Local Human Rights Committee  
Bradford Road Office, Conference Room B  
Culpeper, Virginia  
July 26, 2011, 1:30 p.m.  
MINUTES

Members: Eileen Peet, JoAnn Lyons, Sharon Adams, Dr. Beverly Young, Darlene Heckethorn, Dr. Dawn Klemann, Arla Jean Lewis

Absent: Kathleen Downey

Affiliates: John Flemming, Dyane Winn, Mary Gray, Marie Clore, David Henry, Reginald Fuller, Dennis Sajdak, Elise Stevenson, Beth Stephens, Bryna May, Julie Turner, Erika Funkhouser, Lana Hurt

Also Present: Chuck Collins, DBH&DS-OHR; Mark Seymour, DBH&DS-OHR; Jim Bernat, Director of Quality Improvement, RRCS; Brian Duncan, Executive Director; RRCS; Kimberley Martin, Admin Assistant, RRCS; Karen Streichert, RRCS

1. Dr. Dawn Klemann, Chair, called the meeting to order at 1:40 p.m.

2. Introductions: Dr. Dawn Klemann introduced herself and asked for each attendee to also introduce themselves.

3. Additions or Deletions to the Agenda:

   ACTION: JoAnn Lyons motioned to approve the agenda. Beverly Young 2nd the motion. There being no further discussion, the motion to approve the agenda was voted on and passed unanimously.

4. Public Comment
   - If an Affiliate leaves the area, the LHRC should receive word from the organization.

5. Approval of the April 26, 2011 Minutes

   ACTION: Beverly Young motioned to approve the April 26, 2011 minutes. Darlene Heckethorn 2nd the motion. There being no further discussion, the motion to approve the minutes was voted on and passed unanimously.

6. Presentations: Affiliation Updates (10 minutes)
   - CHRYSALIS COUNSELING CENTERS – Elise Stevenson presented to the committee a summary of her program. Both her summary and answers to the seven basic questions that providers are asked to answer during their presentation were presented in written form. The Committee had the following questions:
Additional Questions:
How many clients do you have? 98
Are you seeing an increase or decrease in need for services? We are seeing kids that are sicker and parents that are having a harder time coping. We are seeing an increase.
Are you seeing people at a younger age? From our perspective they are younger. We have children as young as 3 years old.
Can you ballpark the number of seniors? We have none in-home and less than 10 in out-patient.
What is the difference between in-home and intensive in-home? We provide the same level of care for both but is a way for them to understand the funding …more documentation.
Do the children have a change in diagnosis as time goes on? Some diagnoses do change and others do not if they are biologically based. Depression could go into remission. We cannot globalize the diagnosis.
How often do you evaluate/test the patient? We evaluate throughout the entire process. We look at the diagnosis through supervision.
Are you involved in other settings? We are glad to attend when asked or needed.
Orienting families to human rights...how do you make sure the child understands? We sit down with the children and talk to them on their level.
Where do these children go when they grow up? If they no longer qualify under Medicaid, then we do transfer to independent living skills services.

- NATIONAL COUNSELING GROUP, INC.—Bryna May and Julie Turner presented to the committee a summary of their program. Both their summary and answers to the seven basic questions that providers are asked to answer during their presentation were presented in written form. The Committee had the following questions:

Additional Questions:
When dealing with other institutions or staff, how do you negotiate charge over the child? It starts at the relationship level. There is a lot of give and take and a lot of communication regarding their goals and our goals. We trust their educational goals. And we want them to trust our professional evaluation.
How many kids in treatment? We have a 6 to 1 ratio.
How do you get your clients? We get referrals from schools, courts, CSBs and attorneys.
Can and do teachers contact you directly without referrals? Yes. We hear more from counselors but we can be contacted by teachers.
Do you contact the parents first? We get the information and follow up with the families to get releases signed.
Do you have occasion to use restraints? Extremely rarely have we used restraints. We have a handle with care trainer and are trained every year.

- WALL RESIDENCES, INC.—Erika Funkhouser and Lana Hurt presented to the committee a summary of their program. Both their summary and answers to the seven basic questions that providers are asked to answer during their presentation were presented in written form. The Committee had the following questions:

Additional Questions:
There was conversation regarding the good job Wall Residence does notifying and keeping in touch with the State Advocate. The client with intellectual disabilities placed in someone’s private home is not going to pick up the phone when there is a human rights issue. The state advocate needs to depend upon the staff at Wall Residence to know what is going on. Chuck Collins stated he likes the way the monthly reporting has been going. The new model wouldn’t provide as much documentation. Wall Resident staff stated they would be glad to continue the model of reporting monthly.
There might be incentive for a family not to report incidents. We are very good at finding out.
What kind of back up plans do you have in place for the clients? We always have the conversation about succession planning…who would your client be most comfortable with? About 10% of funding is for backup staff.

Requests: We have a medical protective restraints request. This person needs restraints so he doesn’t fall out of his wheel chair. We have the doctor’s prescription and the statement from the legal guardian. Chuck Collins recommended the committee approve the request as the organization can show support from the doctor due to a diagnosis of cerebral palsy and additionally the guardian is in agreement.

Additional questions:
Does the family have instruction on the use of the restraints? Yes, the family has instruction on use of the restraints. The client wouldn’t be able to sit up without assistance.

ACTION: Eileen Peet motioned to approve the request for restraints for a period of 1 year. Beverly Young 2nd the motion. There being no further discussion, the motion to approve the request for use of restraints for a period of 1 year was approved.

• Creative Family Solutions – Diane Winn and Mary Ann Gray presented to the committee a summary of their program. Both their summary and answers to the seven basic questions that providers are asked to answer during their presentation were presented in written form. The Committee had the following questions:

Additional Questions:
Why do you talk about autism in your report? Autism falls under the developmental disability waiver.
What is the average length of time you are associated with clients? We plan to be with them indefinitely unless something happens.
How often do you check on your clients? We do a minimum of monthly checks.
If the client is by themselves, do you provide some kind of assisted technology? We could recommend assisted technology but we do one on one. We are there the amount of time we as a team feel is required. Most of our clients are with extended family. If they are alone, we are there as much as needed with wrap around services provided by other organizations.
What is your staff turn-over rate? It seems cyclical. We go months with no turn over and then sometimes we lose one a month. We try to get our staff to refer. We have people from the local ARCs. The most difficult positions to keep filled are the clients farther out in the country. We run into people leaving to work at WaWa due to benefits and pay and not having the responsibility for a person’s life.

7. Requests for Affiliation/Updates on licensing status
• Family Life Counseling – John Flemming - Licensure update: We are finally seeing an end game. We’ve been going through the licensing process for nearly 2 years. Our policies and procedures are approved. A licensing specialist has been assigned to our organization. Pam Dubois will be coming to our offices the first week of September.

8. Human Rights Announcements – Chuck Collins
• Thank Kathleen Downey for her service to the LHRC Board.
• Blue Ridge Residential Services—Kimberly Shepherd/Catherine St. Ours – Consolidated Region 10 LHRC, RRCS LHRC, Northwestern LHRC affiliations to have Valley LHRC serve as their LHRC for those regions.
• Culpeper League of Therapists- Culpeper League of Therapists is closing and Compass Youth is taking over. Referrals are being made. Some staff members are being assimilated.
• National Counseling Group, Inc. – Krista Hale has moved to a new role at NCG. Bryna May is now the Site Director for the Culpeper Office.
• CHILDHELP-John Bachand stepped down as Village Director. Dennis Sajdak, VP of Program Services, is the interim Director.
• COOPERATIVE AGREEMENT – ALL AFFILIATES – SIGN & RETURN
• BY-LAWS – VOTED & APPROVED AT APRIL 2011 MEETING

**ACTION:** Chuck Collins called for a MANDATORY Meeting in October. Jim Bernat and Kimberley Martin will draft an email addressing the items to be addressed at the October meeting: new quarterly reports, new yearly reports, new By-Laws, new Cooperative Agreement and Affiliation Contribution of $200.

9. Updates on Recent RRCS Cases and Issues—Jim Bernat provided a summary of human rights complaints from the past quarter. There were 2 informal complaints that were not founded. No formal complaints. There were 2 peer to peer complaints that were not founded. There were 2 staff to staff complaints involving the same two staff members— one unfounded, on undetermined. Chuck Collins, State Advocate, requested follow-up to this at the next meeting.

10. RRCS update by Jim Bernat. RRCS supports the voluntary suggested $200 Affiliation contribution in lieu of supporting the LHRC in some other more tangible way. Remember under the new by-laws, it is the responsibility of affiliates to supply names for Board Members.

The regular meeting ended at 4:00 pm

**ACTION:** Sharon Adams motioned to enter into closed session at 4:00 p.m. Eileen Peet 2nd the motion. There being no further discussion, the board voted unanimously to enter into closed session.

11. New Member Interviews – Arla Jean Lewis submitted her application for membership to the board. After questions and discussion from current board members, a vote was taken.

**ACTION:** Chuck Collins tallied the votes. The board voted unanimously to make Arla Jean Lewis a member of the LHRC Board.

**ACTION:** JoAnn Lyons motioned to end the closed session and adjourn the meeting at 4:15 p.m. Sharon Adams 2nd the motion. There being no further discussion, the board voted unanimously to end the closed session and adjourn this quarterly meeting of the LHRC.

12. Meeting Schedule for 2011 & 2012 is as follows:
   • October 25, 2011, 2nd Floor Board Room, Bradford Road Office at 1:30 p.m.
   • January 24, 2012, 2nd Floor Board Room, Bradford Road Office at 1:30 p.m.
   • April 24, 2012, 2nd Floor Board Room, Bradford Road Office at 1:30 p.m.
   • July 24, 2012, 2nd Floor Board Room, Bradford Road Office at 1:30 p.m.
   • October 23, 2012, 2nd Floor Board Room, Bradford Road Office at 1:30 p.m.

Approved:

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Chair or Vice Chair