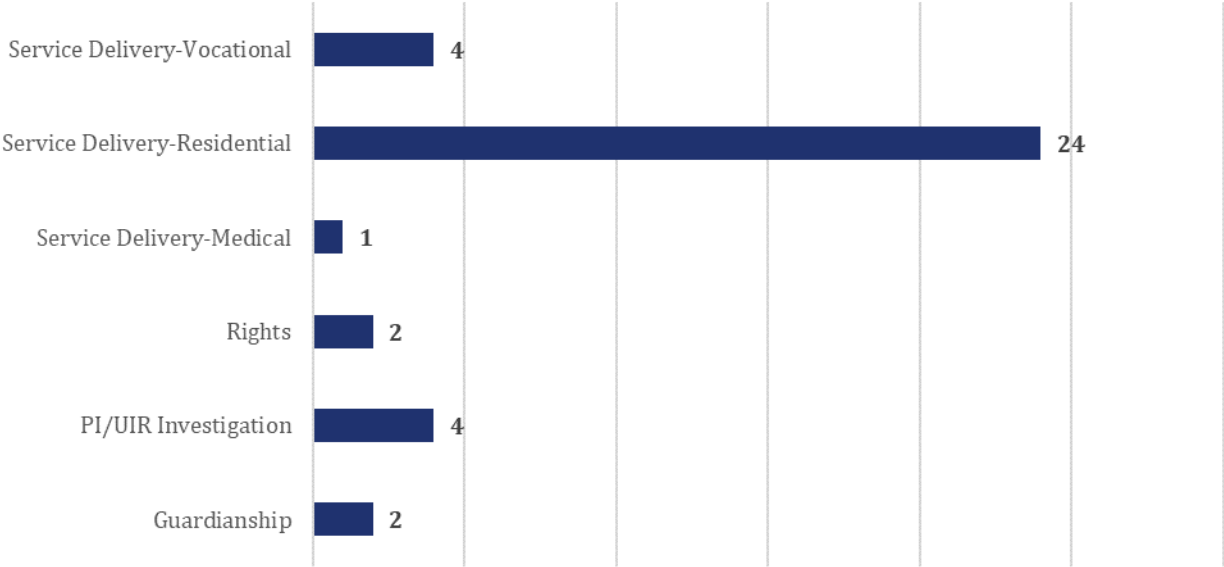
# Richmond State Supported Living Center

## Deatrice Potlow, Assistant Independent Ombudsman

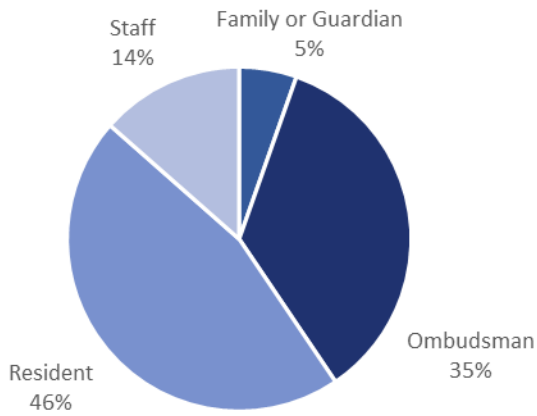


Born and raised in Greenwood, Mississippi, Ms. Potlow earned a Bachelor of Science Degree in Office Administration in 1997. Shortly after graduating she began working at a local hospital as a Medical Transcriptionist. She relocated to Houston, Texas for career advancement and began a career with the State of Texas. During her tenure of employment, she served as an Investigator for children, adults, and persons with disabilities. Prior to joining the Office of the Independent Ombudsman as the Assistant Independent Ombudsman in 2012, she worked as a facility investigator who was responsible for investigating allegations of abuse, neglect, and exploitation at the Richmond SSLC.

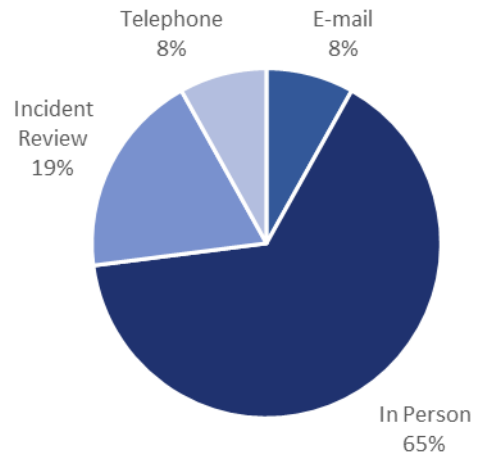
Number of Cases by Type  
**Richmond**



Who contacted the Ombudsman?  
**Richmond**



How was the contact made?  
**Richmond**



**Richmond: Cases Opened this Biannual Period**



## Case Study: Richmond

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Residential	•In-Person	•Resident

A resident contacted the Ombudsman stating they had been wearing the same clothes for two days because their wardrobe was locked, and staff were restricting them from accessing their clothing. After the AIO observed that wardrobe in the resident's room was locked, they contacted home staff to discuss the resident's access to their wardrobe and to learn more about their outcry of wearing the same clothes for two days. Staff reported that the resident was prompted by staff to change clothes, but they refused. Staff also reported that the individual was restricted from certain personal possessions and was subject to body checks to ensure their safety. The Ombudsman reviewed documentation and found that there were some restrictions in place to support and protect the individual which had been documented and approved by HRC, however the locked wardrobe and access to their clothing was not documented in the record.

The AIO contacted QIDP to share their concerns and reminded them that due process must be included when a decision is made by the team that is restrictive nature, even in situations when the team has determined the action is meant to keep residents safe. Staff were quick to respond to the Ombudsman's concerns and completed the appropriate documentation with details and instructions about the wardrobe and clothing and sent the information to HRC for review. Staff also informed the resident that the wardrobe would remain locked for safety reasons, but the individual could ask staff to unlock the wardrobe anytime. The resident was informed of the restriction and process to open the wardrobe and staff were trained and given instructions on how to properly implement the restriction.

# Rio Grande State Center

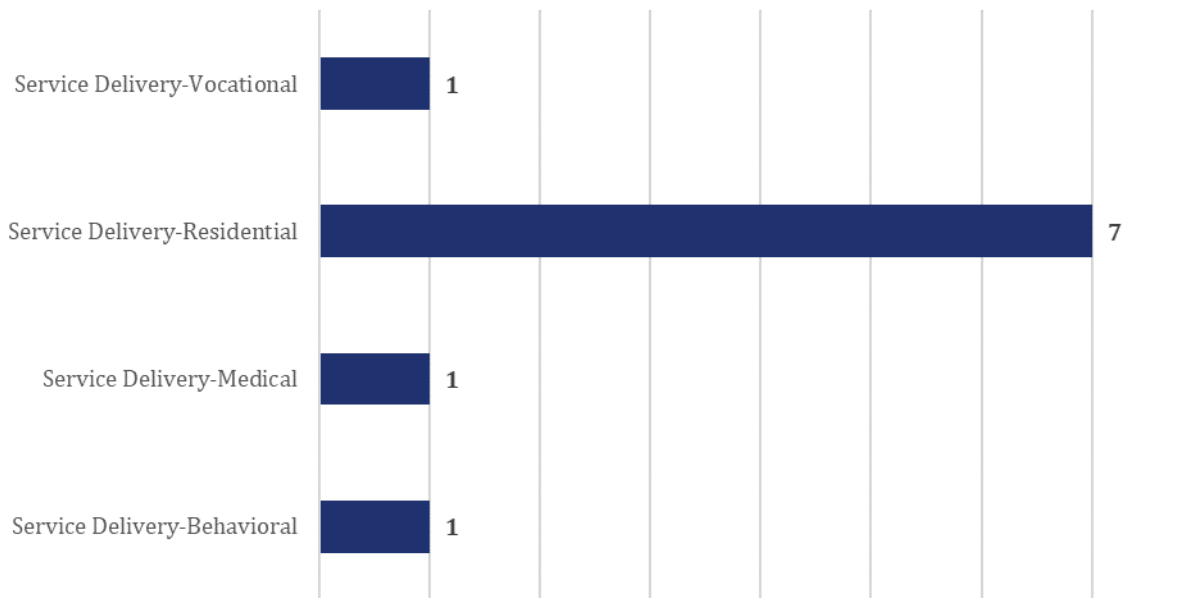
## Horacio Flores, Assistant Independent Ombudsman



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

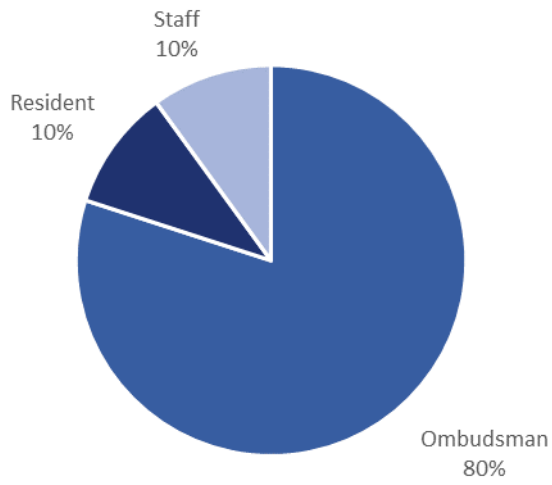
Ombudsman of the Rio Grande Center in April 2017.

Number of Cases by Type  
**Rio Grande**

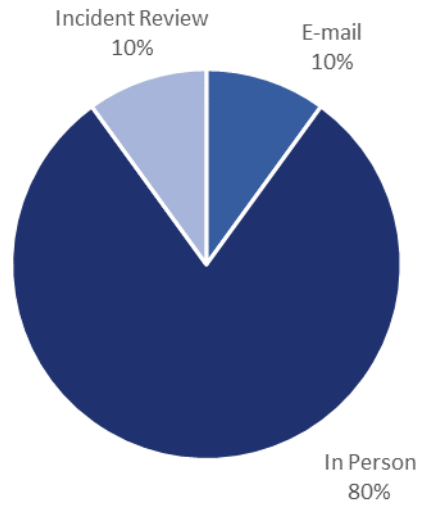




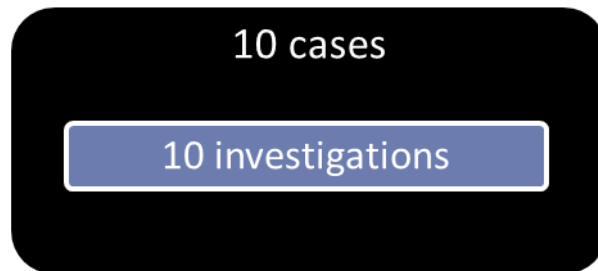
Who contacted the Ombudsman?  
Rio Grande



How was the contact made?  
Rio Grande



Rio Grande: Cases Opened this Biannual Period



## Case Study: Rio Grande

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Vocational	•In Person	•Resident

As the Ombudsman was walking campus a resident called him over and told him they were upset because their father did not know when he was going to visit and give the individual \$20. The individual said they wanted money to purchase snacks and soda. The AIO asked the resident if they worked, and resident replied that they did not like work because they went for two days and did not get paid. The AIO explained that it would take 2-3 weeks to get paid but the resident said that they did not like that.

After talking with the resident, the Ombudsman spoke with the resident's QIDP to recommend that the individual get paid daily instead of weekly. The Q stated she did not know that was an option. The AIO informed them that it was not currently but that in the Ombudsman's previous experience at Corpus Christi SSLC, they were able to arrange to pay residents for their work daily. The AIO recommended that they consider paying this resident daily because the AIO believed it could be a good incentive to motivate this individual to start working each day.

The Ombudsman spoke with staff that process residents' work wages who stated they did not have the resources to pay individuals daily. The AIO then followed up with the director to share his recommendation and encouraged her to inquire with the interim assistant director who was from Corpus Christi. The director responded positively to this suggestion and stated she was confident they could find a way to pay residents daily for those people teams felt would benefit, however the process to pay individuals daily has not been implemented.

# San Angelo State Supported Living Center

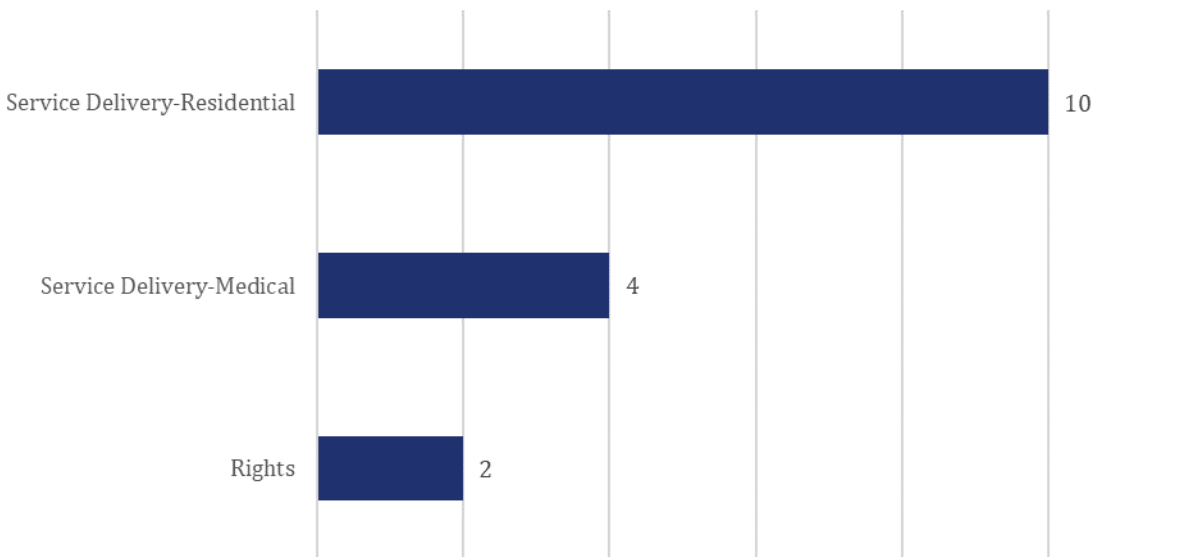
## Brenda Frausto, Assistant Independent Ombudsman



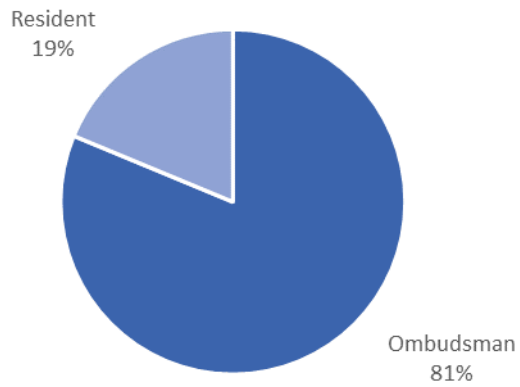
Ms. Frausto obtained a Bachelor of Science degree in Psychology with a minor in Sociology from Angelo State University. She began her career at the San Angelo SSLC in 1991 as an active treatment provider then later assumed the role of Admission and Placement Coordinator. Ms. Frausto was also the Admission Coordinator for MHMR Service of the Concho Valley. For 13 years, Ms. Frausto worked for the Texas Department of Family and Protective Services as an Adult Protective Services Specialist where she earned the reputation of going above and beyond to protect and serve Texas' most vulnerable adults. Ms. Frausto has served as a Guardian Advocate with Guardianship Alliance

of the Concho Valley and was a member of the Tom Green County Coalition Against Violence She joined the Office of the Independent Ombudsman in 2016. Ms. Frausto is certified as a Person-Centered Thinking trainer with The Learning Community for Person Centered Practices.

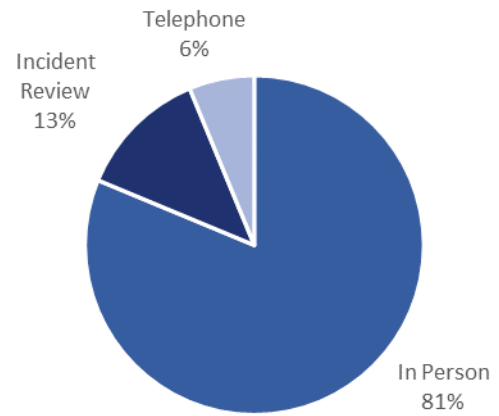
Number of Cases by Type  
**San Angelo**



Who contacted the Ombudsman?  
San Angelo



How was the contact made?  
San Angelo



San Angelo: Cases Opened this Biannual Period



## Case Study: San Angelo

Case Type	Action Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Service Delivery - Residential	•In-Person	• Ombudsman

A resident asked the Ombudsman to attend their upcoming team meeting because they had been referred to live in the community, but their team revoked the referral due to the individual having an unauthorized departure from the facility. The AIO was concerned that the team had not spoken with the individual to understand what was contributing to them leaving campus and it was unclear what plans the IDT had in place to support them. During the meeting it was discovered that the IDT had not visited with the individual to find out why they tried to leave the facility, nor did they discuss if the unauthorized departures could be addressed in a community home.

The AIO noted in an incident management meeting that the individual was supposed to be receiving counseling however after speaking with the resident, they reported that they used to talk a counselor when they were upset but they no longer had one. The IDT was unaware that the individual was no longer speaking with counseling services. The Ombudsman recommended that the IDT address the issue of not having a counselor available. In the interim, the Behavioral Health Specialist stated they would visit with the individual to determine why they tried to leave the facility and ensure they had the proper support. The IDT stated they would review a community placement referral again in 12 months however the individual disagreed. The Ombudsman suggested the team consider revisiting a community placement referral in 6 months, which they agreed.

# San Antonio State Supported Living Center

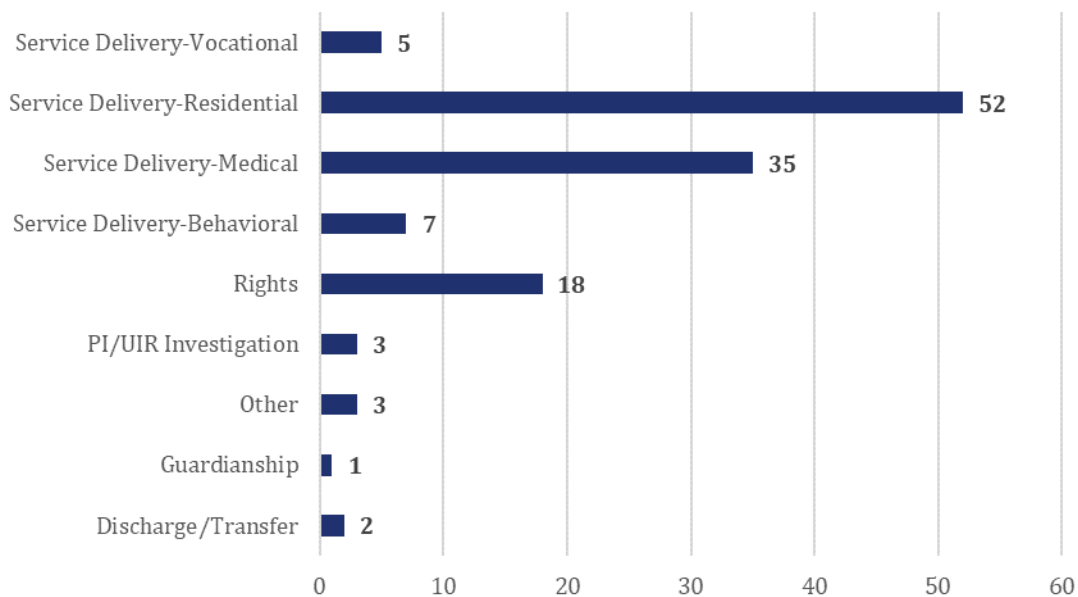
## Gevona Hicks, Senior Assistant Independent Ombudsman



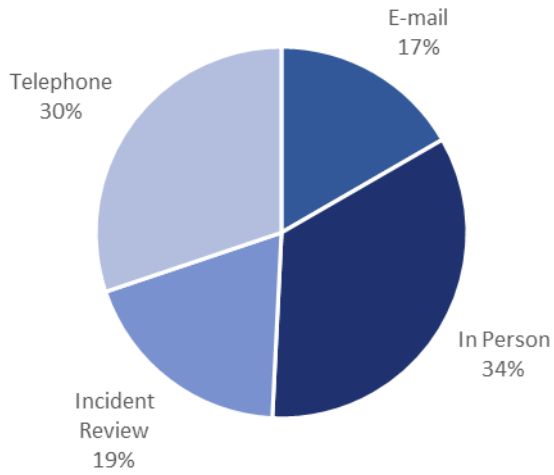
A native of Birmingham, Alabama, Ms. Hicks received her Bachelor of Science in Psychology and a certificate in Gerontology from the University of Alabama at Birmingham. She relocated to San Antonio, Texas in 2001 and worked with infants and toddlers at a local children's shelter. Before joining the Office of the Independent Ombudsman in April 2014, she supported people with IDD by coordinating services for state and community intermediate care facilities as well as home and community-based service providers. She also served as a Qualified IDD Professional and the Human Rights Officer at the San Antonio SSLC. Ms. Hicks is a certified Person-

Centered Thinking trainer and People Planning Together trainer with The Learning Community for Person Centered Practices. Ms. Hicks supports Texans to live the lives they envision for themselves and is a valued resource for Texans with disabilities, their families and service providers, and the community.

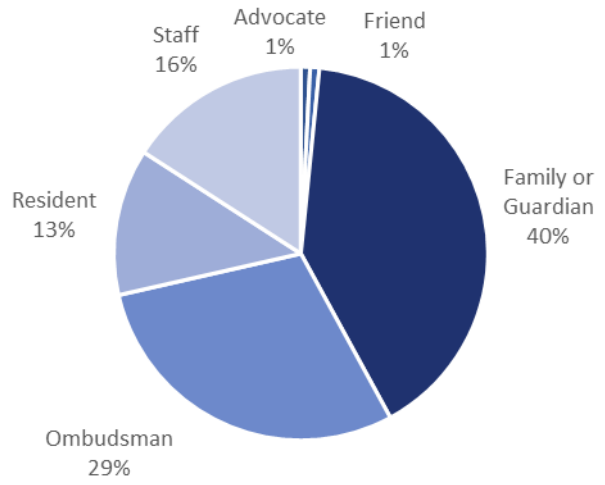
Number of Cases by Type  
**San Antonio**



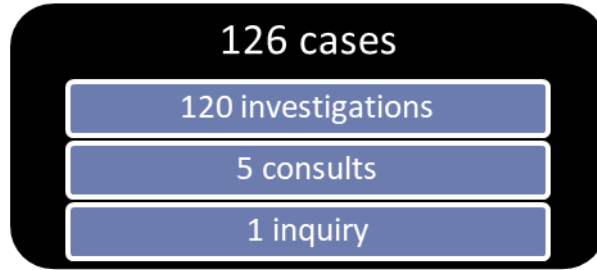
How was the contact made?  
San Antonio



Who contacted the Ombudsman?  
San Antonio



San Antonio: Cases Opened this Biannual Period



## Case Study: San Antonio

Action Type	Case Type	How Complaint was Received	Complainant Relationship to Resident
•Complaint	•Rights	•Email	• Family LAR

The Ombudsman was contacted by a guardian who had made various requests out of concern for a resident's safety and psychiatric instability. The requests included preventing the resident from going off campus, not allowing them to use a computer, limiting their clothing and movie choices, all which are considered restrictive practices. During conversations with the resident, the Ombudsman noted the resident was able to clearly express their preferences and that facility staff made efforts to advocate for the resident's choices to be honored. The AIO identified that it was unclear to the guardian if the resident was consciously making certain decisions and choices or if their psychotic disorder was affecting their behavior.

The Ombudsman consulted with and attended team meetings with the resident and guardian, obtained input from staff who worked well with the residents, and provided the guardian and facility the Bill of rights for Persons under Guardianship. The Ombudsman advised SASSLC administration to consult with SSLC State Office regarding how to address LAR's requests for restrictions which conflicted with resident's wishes and due process requirements. The Ombudsman also consulted with the psychiatrist for guidance in determining when the resident was expressing choice versus demonstrating psychiatric instability. The AIO recommended the psychiatrist participate in the next team discussion with the guardian.

Team discussion with the psychiatrist noted the resident has disorganized thinking and their ability to distinguish between reality and fantasy was distorted. SASSLC made recognizable efforts to give the resident as much choice as possible however, the psychiatrist recommended a conservative approach to exposure to certain things until the resident was deemed more psychiatrically stable. The guardian and team agreed to clothing preferences, non-fantasy costume was for Halloween activities, and staff training on reality testing prompts. The Ombudsman provided guidance on rights practices to the guardian and team and continues to participate in team meetings. The Ombudsman encouraged the guardian and team to work for resolutions that balanced the resident's self-determination, guardian's safety concerns and the team's responsibilities to both resident and guardian.



