

RESIDENT GRIEVANCE SYSTEM

**ANNUAL REPORT
FISCAL YEAR 2010**

**MENTAL HYGIENE
ADMINISTRATION FACILITIES**

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PART I

RESIDENT GRIEVANCE

SYSTEM

2010

RESIDENT GRIEVANCE SYSTEM FISCAL YEAR 2010 ANNUAL REPORT

BACKGROUND AND STRUCTURE OF THE PATIENT RIGHTS PROGRAM

The program for the protection of patients' rights in the State psychiatric hospitals in Maryland, the Resident Grievance System, was established in 1985 as part of the negotiated settlement of the class action lawsuit, *Coe v Hughes, et al.* The suit focused on patients' rights to effective access to the judicial system, which is guaranteed by the United States Constitution. The settlement stipulated creation of a two-tier patients' rights advocacy system that would protect rights guaranteed to patients by federal and state laws. The program is governed by the Code of Maryland Regulations (COMAR) 10.21.14, entitled Resident Grievance System, adopted March 28, 1994 and amended January 26, 1998.

Resident Grievance System

The first tier of the program, the Resident Grievance System, is a four stage administrative process that ensures that the rights of residents in the Mental Hygiene Administration facilities are protected through a fair, efficient, and complete mechanism for receiving, investigating, and resolving residents complaints in a timely manner.

The Resident Grievance System is under the auspices of the Deputy Secretary for Behavioral Health and Disabilities, Renata Henry, Department of Health and Mental Hygiene. The Director of the program is responsible for hiring, evaluating, and assigning Rights Advocates. The program provides services for residents of the eleven Mental Hygiene Administration Psychiatric Facilities. In July 1, 2000, by order of the Secretary of the Department of Health & Mental Hygiene, the program was expanded to provide rights advocacy to the four Developmental Disabilities Administration State Residential Centers.

The Rights Advisors respond to complaints alleging a rights violation, assist residents in preserving their rights (voting, confidentiality, etc), serve as advocates for patients at forced medication panels, and provide patient rights education to residents and staff.

"All opinions expressed in this report are subject to the limitations of the data available at the time of this report and are subject to change should additional data become available."

Personnel Reassignments

On September 30, 2009, Edward Fowler, PhD, retired as a Rights Advisor assigned to Clifton T. Perkins Hospital Center (CTPHC). Dr. Fowler was replaced by Sonya White-Norman. In December 2009, Patricia Dorsey, Administrative Officer for the RGS and Anne Harrison, Rights Advisor assigned to Spring Grove Hospital Center retired. John Hancock and Everly Smith were hired respectively for the aforementioned positions. In February, Gregory Wyatt, Rights Advisor retired. His duties were assumed by current Rights Advisor Edward Zook. In June 2010, Susan Thomas, Rights Advisor assigned to Springfield Hospital retired. Jacqueline Short was hired as the new Rights Advisor.

Legal Assistance Provider

The second tier of the patient rights program, Legal Assistance Provider, is a group of independent law firms, whose services are obtained through State procurement, to provide specific legal assistance and representation to residents.

A priority of the Legal Assistance Provider is the representation of residents in obtaining benefits/entitlements. Following admission to a MHA facility, the social work staff discusses benefits/entitlements with the individual and assists them in making an application for benefits. After obtaining the client's consent, the Resident Grievance System makes a formal referral for representation to the Legal Assistance Provider. Typically, the resolution of the referral can take months or even sometimes years; however, as long as the referral is made while the patient is in the MHA facility, the Legal Assistance provider can continue to represent them even though the client may be discharged prior to the resolution of the claim. Under the contract provisions, the Legal Assistance Provider is prohibited from accepting any percentage of the monies awarded to the client. These benefits and entitlements are an essential component in being able to discharge patients to the community.

In fiscal year 2010, the Legal Assistance Providers were successful in obtaining \$160,362.24 in lump sum benefits and \$ 27,593.00 in monthly benefits. The total amount of benefits awarded to clients in lump sum and monthly payments were \$ 187,955.24.

Residents who are taken to Clinical Review Panels (forced medication) are entitled to file administrative and circuit court appeals. Legal Assistance providers are required to represent residents at these appeals provided the resident gives written consents to their representation.

The Legal Assistance Providers are also responsible for providing legal assistance to residents at Stages 3 and 4 of the Resident Grievance System, identifying residents who may have a legal problem but may not be able to request assistance due to their disability, and assisting patients with general civil claims by making referrals to pro-bono legal services.

In 2010, the following law firms served as the Legal Assistance Provider at the designated Mental Hygiene Administration facilities:

Linda Golden, Esq.

Thomas B. Finan Hospital Center

Hamlin & Swain, LLC

John L. Gildner Regional Institute for
Children & Adolescents
Southern Regional Institute for Children &
Adolescents

Terri D. Mason, P.C.

Walter P. Carter Hospital Center
Clifton T. Perkins Hospital Center

Ria P. Rochvarg, P.A.

Springfield Hospital Center
Spring Grove Hospital Center
Baltimore Regional Institute for Children &
Adolescents

Jennings & Treff Law Offices

Eastern Shore Hospital Center
Upper Shore Community Mental Health
Center

Coe Board of Review

The Coe Board of Review, which oversees the Legal Assistance Program, is an independent board comprised of attorneys, physicians, mental health professionals, and representatives of patient advocacy groups.

RESIDENT GRIEVANCE SYSTEM

1-800-747-7454

Darrell Nearon, Director

410-767-6888

John Hancock

Administrative Officer III

Database Program Mgr.

410-767-1051 & 1-800-747-7454

RIGHTS ADVISOR ASSIGNMENTS

Harry Evans III

RICA - Baltimore

RICA - Rockville

Edward Fowler

Walter P. Carter Center

Clinical Review Specialist

Anne Harrison

Spring Grove

George Lyons

Springfield

Susan Thomas

Springfield

Linda Simms

Clifton T. Perkins

Sharon Wert

Eastern Shore Hospital

Upper Shore Hospital

Holly Center

Gregory Wyatt

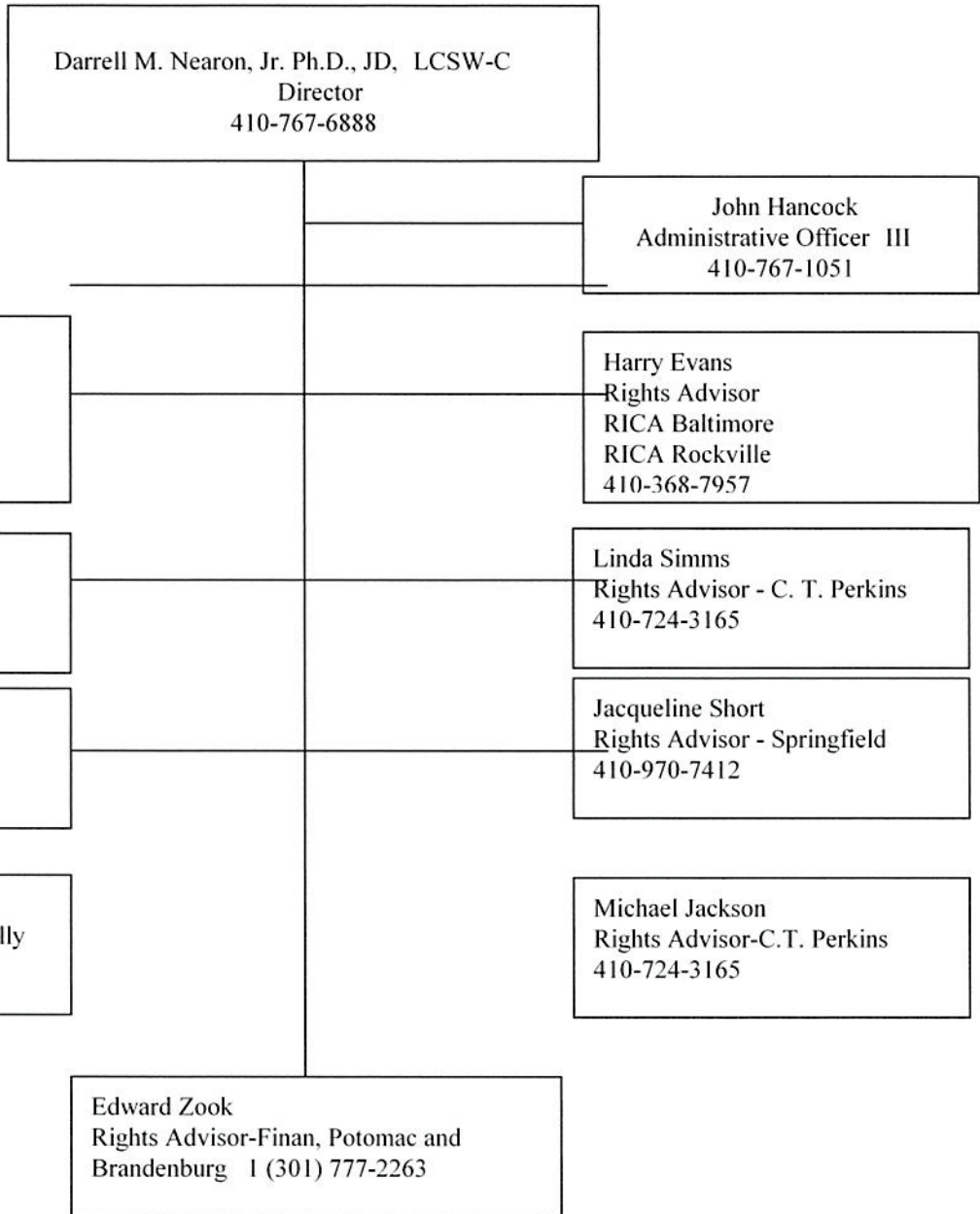
Rosewood & Potomac

Edward Zook

Thomas B. Finan

Brandenburg

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
RESIDENT GRIEVANCE SYSTEM



RIGHTS INFORMATION

Rights information is available and is provided to residents, their family and friends, and facility staff in various formats: posters, handbooks, and quarterly meetings at all facilities.

Patient Rights Poster

Patients Rights Posters are located in all public access areas and residential units of all Mental Hygiene Administration facilities. The Poster contains the toll-free telephone numbers of the Resident Grievance System as well as the Legal Assistance Provider for each facility. Facilities are encouraged to place posters adjacent to the public telephones located on each residential unit so that residents have access to the numbers when using the telephone.

Patient Rights Booklet

A copy of the Patient Rights Booklet, *Rights of Persons in Maryland's Psychiatric Facilities*, is given to all persons admitted to a State psychiatric facility and to new employees during orientation. In addition, the Rights Booklet, along with a letter of introduction from the RGS, is mailed to the parent or guardian of an adolescent at the time of their admission. The letter introduces the services provided by the RGS and the name and telephone number of the Rights Advisor assigned to their child's facility.

This booklet is revised on a yearly basis to ensure that changes in the law are incorporated and residents are receiving the latest information regarding any rights issues.

Korean, Spanish and Vietnamese translations, as well as a Braille edition, of the Rights Booklet are available. These are regularly distributed to admission offices at all facilities and are available, upon request, from the Rights Advisor at your facility or from the Director of the RGS.

Informational Meetings

Patient rights education is routinely presented to residents once every three months on each units at all facilities by the Rights Advisor and Legal Assistance Provider. In addition to the group sessions, patients at acute care and adolescent facilities are seen individually by the Rights Advisor, shortly after their admission, in order to acquaint them with RGS services, review the rights booklet, and answer any questions they may have regarding patient rights. This data is included on the Categories of Rights Issues - Information/Assistance Sheet, 11B Rights Protection System, Explanation of Rights, for each facility.

Rights Advisors present training on patient rights during the orientation for new staff and the annual training in-services scheduled for employees. Specifically designed education presentations are developed and scheduled as the need arises, upon the request of patients or staff, or in response to grievances, which have identified deficits in a specific area of patient rights.

**TOLL-FREE ACCESS
TO RESIDENT GRIEVANCE SYSTEM**

In January 1996, the Resident Grievance System implemented toll-free telephone access to the Central Office, 1-800-RGS-7454, in addition to the two regular lines. This service allows residents to have immediate contact with the Resident Grievance System and has enhanced the ability to respond rapidly to patient concerns.

The RGS Administrative Officer, John Hancock, responds to calls from patients, obtains information regarding the caller's concern, records the information on the telephone log, and relays the concern to the Rights Advisor. If the issue presented is one that requires an immediate response, e.g. abuse, neglect, safety concern, etc., Mr. Hancock designates it as a high priority and directs a Rights Advisor to immediately respond to the concern. If the issue does not require an immediate response, the Rights Advisor calls the patient and schedules a mutually convenient time that they can meet to discuss the concern.

ACTIVITY ON TOLL-FREE LINE FOR FY-2010

Month	Total Calls	Average Daily Calls	Duration (Minutes)	Average Call Duration
July 2009	395	12.8	705	1.79
August 2009	498	16.1	1,159	2.33
September 2009	306	10.2	309	1.01
October 2009	313	10.9	526	1.68
November 2009	324	10.8	594	1.83
December 2009	389	12.6	789	2.03
January 2010	445	14.4	1,170	2.63
February 2010	345	12.3	660	1.91
March 2010	516	16.6	1,239	2.40
April 2010	372	12.4	1,097	2.95
May 2010	336	10.8	865	2.57
June 2010	341	11.4	588	1.72
Total	4,580	12.6	9,701	2.11

**TOTAL NUMBER AND PERCENTAGE OF GRIEVANCES
FOR ALL FACILITIES BY RIGHTS CLASSIFICATION
FOR FY-2010 COMPARED TO FY 2009 DATA**

RIGHTS CLASSIFICATION	FY-2009		FY-2010	
(1) Abuse	196	14%	139	13%
(2) Admission/Discharge/Transfer	65	5%	35	3%
(3) Civil Rights	190	14%	137	13%
(4) Communication & Visits	56	4%	50	5%
(5) Confidentiality	45	3%	27	3%
(6) Environmental	165	12%	127	12%
(7) Freedom Of Movement	170	12%	142	14%
(8) Money	40	3%	29	3%
(9) Neglect	5	1%	4	.5%
(10) Personal Property	77	6%	57	5%
(11) Rights Protection System	22	2%	21	2%
(12) Treatment Rights	265	19%	189	18%
(13) Other	22	2%	24	2%
(14) No Right Involved	28	2%	60	6%
(15) Resident-Resident Assault	36	3%	7	.5%
(16) Deaths	1	0%	0	0%
Total	1400	100%	1048	100%

**RESIDENT GRIEVANCE SYSTEM
ACTIVITY PER FACILITY
FISCAL YEAR 2010**

	Grievances	Information Assistance	Clinical Review Panels	TOTAL
Clifton T. Perkins	242	182	47	471
Eastern Shore	52	226	14	292
RICA-Baltimore	150	79	0	229
RICA-Rockville	49	53	0	102
Springfield	188	371	64	623
Spring Grove	342	1,062	19	1,423
Thomas B. Finan	20	101	40	161
Upper Shore CMHC*1	5	70	2	77
Total	1,048	2,144	186	3,378

*1 Facility closed in 2010

**HISTORICAL DATA OF
RIGHTS ADVISOR CONTACTS PER FISCAL YEAR
SINCE IMPLEMENTATION OF THE RGS IN NOVEMBER 1985**

<u>Year</u>	<u>Total</u>	<u>Classification Breakdown</u>
2010	3378	Grievance 1,048, Clinical Review Panels 186 Information/Assistance 2,144
2009	3390	Grievance 1,400, Clinical Review Panels 158 Information/Assistance 1,832
2008	2583	Grievances 978, Clinical Review Panels 139 Information/Assistance 1,466
2007	3052	Grievances 999, Clinical Review Panels 206 Information/Assistance 1,847
2006	2918	Grievances 1028, Clinical Review Panels 176 Information/Assistance 1714
2005	2919	Grievances 941, Clinical Review Panels 179, Information/Assistance 1799
2004	2817	Grievances 1004, Clinical Review Panels 150, Information/Assistance 1663
2003	3106	Grievances 1110, Clinical Review Panels 183, Information/Assistance 1813
2002	3499	Grievances 1371, Clinical Review Panels 158, Information/Assistance 1970
2001	4021	Grievances 1681, Clinical Review Panels 161, Information/Assistance 2179
2000	4243	Grievances 1545, Clinical Review Panels 184, Information/Assistance 2514
1999	4733	Grievances 1547, Clinical Review Panels 184, Information/Assistance 2649
1998	4294	Grievances 1441, Clinical Review Panels 204, Information/Assistance 2649

1997	4025	Grievances 1514, Clinical Review Panels 228, Information/Assistance 2283
1996	4115	Grievances 1808, Clinical Review Panels 160, Information/Assistance 2147
1995	2740	Grievances 1873, Clinical Review Panels, 172, Information/Assistance 695
1994*	2940	Grievances 2720, Clinical Review Panels 220
1993*	3226	Grievances 3030, Clinical Review Panels 196
1992*	3074	Grievances 2829, Clinical Review Panels 245
1991**	2730	Grievances
1990* *	2782	Grievances
1989* *	2745	Grievances
1988* *	2857	Grievances
1987* *	2628	Grievances for full fiscal year of operation
1986* *	2030	Grievances for eight months of operation

Since 1995 data has been reported in three categories, Grievances, Clinical Review Panels, and Information/Assistance.

- 1992-1994 data was reported in two categories Grievances and Clinical Review Panels

** 1986 – 1991 data was reported in a single classification – Grievances.

RGS DATA COLLECTION AND CLASSIFICATION

The data in the Annual Report for Fiscal Year 2010 are reported in three major classifications: Grievances, Clinical Review Panels, and Information/Assistance. For purposes of data collection, form RGS-24 "Category of Rights Issues" assigns all cases to one of 16 major categories: Abuse, Admission/Discharge/Transfer; Civil Rights; Communication & Visits; Confidentiality & Disclosure; Environmental; Freedom of Movement; Money; Neglect; Personal property; Rights protection System; Treatment Rights; Other; No Right Involved; Resident-Resident Assault; and Death. Most of the major categories have subcategories.

Resident Grievance System Regulations (RGS), COMAR 10.21.14, defines "Rights Issues" broadly: "an alleged violation of a resident's rights guaranteed by federal and State constitutions, statutes, regulations, common law, or policies of the Department, Mental Hygiene Administration, and the facility". When the RGS was created, the rationale for this broad definition was precisely because not all rights issues are stipulated in the law but this does not make them any less a rights issue. The RGS Director has the responsibility for developing the classification system and providing guidelines.

Grievances

Cases classified as Grievances are those issues that allege a violation of patients' rights and whose goal is to obtain a specific outcome. The Rights Advisors' role in a grievance is to be a neutral fact finder, conduct a thorough investigation, and render a decision based on the evidence.

Grievances are determined to be Valid, Invalid, or Inconclusive. When sufficient evidence does not exist to prove or disprove the allegation, the grievance is determined to be inconclusive.

The Rights Advisors' role is to work toward the achievement of a mutually satisfactory resolution at the lowest possible stage.

Grievance investigation and resolution generally requires the Rights Advisor to have multiple contacts with the grievant and others, up to 65 working days, the total time permitted for resolution of the grievance by the RGS Regulations, COMAR 10.21.14.

Grievances consume the largest amount of Rights Advisors' time. The Rights Advisors' role is to be non-adversarial and to function as a mediator, facilitator or negotiator.

In fiscal year 2010, Rights Advisors processed 1048 grievances of which (715) were closed at Stage 1 and (208) were appealed to Stage 2.

Clinical Review Panels

In accordance with the Annotated Code Of Maryland, Health General 10-708, the Clinical Review Panel (CRP) determines whether to approve the administration of medication over the patients' objection.

The Rights Advisor serves as an advocate for the patient and makes every effort to ensure that the patients' objections to the medication are presented during the CRP process. The Rights Advisor provides the patient with information regarding rights throughout the CRP process, and if the patient elects to appeal the decision, assists them in filing an appeal to the Administrative Law Judge and the Circuit Court.

A Clinical Review Panel requires the Rights Advisor to have multiple contacts with the patient during the panel and appeal process. As an advocate for the patient, the Right Advisor's role at the CRP is adversarial since they are representing the patients' objections to the medication over those of the facility.

In fiscal year 2010, a total of 186 Clinical Review Panels (CRP's) were scheduled. A total of 178 were held, with 8 panels being cancelled. The largest number, 39, of CRP's were for persons identified not criminally responsible.. Patients who were found incompetent to stand trial comprised 31 of held panels. Patients who were civilly committed comprised 52 of held panels.

The panel approved medication in 96 cases. Patients filed an administrative appeal of the panel's decision in 49 of the panels. The Administrative Law Judge upheld the panel's decision in 39 of the appeals. A total of 10 of the cases were appealed to the Circuit Court. The Circuit Court upheld 6 of the decisions.

The Resident Grievance System Rights Advisors assisted and advocated for patients at all Clinical Review Panels held, filed for an Administrative Hearings for those patients whose CRP determined that they could be medicated against their will, and assisted patients in obtaining legal assistance to represent them at the appeal levels.

Information/Assistance

Cases classified as Information/Assistance do not allege a rights violation but are contacts in which the patient is seeking information, clarification, or assistance with a concern.

In fiscal year 2010, Rights Advisors provided Information/Assistance for 2,144 patients.

MHA Trending Data
Select Years

Year	<u>1986*</u>	<u>1987*</u>	<u>1995*</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>
Grievances	2030	2628	1873	1028	999	978	1,400	1,048
Abuse	*2			129	102	170	196	139
Neglect				3	3	4	5	4
Treatment				179	184	173	266	189
I & A	*3		695	1,714	1,846	1,466	1,832	2,144
Abuse				1	1	1	7	4
Neglect				0	0	0	2	0
Treatment				62	74	2	280	60
Deaths	4			0(23)*5	1(11)	0(18)	0(12)	0
LAP Reports	N	Y	Y	Y	Y	Y	Y	Y
Narrative	N	Y	Y	Y	Y	Y	Y	Y
Stage 4's	x	x	x	36	22	12	14	33
CRP's*6	x	x	172	176	206	139	158	186

Note:

All numbers represent totals

Legend

N= No; Y=Yes

*1986 and 1987 data were reported in a single classification – grievances

*(1) =Data first reported in e categories, grievances, CRP's and Inofrmation/Assistance

*(2) = See * above

*(3) = See * above

*(4) = Records not available

*(5) = Numbers not in parenthesis are grievance figures. Numbers in parenthesis are information/assistance figures

*(6) = Clinical review Panels

x – Records not available

Training and Continuing Education

During the 2010 fiscal year, the Resident Grievance System Rights Advisors participated in various training and continuing education to assist in providing patients and individuals within the state psychiatric and residential centers with effective patient advocacy.

Training included forensic mental health intervention, sexuality in people who have intellectual disabilities, nephrology problems in psychiatric patients, psychosis, addressing prevention management and aggressive behavior and understanding the clinical review panel process and advocating for patients before the panel.

All Rights Advisors recently hired receive weekly supervision from the Director of the Resident Grievance System and mandatory hospital training at their respective facilities and the Rights Advisors' were cross trained on specific issues for patients at the Clifton T. Perkins Hospital Center.

The Rights Advisors continue to identify training that will assist in the performance of their daily duties.

Accomplishments

During the 2010 fiscal year, the Resident Grievance System participated in activities that provided patients and individuals residing within the state psychiatric centers and residential centers with advocacy services that had an overall impact on their health and well being. In one instance, a Rights Advisor advocated for a paraplegic patient to obtain a "straight-line" wheel chair. The wheel chair provided additional mobility or the patient. In another case, a Rights Advisor advocated for benefits that had been wrongfully suspended to patients by two different governmental agencies. In a third instance, the Rights Advisor with the assistance of the Legal Assistance Provider (LAP), successfully had a form pertaining to patients' admission status revised to reflect current and accurate information.

GRIEVANCE OUTCOME FOR STAGES 1, 2, 3 AND REFERRALS TO THE CENTRAL REVIEW COMMITTEE AT STAGE 4

- **STAGE 1:** 1048 grievances were investigated by the Rights Advisor
715 (68 %) were closed through resolution or withdrawal

- **STAGE 2:** 333 (31%) grievances were reviewed by the Unit Director
208 (62%) were closed through resolution or withdrawal

- **STAGE 3A:** 37 grievances were reviewed by the Resident Rights Committee

- **STAGE 3B:** 88 grievances were reviewed by the Superintendent
55 (63%) were closed through resolution or withdrawal

- **STAGE 4:** 33 (3%) grievances were reviewed by the Central Review Committee which rendered the following decisions:

Grievances determined to be Valid	4
Grievances determined to be Inconclusive	12
Grievances determined to be Invalid	17

- No clients were represented by an attorney at Stage 4

The data reflects that only 33 (3%) of the 1,048 grievances reached the 4th and final stage of the RGS. This figure supports that the RGS is achieving its mission of resolving grievances at the lowest possible level through mediation, negotiation and conciliation, and that the internal rights protection system is a fair, efficient, and complete remedy for the resolution of patient complaints.

**DECISION AND ACTION (GRIEVANCE CASES) FY 2010
AGGREGATE (MHA)**

STAGE 1 - RIGHTS 1048 GRIEVANCES					
Decisions at Stage 1			Actions at Stage 1		
Valid	321	31%	Resolved	698	67%
Invalid	535	51%	Withdrawn	17	1%
Inconclusive	192	18%	Outside Referral	0	0%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 1			715	68%	
Total Number of Cases Referred to Stage 2			333	32%	

STAGE 2 – UNIT DIRECTOR 333 GRIEVANCES					
Decisions at Stage 2			Actions at Stage 2		
Valid	101	30%	Resolved	169	51%
Invalid	123	37%	Withdrawn	30	10%
Inconclusive	109	33%	Outside Referral	2	1%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 2			208	62%	
Total Number of Cases Referred to Next Stage			125	38%	

STAGE 3A – RESIDENT RIGHTS COMMITTEE 37 GRIEVANCES					
Decisions at Stage 3A			Actions at Stage 3A		
Valid	2	3%	Resolved	2	4%
Invalid	9	27%	Withdrawn	35	95%
Inconclusive	26	70%	Outside Referral	1	1%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 3A			37	100%	
Total Number of Cases Referred to Stage 3B			0	0%	

STAGE 3B – SUPERINTENDENT/CEO 88 GRIEVANCES					
Decisions at Stage 3B			Actions at Stage 3B		
Valid	4	4%	Resolved	20	23%
Invalid	50	57%	Withdrawn	35	39.5%
Inconclusive	34	39%	Outside Referral	0	0%
Not investigated	0	0%			
Total Number of Cases Closed at Stage 3B			55	62.5%	
Total Number of Cases Referred to Stage 4			33	37.5%	

STAGE 4 – CENTRAL REVIEW COMMITTEE 33 Grievances					
Decisions at Stage 4			Actions at Stage 4		
Valid	4	12%	Resolved	4	12%
Invalid	17	52%	Withdrawn	0	0%
Inconclusive	12	36%	Outside Referral	29	88%
Not Investigated	0	0%			
33 Total Number of Cases Closed at Stage 4					

HISTORICAL PERSPECTIVE OF STAGE 4 APPEALS

The following reflects the historical data on the number and percentage of total RGS grievances that reached the highest level of the RGS, Stage 4, and were reviewed by the Central Review Committee, dating from the current year to the implementation of the RGS in 1986.

<u>Fiscal Year</u>	<u>Number & % of Total</u>	
2010	33	3%
2009	14	1%
2008	12	1%
2007	22	2%
2006	36	4%
2005	44	5%
2004	40	4%
2003	16	1%
2002	22	2%
2001	113	7%
2000	43	3%
1999	13	0.8%
1998	17	0.5%
1997	19	1%
1996	11	0.6%
1995	10	0.5%
1994	13	0.5%
1993	27	1%
1992	45	2%
1991	39	2%
1990	79	3%
1989	50	2%
1988	57	2%
1987	91	4%
1986	61	3%

**RESIDENT GRIEVANCE SYSTEM
STAGE 4 REVIEWS BY
CENTRAL REVIEW COMMITTEE**

A Stage 4 Central Review Committee appeal is the last and final appeal level of the Resident Grievance System. A Rights Advisor is required to make every effort to negotiate, mediate, and resolve the grievance; however, the ultimate decision to resolve or appeal the grievance belongs to the patient. If the patient elects to appeal, even though the Rights Advisor may not believe that the request has merit, the Rights Advisor is required to assist the patient in filing the appeal.

The Central Review Committee is comprised of three members; Director of the Resident Grievance System, Director of the Mental Hygiene Administration, and Clinical Director of the Mental Hygiene Administration, or their designees.

The Committee reviews all prior information concerning the grievance and may conduct further investigation, if deemed by the Committee to be warranted. At the conclusion of the review, the Committee issues a written decision based on their findings and makes recommendations for corrective action, if warranted.

Within 20 working days, after receiving the recommendations from the Central Review Committee, the facility's Chief Executive Officer is required to forward to the Committee a written report of the status of the implementation of the Committee's recommendations. The Chief Executive Officer is required to make periodic reports to the Committee every 30 days until the recommendations are fully implemented.

There were a total of 14 grievances appealed to Stage 4 in Fiscal Year 2010 which represents 1% of the 1400 grievances filed.

98% (11) of the Stage 4 appeals were filed by (4) residents of Clifton T. Perkins Hospital Center.

The remaining 1 % (1) Stage 4 appeals were filed by a resident of Spring Grove Hospital, 1% (2) Stage 4 appeals were filed by a resident of Eastern Shore Hospital. The Stage 4 grievances reviewed by the Central Review Committee for Fiscal Year 2010 are detailed on the following pages.

CATEGORY 1A
ABUSE – Physical
33 Grievances

Grievance #1

A grievance was filed by the resident alleging that he was physically abused by a staff member at the Spring Grove Hospital facility on or about April 12, 2010. The resident alleged that a staff member “grabbed the phone book out of my hands”. The resident further alleged that a second staff member “bear hugged me, pushed me towards the fan, banged my head on the wall. He took me down on my kneecaps. I got back up and grabbed him in a headlock and put him on the ground because he wouldn’t let me go. This was in front of all the patients. I did swing at him and hit him in the nose with my fist”. The somatic physician examined the resident, and the Spring Grove Hospital police conducted an investigation.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Inconclusive

The Central Review Committee reviewed the submitted documentation, and we concur with the decision of the Patients Rights Advisor that the grievance was inconclusive. The Committee requests that the CEO and his staff review the access to telephones for patients, and identify strategies to address the issue.

Grievance #2

A grievance was filed by the resident alleging that he was physically abused by a staff member at the Spring Grove Hospital facility on or about April 12, 2010. The resident alleged that a staff member “grabbed the phone book out of my hands”. The resident further alleged that a second staff member “bear hugged me, pushed me towards the fan, banged my head on the wall. He took me down on my kneecaps. I got back up and grabbed him in a headlock and put him on the ground because he wouldn’t let me go. This was in front of all the patients. I did swing at him and hit him in the nose with my fist”. The somatic physician examined the resident, and the Spring Grove Hospital police conducted an investigation.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Inconclusive

The Central Review Committee reviewed the submitted documentation, and we concur with the decision of the Patients Rights Advisor that the grievance was inconclusive. The Committee requests that the CEO and his staff review the access to telephones for patients, and identify strategies to address the issue.

Grievance #3

A grievance was filed by the resident alleging that she was physically abused by facility staff. The resident alleges that “the guys/male staff tied me down, slammed me up against the back of the chair, right after he put me in restraints”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, the Committee concurs with the findings of the Rights Advisor and finds the allegation to be invalid.

Grievance #4

A grievance was filed by the resident alleging that she was physically abused by facility staff. The patient alleges that “the guys/male staff tied me down, slammed me up against the back of the chair, right after he put me in restraints”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, the Committee concurs with the findings of the Rights Advisor and finds the allegation to be invalid.

Grievance #5

A grievance was filed by the resident alleging that “she had been physically abused by a staff member on 7/8 and 7/12”. The resident reports that “she had spoken with staff in hospital security and the security staff was aware of the allegation and was investigating the incident”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid.

Grievance #6

A grievance was filed by the resident alleging that “on 6/30/2009 a staff member slapped him on the buttocks while in the shower room, and also called him a homosexual and told him to get it (the soap) myself before he punches me in the face”.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, invalid at Stage 2 by the Unit Director, inconclusive at Stage 3 by the CEO.

Decision of the Central Review Committee – Inconclusive

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be inconclusive

Grievance #7

A grievance was filed by the resident alleging that “on 7/7/2009 a CTPHC officer held me up by the stomach by a belly chain and threw me on the floor and snatched me off the floor of the University of Maryland admissions emergency room lobby on June 18th”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid

Grievance #8

A grievance was filed by the resident alleging that “on 7/7/2009 a CTPHC security staff officer punched me while I was at University Hospital after an eight hour exploratory laparotomy/repair of a duodenal ulcer. The officer pulled out a Jackson Pruitt drain and nasal drainage tube and punched me in the stomach”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid

Grievance #9

A grievance was filed by the resident alleging that “on 5/28/2009 a staff member (nurse) between 6:45 am and 7:05am tried to caress the right side of my face and then open-handed slapped me on the right side of my face”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid

Grievance #10

A grievance was filed by the resident alleging “an awful attack on me occurred Sunday night. I would like to say it was human torture, by staff.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid

Grievance #11

A nursing supervisor assigned to the ward alleges that two patients reported to a psychiatrist, an RN and the nursing supervisor “that all 1 South staff on all shifts grab the resident by the neck while feeding him and slap him in the head and that staff refuse to change him when he becomes incontinent”.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, invalid at Stage 2 by the Unit Director and, inconclusive at Stage 3B by the CEO.

Decision of the Central Review Committee – Inconclusive

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be inconclusive. The committee believes that there are educational training issues for staff, continued conversations with the guardian regarding placement and a review of the patient’s clinical status may be beneficial to the patient and the hospital staff.

Recommendations for Corrective Action

It is recommended that facility staff continue to receive training as it pertains to engaging intellectually challenged patients in treatment. Hospital staff should continue to dialogue with the identified and alternative guardians of the patient as it relates to reviewing alternative placement options for the patient. Finally, continued review of the patient's clinical status is recommended.

Grievance #12

The patient alleges that "on 5/20/2009, around the morning nursing shift change I was awoken with a blow to my right temple by a staff member and that my shirt was subsequently ripped off".

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, Stages 2 and 3B respectively by the Unit director and the CEO.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid

Grievance #13

The resident alleges that "a hospital staff member physically assaulted him when he refused to turn the water off in the bathroom".

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, Stages 2 and 3B respectively by the Unit director and the CEO.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, The Central Review Committee concurs with findings of the Rights Advisor, and finds the allegation to be invalid. The Committee believes that there are educational and training issues that may be beneficial for staff and patients.

Recommendations for Corrective Action

It is recommended that facility staff receive continued and ongoing staff training, education and supervision on PMAB principles, strategies and techniques. In addition, training and supervision on the clinical concept of transference and counter transference will be of assistance to staff working with psychiatric patients. Finally, continued review of the resident's treatment plan and therapeutic services will be of assistance to resident and the clinical team.

Grievance #14

The resident alleges that “a hospital staff member shoved me against a wall about 8:30 – 8:50 am on 5/19/2009”.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, inconclusive at Stage 2 by the Unit Director, and invalid at Stage 3B by the CEO.

Decision of the Central Review Committee - Inconclusive

Upon review of the presented documentation, the Central Review Committee finds the allegation to be inconclusive. The Committee concurs with the findings of the Rights Advisor.

The Committee concurs that the PMAB re-training offered to the staff person was an appropriate corrective action taken by the facility.

**CATEGORY 3B
CIVIL RIGHTS – Verbal
1 GRIEVANCE**

Grievance

The resident alleges that “he heard a staff member cursing regarding the flooding of a unit’s bathroom”.

The was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3 B respectively by the Unit Director, and CEO.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. The Committee concurs with the findings of the Rights Advisor

**CATEGORY 3F
CIVIL RIGHTS – Dignity
1 GRIEVANCE**

Grievance

The resident alleges that facility staff physically abused her. The staff “took my shirt off and put it back on but only around my neck”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3 B respectively by the Unit Director, and CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. The Committee concurs with the findings of the Rights Advisor.

CATEGORY 3H
CIVIL RIGHTS – Education
1 GRIEVANCE

Grievance

The resident alleges that “the staff member named in the grievance needs to be educated on stating her name, how to conduct rounds and patient safety during thunderstorms”.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, the Unit Director stated the matter was handled, and the CEO waived the facility right to review on deciding on the matter

Decision of the Central Review Committee – Valid

The Central Review Committee based on the allegation and the investigation conducted by the Rights Advisor finds the allegation of the staff not providing a patient (her) name, valid.

Recommendations for Corrective Action

The Central Review Committee recommends that (1) staff is required to provide patients their name. Staff wearing name badges can achieve this. When a grievance is filed and a grievant requests an investigation/review of the grievance, there cannot be a waiving of review of the grievance at any stage as per COMAR 10.21.14. The Central Review Committee will monitor this issue.

CATEGORY 4E
COMMUNICATION & VISITS – Telephone
1 GRIEVANCE

Grievance

The resident alleges that his rights were violated when a staff member monitors the resident’s telephone calls. The resident alleges that other residents do not have their telephone calls monitored.

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Clinical Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. The Committee concurs with the findings of the Rights Advisor

CATEGORY 4F
COMMUNICATION & VISITS – Mail
1 GRIEVANCE

Grievance

The Rights Advisor received an allegation from the Legal Assistance Provider that a resident complained that on October 27, 2008, the resident's mail was opened and read by staff without the resident's permission.

The grievance was determined to be inconclusive at Stage 1 by the Rights Advisor, valid at Stage 2 by the Division Director, valid at Stage 3 by the Residents Rights Committee and valid at Stage 4 by the CEO.

Decision of the Central Review Committee – Inconclusive

Upon review of the presented documentation, there appears to be evidence that the resident's mail was opened. It is unclear how the package was initially opened. We concur with the findings of the Rights Advisor, and, the recommendation that a policy be developed by the hospital that is consistent with federal guidelines describing procedures pertaining to resident's mail.

CATEGORY 6B
ENVIRONMENTAL – Diet

Grievance

The patient alleged that as a vegetarian he wishes to only consume raw fruits and vegetables. The resident's family has been providing the bulk of his diet, carrots, celery sticks and apples. The resident does not feel his family should have to supply his food, "it is the responsibility of the hospital".

The grievance was determined to be invalid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the COO and the CEO.

Decision of the Central Review Committee – Inconclusive

The Committee upon review of the documentation concludes the grievance to be inconclusive. The committee concludes that the resident's diet was a personal choice and not dictated by medical necessity. The committee would recommend that a dietary and

nutritional assessment be conducted as per hospital policy to determine if the patient's medical needs have changed requiring a special diet.

CATEGORY 6C
ENVIRONMENTAL – Personal Hygiene
1 Grievance

Grievance

The resident alleges “that he is still having trouble getting a hair care product, specifically a hair conditioner that detangles snarls that frequently develop in his hair”. The resident contends that the hospital/cosmetology department cannot keep up with the rate of entanglement in his hair based on the frequency of visits to the barber.

The grievance was determined to be valid at Stage I by the Rights Advisor, valid at Stage 2 by the Unit Director, invalid at Stage 3B by the CEO.

Decision of the Central Review Committee – Inconclusive

Upon review of the presented documentation, the Central Review committee finds the allegation to be inconclusive. The committee queries does the conditioner purchased by the hospital work on the resident's grade and type of hair?

The committee makes the following recommendations:

- Can the barber/cosmetology unit of the hospital review the product purchased and assess the suitability of said product based on the resident's grade and type of hair? If the product by the hospital is not suitable for the residents hair, can the unit recommend a product that would be suitable, and be in conformity with products approved by the Environment of Care unit of the hospital?

CATEGORY 6D
ENVIRONMENTAL – Safety
3 GRIEVANCES

Grievance #1

The Rights Advisor received a correspondence from a State Senator alleging a safety issues affecting a resident. The resident alleges that a safety officer at the facility drew his weapon on the resident and spoke to her in a racially derogatory manner.

The allegation was found to be invalid at Stages 1, 2 and 3B.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. The Committee concurs with the findings of the Rights Advisor

Grievance #2

The resident alleges that “several staff ran off the unit on 3/4/10 when a male peer ran from the seclusion room area to the dayroom”.

The allegation was found to be invalid at Stages 1, 2 and 3B.

Decision of the Central Review Committee - Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. The Committee concurs with the findings of the Rights Advisor

Grievance #3

“Nine unit patients are requesting another patient be removed from the unit as they do not feel safe with him on that unit. The petitioners state that this peer has repeatedly and openly physically, verbally and mentally abused and violated patients and staffers on the unit and continues to do so”.

The allegation was deemed inconclusive at Stage 1 by the Rights Advisor, invalid at Stage 2 by the Clinical Director, valid at Stage 3A by the Resident Rights Committee and valid at Stage 3B by the CEO.

Decision of the Central Review Committee – Valid

The Central Review Committee reviewed the submitted documentation and we concur that the complainants have a valid grievance regarding the issue of safety. The Resident Rights Committee set forth recommendations for this case and the CEO was in agreement with the recommendations. The Central Review Committee concurs with the recommendations.

CATEGORY 7E FREEDOM OF MOVEMENT – Restraint 1 GRIEVANCE

Grievance

The resident alleges that he surrendered himself voluntarily at to the facility and was physically restrained for no reason.

The allegation was deemed inconclusive at Stage 1 by the Rights Advisor, invalid at Stage 2 by the Unit Director, and valid at Stage 3B by the CEO

Decision of the Central Review Committee – Valid

Upon review of the grievance and supporting oral testimony, the Committee finds that the grievance is valid; there was no documentation to substantiate the use of restraints on the resident.

Recommendations for Corrective Action

The committee recommends that the resident meet with his treatment team and discuss the possibility of requesting that the Forensic Review Board review his case earlier than the six month time frame for review. In addition, the Committee recommends that ongoing training on the necessity of completing and inserting clinical documentation in the medical record be conducted at the facility.

CATEGORY 8A **MONEY – Dissipation of Assets** **1 Grievance**

Grievance

The resident alleges that on May 11, 2009, the resident requested to purchase items for personal use. Some of the items were not approved. The resident alleges that after review of his ledger of expenditures, the resident found a discrepancy between the amount in his ledger and the facility business office.

The allegation was deemed invalid at Stage 1 by the Rights Advisor, invalid at Stage 2 by the Director of Social Work, invalid at Stage 3B by the CEO.

Decision of the Central Review Committee – Inconclusive

The committee reviewed the presented facts and documents. Due to the lack of clarity as to how much money was actually requested, withdrawn and received, the committee finds the grievance inconclusive.

Recommendations for Corrective Action

The committee recommends that the facility review how resident's funds are disbursed and the record keeping procedures utilized to ensure that patient's accounts balance.

CATEGORY 12 C
TREATMENT RIGHTS – Medical
3 GRIEVANCES

Grievance #1

The resident alleges that she was complaining of a back injury not a staff member. The allegation was deemed invalid at Stages 1, 2 and 3B

Decision of the Central Review Committee

Upon review of the documentation presented, the Central Review Committee finds the allegation to be invalid. We concur with the findings made by the Rights Advisor.

Grievance #2

The Legal Assistant provider representing the resident wrote a letter expressing concern regarding the residents overall care at the facility and seeking remedies for the resident.

The allegation was deemed inconclusive at Stage 1 by the Rights Advisor, inconclusive by the Clinical Director at Stage 2, invalid at Stage 3A by the Resident Rights Committee, and inconclusive at Stage 3B by the CEO.

Decision of the Central Review Committee - Inconclusive

The Central Review Committee based on the allegations and the investigation conducted by the Rights Advisor, the reports of the Clinical Director, Resident Rights Committee and the facility CEO find the allegation inconclusive. The committee defers to the clinical decisions of the clinical treatment team treating this resident.

Grievance # 3

The resident alleges that “his dental care is being denied”. The resident wants to go off grounds to his dentist in Cecil County.

The allegation was deemed invalid at Stages 1, 2 and 3B.

Decision of the Central Review Committee – Inconclusive.

The committee finds that the facility should attempt to obtain a release of information from the patient, and then contact the Cecil County dentist who treated the resident. The request of information should include a request to obtain the dentists’ records/assessments regarding the resident’s dental issue. Upon receipt of the records, the facility somatic physician can review the recommendations, if they exist and, consult with the Cecil County dentist if necessary. If the somatic physician cannot obtain the

records, and the decision remains that the patient does not have dental issues, the committee will move to find the grievance invalid.

CATEGORY 12 D
TREATMENT RIGHTS – Medication
1 GRIEVANCE

Grievance

The resident alleges that “the medication nurse did not follow proper procedure and that the charge nurse did not address my concern”.

The allegation was deemed valid at Stage 1 by the Rights Advisor, the Assistant Director of Nursing found that the matter was handled and “no further action was required”, valid by the Resident Rights committee and the CEO waived the facility right to review the matter.

Decision of the Central Review Committee - Valid

The Central Review Committee based on the allegation and the investigation conducted by the Rights Advisor finds the allegation to be valid regarding the staff member not following proper procedure when administering medications. The Assistant Director of nursing reports that corrective action has been instituted regarding this issue.

Recommendations for Corrective Action

When a grievance is filed, and a grievant requests an investigation/review of the grievance, it is recommended that there be no waiving of review of the grievance at any stage, pursuant to COMAR 10.21.14. The Central Review Committee will monitor this issue.

CATEGORY 12 I
TREATMENT RIGHTS – Alternative Treatment Services
2 GRIEVANCES

Grievance #1

The Legal Assistant Provider representing the resident reported that the resident was transferred unfairly to another facility, raising the issue if the resident’s transfer was based on a clinical decision or arbitrary?

The allegation was deemed valid at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B respectively by the Unit Director and the CEO.

Decision of the Central Review Committee - Invalid

The committee finds the grievance to be invalid based on the findings of the Clinical Forensic Board.

Grievance #2

The resident alleges “that the psychiatrist and a PST said he would not like DDA”. The resident wants to obtain DDA services.

The allegation was deemed inconclusive at Stage 1 by the Rights Advisor, invalid at Stages 2 and 3B by the Unit Director and the CEO.

Decision of the Central Review Committee – Invalid

Upon review of the presented documentation, the Central Review Committee finds the allegation to be invalid. We concur with the CEO in assisting the resident being assessed by the Rehabilitation Services Department.

CATEGORY 14
No Rights Involved
1 GRIEVANCE

Grievance

The resident alleges that “the last time the hospital’s beautician dyed my hair large area of gray remained”.

The allegation was deemed invalid at Stages 1, 2 and 3B.

Decision of the Central Review Committee - Invalid

Upon review of the documentation presented, the Central Review Committee finds the allegation to be invalid. We concur with the findings made by the Rights Advisor.

PART II

MENTAL HYGIENE ADMINISTRATION

FACILITY DATA

2010

RESIDENT GRIEVANCE SYSTEM

**AGGREGATE DATA FOR
MENTAL HYGIENE ADMINISTRATION
FACILITIES**

FISCAL YEAR 2010

**Darrell Nearon
Director**

**John Hancock
Data Program Manager**

AGGREGATE
FISCAL YEAR 2010

GRIEVANCES	1,048
INFORMATION/ASSISTANCE CASES	2,144
CLINICAL REVIEW PANELS	186
TOTAL RIGHTS ADVISOR CONTACTS	3,378

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	139	4
ADMISSIONS/DISCHARGE/TRANSFER	35	48
CIVIL RIGHTS	137	43
COMMUNICATIONS/VISITS	50	64
CONFIDENTIALITY	27	18
ENVIRONMENTAL	127	57
FREEDOM OF MOVEMENT	142	30
MONEY	29	129
NEGLECT	4	0
PERSONAL PROPERTY	57	26
RIGHTS PROTECTION SYSTEM (RGS)	21	172
TREATMENT RIGHTS	189	60
OTHER	24	34
NO RIGHT INVOLVED	60	70
RESIDENT/RESIDENT ASSAULT	7	1,389
DEATH	0	0
TOTAL	1,048	2,144

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>139</u>	8. MONEY <u>29</u>
<u>104</u> A. Physical	<u>2</u> A. Dissipation of Assets
<u>22</u> B. Sexual	B. Easy Access
<u>13</u> C. Mental	<u>5</u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>35</u>	<u>3</u> D. Limitations
<u>5</u> A. Admission	E. Safekeeping
<u>5</u> B. Hearing	<u>2</u> F. Use of Funds
<u>11</u> C. Transfer	<u>2</u> G. Exploitation
<u>16</u> D. Discharge	<u>15</u> H. Entitlements/Benefits
E. Respite Care	
3. CIVIL RIGHTS <u>137</u>	9. NEGLECT <u>4</u>
A. Abortion	10. PERSONAL PROPERTY <u>57</u>
<u>20</u> B. Verbal Abuse	<u>9</u> A. Exclusion
<u>2</u> C. Barrier Free Design	<u>19</u> B. Limitations
<u>14</u> D. Business & Personal Affairs	<u>5</u> C. Protection
<u>1</u> E. Competency	<u>4</u> D. Purchase or Receive
<u>25</u> F. Dignity	E. Receipt
<u>13</u> G. Discrimination	<u>4</u> F. Storage
<u>15</u> H. Education	<u>16</u> G. Theft/Loss/Destruction
<u>2</u> I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>21</u>
J. Marriage & Divorce	<u>2</u> A. Complaint Forms
<u>1</u> K. Media	B. Explanation of Rights
<u>6</u> L. Personal Search	<u>10</u> C. Notification of Rights
<u>10</u> M. Privacy	D. Rights Advisor
<u>5</u> N. Religion	<u>4</u> E. Timely Impartial Investigation
<u>2</u> O. Sexuality	<u>2</u> F. Complaint Procedure
<u>21</u> P. Harassment	<u>3</u> G. Retaliation
Q. Voting	
H. Legal Case Review	
R. Immigration	
4. COMMUNICATION & VISITS <u>50</u>	12. TREATMENT RIGHTS <u>189</u>
<u>7</u> A. Attorney/Legal Matters	<u>9</u> A. Individual Treatment Plan
B. Clergy	<u>3</u> B. Informed Consent
<u>9</u> C. Visitors	<u>41</u> C. Medical Care
D. Stationery & Postage	<u>63</u> D. Medication
<u>19</u> E. Telephone	<u>3</u> E. Periodic Review
<u>13</u> F. Mail	F. Research/At Risk Procedures
<u>2</u> G. Interpreter Service	<u>2</u> G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>27</u>	<u>2</u> H. Name of Treatment Staff
<u>14</u> A. Records	<u>53</u> I. Alternate Treatment Services
<u>13</u> B. Privileged Communication	<u>2</u> J. Clinical Review Panel
C. Photocopying	K. Minor Placed With Adults
D. Photographing	<u>3</u> L. Aftercare Plan
6. ENVIRONMENTAL <u>127</u>	M. Advance Medical Directive
<u>10</u> A. Clothing	<u>8</u> P. Pain Management
<u>32</u> B. Diet	
<u>11</u> C. Personal hygiene	13. OTHER <u>24</u>
<u>49</u> D. Safety	<u>6</u> A. Forensic Issues
<u>13</u> E. Sanitary	<u>2</u> B. Guardianship
<u>12</u> F. Humane	<u>16</u> C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>142</u>	14. NO RIGHT INVOLVED <u>60</u>
<u>28</u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSUALT <u>7</u>
<u>21</u> B. General Restrictions	
<u>74</u> C. Least Restrictive Alternative	
<u>1</u> D. Leave of Absence	16. DEATH <u>0</u>
<u>10</u> E. Restraint	
<u>4</u> F. Seclusion	TOTAL CASES <u>1,048</u>
<u>4</u> G. Quiet Room	FACILITY <u>Aggregate</u>
	FISCAL YEAR <u>2010</u>

**DEMOGRAPHIC INFORMATION (GRIEVANCE CASES) FY 2010
AGGREGATE**

GRIEVANCES (MHA)

SEX	#	%
Female	362	34
Male	638	61
Class	48	5
Total	1,048	100

AGE	#	%
<18	113	11
18-44	541	51
45-64	315	30
65+	31	3
Class	48	5
Total	1,048	100

RACE	#	%
African-American	545	52
Asian	7	1
Caucasian	394	37
Hispanic	25	2
Other	29	3
Class	48	5
Total	1,048	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>4</u>	8. MONEY <u>129</u>
<u>3</u> A. Physical	<u>1</u> A. Dissipation of Assets
<u> </u> B. Sexual	<u> </u> B. Easy Access
<u>1</u> C. Mental	<u>2</u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>48</u>	<u>2</u> D. Limitations
<u>2</u> A. Admission	<u> </u> E. Safekeeping
<u>3</u> B. Hearing	<u> </u> F. Use of Funds
<u>4</u> C. Transfer	<u>4</u> G. Exploitation
<u>39</u> D. Discharge	<u>120</u> H. Entitlements/Benefits
<u> </u> E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>43</u>	10. PERSONAL PROPERTY <u>26</u>
<u> </u> A. Abortion	<u> </u> A. Exclusion
<u>3</u> B. Verbal Abuse	<u>3</u> B. Limitations
<u> </u> C. Barrier Free Design	<u>3</u> C. Protection
<u>17</u> D. Business & Personal Affairs	<u>1</u> D. Purchase or Receive
<u>4</u> E. Competency	<u> </u> E. Receipt
<u>3</u> F. Dignity	<u>2</u> F. Storage
<u>3</u> G. Discrimination	<u>17</u> G. Theft/Loss/Destruction
<u>4</u> H. Education	11. RIGHTS PROTECTION SYSTEM <u>172</u>
<u>1</u> I. Labor & Compensation	<u> </u> A. Complaint Forms
<u>1</u> J. Marriage & Divorce	<u>65</u> B. Explanation of Rights
<u> </u> K. Media	<u> </u> C. Notification of Rights
<u> </u> L. Personal Search	<u>2</u> D. Rights Advisor
<u>2</u> M. Privacy	<u> </u> E. Timely Impartial Investigation
<u>2</u> N. Religion	<u>3</u> F. Complaint Procedure
<u> </u> O. Sexuality	<u> </u> G. Retaliation
<u>2</u> P. Harassment	<u>102</u> H. Legal Case Review
<u> </u> Q. Voting	12. TREATMENT RIGHTS <u>60</u>
<u>1</u> R. Immigration	<u>7</u> A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>64</u>	<u>2</u> B. Informed Consent
<u>42</u> A. Attorney/Legal Matters	<u>18</u> C. Medical Care
<u> </u> B. Clergy	<u>25</u> D. Medication
<u>2</u> C. Visitors	<u>2</u> E. Periodic Review
<u> </u> D. Stationery & Postage	<u> </u> F. Research/At Risk Procedures
<u>6</u> E. Telephone	<u>1</u> G. Knowledge of
<u>12</u> F. Mail	<u> </u> H. Name of Treatment Staff
<u>2</u> G. Interpreter Service	<u>2</u> I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>18</u>	<u>1</u> J. Clinical Review Panel
<u>11</u> A. Records	<u> </u> K. Minor Placed With Adults
<u>7</u> B. Privileged Communication	<u>1</u> L. Aftercare Plan
<u> </u> C. Photocopying	<u>1</u> M. Advance Medical Directive
<u> </u> D. Photographing	<u> </u> P. Pain Management
6. ENVIRONMENTAL <u>57</u>	13. OTHER <u>34</u>
<u>3</u> A. Clothing	<u>21</u> A. Forensic Issues
<u>11</u> B. Diet	<u>2</u> B. Guardianship
<u>6</u> C. Personal hygiene	<u>11</u> C. Rights Outside Jurisdiction
<u>28</u> D. Safety	14. NO RIGHT INVOLVED <u>70</u>
<u>4</u> E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>1,389</u>
<u>4</u> F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>30</u>	TOTAL CASES <u>2,144</u>
<u>10</u> A. Building & Grounds	FACILITY <u>Aggregate</u>
<u>14</u> B. General Restrictions	FISCAL YEAR <u>2010</u>
<u>5</u> C. Least Restrictive Alternative	
<u> </u> D. Leave of Absence	
<u>1</u> E. Restraint	
<u> </u> F. Seclusion	
<u> </u> G. Quiet Room	

**DEMOGRAPHIC INFORMATION FY 2010
AGGREGATE**

INFORMATION/ASSISTANCE (MHA)

SEX	#	%	AGE	#	%	RACE	#	%
Female	631	29	<18	167	8	African-American	1,202	57
Male	1,492	70	18-44	1,056	49	Asian	23	1
Class	21	1	45-64	811	38	Caucasian	846	39
Total	2,144	100	65+	89	4	Hispanic	23	1
			Class	21	1	Other	29	1
			Total	2,144	100	Class	21	1
						Total	2,144	100

RESIDENT GRIEVANCE SYSTEM

EASTERN SHORE HOSPITAL CENTER

FISCAL YEAR 2010

**Sharon Wert
Rights Advisor**

EASTERN SHORE HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	52
INFORMATION/ASSISTANCE CASES	226
TOTAL RIGHTS ADVISOR CONTACTS	278

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	6	2
ADMISSIONS/DISCHARGE/TRANSFER	1	6
CIVIL RIGHTS	13	7
COMMUNICATIONS/VISITS	5	9
CONFIDENTIALITY	1	8
ENVIRONMENTAL	7	15
FREEDOM OF MOVEMENT	4	10
MONEY	2	17
NEGLECT	0	0
PERSONAL PROPERTY	2	11
RIGHTS PROTECTION SYSTEM (RGS)	0	5
TREATMENT RIGHTS	9	12
OTHER	0	4
NO RIGHT INVOLVED	2	26
RESIDENT/RESIDENT ASSAULT	0	94
DEATH	0	0
TOTAL	52	226

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE 6
5 A. Physical
1 B. Sexual
___ C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 1
___ A. Admission
___ B. Hearing
1 C. Transfer
___ D. Discharge
___ E. Respite Care

3. CIVIL RIGHTS 13
___ A. Abortion
6 B. Verbal Abuse
___ C. Barrier Free Design
___ D. Business & Personal Affairs
___ E. Competency
5 F. Dignity
___ G. Discrimination
1 H. Education
___ I. Labor & Compensation
___ J. Marriage & Divorce
___ K. Media
___ L. Personal Search
___ M. Privacy
___ N. Religion
___ O. Sexuality
1 P. Harassment
___ Q. Voting
___ R. Immigration

4. COMMUNICATION & VISITS 5
___ A. Attorney/Legal Matters
___ B. Clergy
___ C. Visitors
___ D. Stationery & Postage
4 E. Telephone
1 F. Mail
___ G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 1
___ A. Records
1 B. Privileged Communication
___ C. Photocopying
___ D. Photographing

6. ENVIRONMENTAL 7
___ A. Clothing
1 B. Diet
2 C. Personal hygiene
4 D. Safety
___ E. Sanitary
___ F. Humane

7. FREEDOM OF MOVEMENT 4
___ A. Building & Grounds
4 B. General Restrictions
___ C. Least Restrictive Alternative
___ D. Leave of Absence
___ E. Restraint
___ F. Seclusion
___ G. Quiet Room

8. MONEY 2
1 A. Dissipation of Assets
___ B. Easy Access
___ C. Facility Account
1 D. Limitations
___ E. Safekeeping
___ F. Use of Funds
___ G. Exploitation
___ H. Entitlements/Benefits

9. NEGLECT 0

10. PERSONAL PROPERTY 2
___ A. Exclusion
1 B. Limitations
___ C. Protection
___ D. Purchase or Receive
___ E. Receipt
___ F. Storage
1 G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 0
___ A. Complaint Forms
___ B. Explanation of Rights
___ C. Notification of Rights
___ D. Rights Advisor
___ E. Timely Impartial Investigation
___ F. Complaint Procedure
___ G. Retaliation
___ H. Legal Case Review

12. TREATMENT RIGHTS 9
___ A. Individual Treatment Plan
___ B. Informed Consent
4 C. Medical Care
3 D. Medication
___ E. Periodic Review
___ F. Research/At Risk Procedures
___ G. Knowledge of
1 H. Name of Treatment Staff
___ I. Alternate Treatment Services
___ J. Clinical Review Panel
___ K. Minor Placed With Adults
___ L. Aftercare Plan
___ M. Advance Medical Directive
1 P. Pain Management

13. OTHER 0
___ A. Forensic Issues
___ B. Guardianship
___ C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 2

15. RESIDENT/RESIDENT ASSUALT 0

16. DEATH 0

TOTAL CASES 52
FACILITY Eastern Shore Hospital
FISCAL YEAR 2010

DEMOGRAPHIC INFORMATION FY 2010

Grievances - Eastern Shore Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	19	37	<18	0	0	African-American	19	37
Male	32	62	18-44	29	56	Asian	0	0
Class	1	2	45-64	22	42	Caucasian	30	57
Total	52	100	65+	0	0	Hispanic	0	0
			Class	1	2	Other	2	4
			Total	52	100	Class	1	2
						Total	52	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

2. ABUSE <u>2</u>	8. MONEY <u>17</u>
<u>2</u> A. Physical	_____ A. Dissipation of Assets
_____ B. Sexual	_____ B. Easy Access
_____ C. Mental	_____ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>6</u>	<u>1</u> D. Limitations
<u>1</u> A. Admission	_____ E. Safekeeping
<u>2</u> B. Hearing	_____ F. Use of Funds
_____ C. Transfer	<u>1</u> G. Exploitation
<u>3</u> D. Discharge	<u>15</u> H. Entitlements/Benefits
_____ E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>7</u>	10. PERSONAL PROPERTY <u>11</u>
_____ A. Abortion	_____ A. Exclusion
<u>2</u> B. Verbal Abuse	_____ B. Limitations
_____ C. Barrier Free Design	<u>2</u> C. Protection
_____ D. Business & Personal Affairs	<u>1</u> D. Purchase or Receive
_____ E. Competency	_____ E. Receipt
<u>2</u> F. Dignity	_____ F. Storage
_____ G. Discrimination	<u>8</u> G. Theft/Loss/Destruction
<u>1</u> H. Education	11. RIGHTS PROTECTION SYSTEM <u>5</u>
_____ I. Labor & Compensation	_____ A. Complaint Forms
_____ J. Marriage & Divorce	_____ B. Explanation of Rights
_____ K. Media	_____ C. Notification of Rights
_____ L. Personal Search	<u>1</u> D. Rights Advisor
_____ M. Privacy	_____ E. Timely Impartial Investigation
_____ N. Religion	_____ F. Complaint Procedure
_____ O. Sexuality	_____ G. Retaliation
<u>2</u> P. Harassment	<u>4</u> H. Legal Case Review
_____ Q. Voting	12. TREATMENT RIGHTS <u>12</u>
_____ R. Immigration	<u>2</u> A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>9</u>	_____ B. Informed Consent
<u>5</u> A. Attorney/Legal Matters	<u>7</u> C. Medical Care
_____ B. Clergy	<u>3</u> D. Medication
_____ C. Visitors	_____ E. Periodic Review
_____ D. Stationery & Postage	_____ F. Research/At Risk Procedures
<u>2</u> E. Telephone	_____ G. Knowledge of
<u>2</u> F. Mail	_____ H. Name of Treatment Staff
_____ G. Interpreter Service	_____ I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>8</u>	_____ J. Clinical Review Panel
<u>4</u> A. Records	_____ K. Minor Placed With Adults
<u>4</u> B. Privileged Communication	_____ L. Aftercare Plan
_____ C. Photocopying	_____ M. Advance Medical Directive
_____ D. Photographing	_____ P. Pain Management
6. ENVIRONMENTAL <u>15</u>	13. OTHER <u>4</u>
_____ A. Clothing	<u>3</u> A. Forensic Issues
<u>4</u> B. Diet	_____ B. Guardianship
<u>3</u> C. Personal hygiene	<u>1</u> C. Rights Outside Jurisdiction
<u>5</u> D. Safety	14. NO RIGHT INVOLVED <u>26</u>
<u>2</u> E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>94</u>
<u>1</u> F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>10</u>	TOTAL CASES <u>226</u>
<u>2</u> A. Building & Grounds	FACILITY <u>Eastern Shore Hospital</u>
<u>5</u> B. General Restrictions	FISCAL YEAR <u>2010</u>
<u>2</u> C. Least Restrictive Alternative	
_____ D. Leave of Absence	
<u>1</u> E. Restraint	
_____ F. Seclusion	
_____ G. Quiet Room	

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Eastern Shore Hospital

SEX	#	%
Female	75	33
Male	150	66
Class	1	1
Total	226	100

AGE	#	%
<18	0	0
18-44	109	48
45-64	110	49
65+	6	2
Class	1	1
Total	226	100

RACE	#	%
African-American	103	46
Asian	0	0
Caucasian	113	50
Hispanic	3	1
Other	6	2
Class	1	1
Total	226	100

RESIDENT GRIEVANCE SYSTEM

THOMAS B. FINAN HOSPITAL CENTER

FISCAL YEAR 2010

**Edward Zook
Rights Advisor**

THOMAS B. FINAN HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	20
INFORMATION/ASSISTANCE CASES	101
TOTAL RIGHTS ADVISOR CONTACTS	121

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	1	0
ADMISSIONS/DISCHARGE/TRANSFER	0	23
CIVIL RIGHTS	4	11
COMMUNICATIONS/VISITS	1	1
CONFIDENTIALITY	0	0
ENVIRONMENTAL	1	7
FREEDOM OF MOVEMENT	5	9
MONEY	0	3
NEGLECT	0	0
PERSONAL PROPERTY	4	2
RIGHTS PROTECTION SYSTEM (RGS)	0	0
TREATMENT RIGHTS	4	29
OTHER	0	4
NO RIGHT INVOLVED	0	6
RESIDENT/RESIDENT ASSAULT	0	6
DEATH	0	0
TOTAL	20	101

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE 1
- 1 A. Physical
 - B. Sexual
 - C. Mental
2. ADMISSION/DISCHARGE/TRANSFER
- A. Admission
 - B. Hearing
 - C. Transfer
 - D. Discharge
 - E. Respite Care
3. CIVIL RIGHTS 4
- A. Abortion
 - B. Verbal Abuse
 - C. Barrier Free Design
 - D. Business & Personal Affairs
 - E. Competency
 - 1 F. Dignity
 - G. Discrimination
 - H. Education
 - I. Labor & Compensation
 - J. Marriage & Divorce
 - K. Media
 - L. Personal Search
 - 1 M. Privacy
 - 1 N. Religion
 - O. Sexuality
 - 1 P. Harassment
 - Q. Voting
 - R. Immigration
4. COMMUNICATION & VISITS 1
- A. Attorney/Legal Matters
 - B. Clergy
 - C. Visitors
 - D. Stationery & Postage
 - 1 E. Telephone
 - F. Mail
 - G. Interpreter Service
5. CONFIDENTIALITY & DISCLOSURE 0
- A. Records
 - B. Privileged Communication
 - C. Photocopying
 - D. Photographing
6. ENVIRONMENTAL 1
- A. Clothing
 - B. Diet
 - C. Personal hygiene
 - D. Safety
 - 1 E. Sanitary
 - F. Humane
7. FREEDOM OF MOVEMENT 5
- 4 A. Building & Grounds
 - B. General Restrictions
 - C. Least Restrictive Alternative
 - D. Leave of Absence
 - E. Restraint
 - F. Seclusion
 - G. Quiet Room
8. MONEY 3
- A. Dissipation of Assets
 - B. Easy Access
 - 2 C. Facility Account
 - D. Limitations
 - E. Safekeeping
 - F. Use of Funds
 - G. Exploitation
 - 1 H. Entitlements/Benefits
9. NEGLECT 0
10. PERSONAL PROPERTY 4
- A. Exclusion
 - 2 B. Limitations
 - 1 C. Protection
 - D. Purchase or Receive
 - E. Receipt
 - F. Storage
 - 1 G. Theft/Loss/Destruction
11. RIGHTS PROTECTION SYSTEM 0
- A. Complaint Forms
 - B. Explanation of Rights
 - C. Notification of Rights
 - D. Rights Advisor
 - E. Timely Impartial Investigation
 - F. Complaint Procedure
 - G. Retaliation
 - H. Legal Case Review
12. TREATMENT RIGHTS 4
- 1 A. Individual Treatment Plan
 - B. Informed Consent
 - 1 C. Medical Care
 - 2 D. Medication
 - E. Periodic Review
 - F. Research/At Risk Procedures
 - G. Knowledge of
 - H. Name of Treatment Staff
 - I. Alternate Treatment Services
 - J. Clinical Review Panel
 - K. Minor Placed With Adults
 - L. Aftercare Plan
 - M. Advance Medical Directive
 - P. Pain Management
13. OTHER 0
- A. Forensic Issues
 - B. Guardianship
 - C. Rights Outside Jurisdiction
14. NO RIGHT INVOLVED 0
15. RESIDENT/RESIDENT ASSUALT 0
16. DEATH 0
- TOTAL CASES 20
- FACILITY Thomas B. Finan Center
- FISCAL YEAR 2010

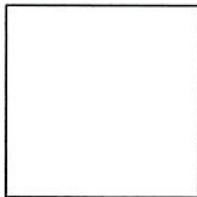
DEMOGRAPHIC INFORMATION FY 2010

Grievances - Thomas B. Finan Center

SEX	#	%
Female	7	35
Male	12	60
Class	1	5
Total	20	100

AGE	#	%
<18	0	0
18-44	11	55
45-64	6	30
65+	2	10
Class	1	5
Total	20	100

RACE	#	%
African-American	4	20
Asian	2	10
Caucasian	13	65
Hispanic	0	0
Other	0	0
Class	1	5
Total	20	100



CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>3</u>
A. Physical	A. Dissipation of Assets
B. Sexual	B. Easy Access
C. Mental	<u>2</u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>23</u>	D. Limitations
A. Admission	E. Safekeeping
B. Hearing	F. Use of Funds
C. Transfer	G. Exploitation
<u>23</u> D. Discharge	<u>1</u> H. Entitlements/Benefits
E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>11</u>	10. PERSONAL PROPERTY <u>2</u>
A. Abortion	A. Exclusion
B. Verbal Abuse	<u>2</u> B. Limitations
C. Barrier Free Design	C. Protection
<u>9</u> D. Business & Personal Affairs	D. Purchase or Receive
E. Competency	E. Receipt
F. Dignity	F. Storage
G. Discrimination	G. Theft/Loss/Destruction
H. Education	11. RIGHTS PROTECTION SYSTEM <u>0</u>
<u>1</u> I. Labor & Compensation	A. Complaint Forms
J. Marriage & Divorce	B. Explanation of Rights
K. Media	C. Notification of Rights
L. Personal Search	D. Rights Advisor
M. Privacy	E. Timely Impartial Investigation
<u>1</u> N. Religion	F. Complaint Procedure
O. Sexuality	G. Retaliation
P. Harassment	H. Legal Case Review
Q. Voting	12. TREATMENT RIGHTS <u>29</u>
R. Immigration	<u>4</u> A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>1</u>	B. Informed Consent
<u>1</u> A. Attorney/Legal Matters	<u>3</u> C. Medical Care
B. Clergy	<u>21</u> D. Medication
C. Visitors	E. Periodic Review
D. Stationery & Postage	F. Research/At Risk Procedures
E. Telephone	G. Knowledge of
F. Mail	H. Name of Treatment Staff
G. Interpreter Service	I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	<u>1</u> J. Clinical Review Panel
A. Records	K. Minor Placed With Adults
B. Privileged Communication	L. Aftercare Plan
C. Photocopying	M. Advance Medical Directive
D. Photographing	P. Pain Management
6. ENVIRONMENTAL <u>7</u>	13. OTHER <u>4</u>
A. Clothing	<u>4</u> A. Forensic Issues
F. B. Diet	B. Guardianship
C. Personal hygiene	C. Rights Outside Jurisdiction
<u>5</u> D. Safety	14. NO RIGHT INVOLVED <u>6</u>
<u>1</u> E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>6</u>
F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>9</u>	TOTAL CASES <u>101</u>
<u>6</u> A. Building & Grounds	FACILITY <u>Thomas B. Finan Center</u>
F. B. General Restrictions	FISCAL YEAR <u>2010</u>
C. Least Restrictive Alternative	
D. Leave of Absence	
E. Restraint	
F. Seclusion	
G. Quiet Room	

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Thomas B. Finan Center

SEX	#	%	AGE	#	%	RACE	#	%
Female	58	57	<18	0	0	African-American	43	43
Male	43	43	18-44	31	31	Asian	1	1
Class	0	0	45-64	59	58	Caucasian	57	56
Total	101	100	65+	11	11	Hispanic	0	0
			Class	0	0	Other	0	0
			Total	101	100	Class	0	0
						Total	101	100

RESIDENT GRIEVANCE SYSTEM

CLIFTON T. PERKINS HOSPITAL CENTER

FISCAL YEAR 2010

**Harry Evans III
Rights Advisor**

**Edward Fowler
Rights Advisor**

**Linda Simms
Rights Advisor**

CLIFTON T. PERKINS HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	242
INFORMATION/ASSISTANCE CASES	182
TOTAL RIGHTS ADVISOR CONTACTS	424

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	33	1
ADMISSIONS/DISCHARGE/TRANSFER	4	3
CIVIL RIGHTS	33	1
COMMUNICATIONS/VISITS	5	4
CONFIDENTIALITY	5	1
ENVIRONMENTAL	31	4
FREEDOM OF MOVEMENT	35	3
MONEY	3	3
NEGLECT	2	0
PERSONAL PROPERTY	6	6
RIGHTS PROTECTION SYSTEM (RGS)	0	12
TREATMENT RIGHTS	37	5
OTHER	7	1
NO RIGHT INVOLVED	41	24
RESIDENT/RESIDENT ASSAULT	0	114
DEATH	0	0
TOTAL	242	182

CATEGORIES OF RIGHTS ISSUES – GRIEVANCES

1. ABUSE <u>33</u>	8. MONEY <u>3</u>
<u>21</u> A. Physical	_____ A. Dissipation of Assets
<u>6</u> B. Sexual	_____ B. Easy Access
<u>6</u> C. Mental	<u>1</u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>4</u>	_____ D. Limitations
<u>1</u> A. Admission	_____ E. Safekeeping
<u>1</u> B. Hearing	<u>1</u> F. Use of Funds
_____ C. Transfer	_____ G. Exploitation
<u>2</u> D. Discharge	<u>1</u> H. Entitlements/Benefits
_____ E. Respite Care	
3. CIVIL RIGHTS <u>33</u>	9. NEGLECT <u>2</u>
_____ A. Abortion	10. PERSONAL PROPERTY <u>6</u>
<u>4</u> B. Verbal Abuse	<u>4</u> A. Exclusion
_____ C. Barrier Free Design	_____ B. Limitations
_____ D. Business & Personal Affairs	_____ C. Protection
_____ E. Competency	<u>1</u> D. Purchase or Receive
<u>3</u> F. Dignity	_____ E. Receipt
<u>4</u> G. Discrimination	_____ F. Storage
<u>1</u> H. Education	<u>1</u> G. Theft/Loss/Destruction
_____ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>0</u>
_____ J. Marriage & Divorce	_____ A. Complaint Forms
<u>1</u> K. Media	_____ B. Explanation of Rights
<u>3</u> L. Personal Search	_____ C. Notification of Rights
<u>3</u> M. Privacy	_____ D. Rights Advisor
<u>1</u> N. Religion	_____ E. Timely Impartial Investigation
<u>2</u> O. Sexuality	_____ F. Complaint Procedure
<u>11</u> P. Harassment	_____ G. Retaliation
_____ Q. Voting	_____ H. Legal Case Review
_____ R. Immigration	
4. COMMUNICATION & VISITS <u>5</u>	12. TREATMENT RIGHTS <u>37</u>
<u>1</u> A. Attorney/Legal Matters	_____ A. Individual Treatment Plan
_____ B. Clergy	_____ B. Informed Consent
<u>1</u> C. Visitors	<u>3</u> C. Medical Care
_____ D. Stationery & Postage	<u>15</u> D. Medication
<u>2</u> E. Telephone	_____ E. Periodic Review
_____ F. Mail	_____ F. Research/At Risk Procedures
<u>1</u> G. Interpreter Service	_____ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>5</u>	<u>1</u> H. Name of Treatment Staff
<u>4</u> A. Records	<u>17</u> I. Alternate Treatment Services
<u>1</u> B. Privileged Communication	_____ J. Clinical Review Panel
_____ C. Photocopying	_____ K. Minor Placed With Adults
_____ D. Photographing	_____ L. Aftercare Plan
6. ENVIRONMENTAL <u>31</u>	_____ M. Advance Medical Directive
<u>3</u> A. Clothing	<u>1</u> P. Pain Management
<u>10</u> B. Diet	
<u>5</u> C. Personal hygiene	13. OTHER <u>7</u>
<u>8</u> D. Safety	<u>2</u> A. Forensic Issues
<u>4</u> E. Sanitary	_____ B. Guardianship
<u>1</u> F. Humane	<u>5</u> C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>35</u>	14. NO RIGHT INVOLVED <u>41</u>
<u>11</u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u> </u>
<u>12</u> B. General Restrictions	
<u>3</u> C. Least Restrictive Alternative	16. DEATH <u>0</u>
_____ D. Leave of Absence	
<u>4</u> E. Restraint	TOTAL CASES <u>242</u>
<u>3</u> F. Seclusion	FACILITY <u>Clifton T. Perkins Center</u>
<u>2</u> G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Grievances - Clifton T. Perkins Hospital

SEX	#	%
Female	45	19
Male	190	79
Class	7	2
Total	242	100

AGE	#	%
<18	0	0
18-44	168	69
45-64	61	27
65+	6	2
Class	7	2
Total	242	100

RACE	#	%
African-American	160	66
Asian	1	1
Caucasian	52	21
Hispanic	1	1
Other	21	9
Class	7	2
Total	242	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE 1
1 A. Physical
 ___ B. Sexual
 ___ C. Mental
2. ADMISSION/DISCHARGE/TRANSFER 3
 ___ A. Admission
 ___ B. Hearing
 ___ C. Transfer
3 D. Discharge
 ___ E. Respite Care
3. CIVIL RIGHTS 1
 ___ A. Abortion
 ___ B. Verbal Abuse
 ___ C. Barrier Free Design
 ___ D. Business & Personal Affairs
1 E. Competency
 ___ F. Dignity
 ___ G. Discrimination
 ___ H. Education
 ___ I. Labor & Compensation
 ___ J. Marriage & Divorce
 ___ K. Media
 ___ L. Personal Search
 ___ M. Privacy
 ___ N. Religion
 ___ O. Sexuality
 ___ P. Harassment
 ___ Q. Voting
 ___ R. Immigration
4. COMMUNICATION & VISITS 4
4 A. Attorney/Legal Matters
 ___ B. Clergy
 ___ C. Visitors
 ___ D. Stationery & Postage
 ___ E. Telephone
 ___ F. Mail
 ___ G. Interpreter Service
5. CONFIDENTIALITY & DISCLOSURE 1
1 A. Records
 ___ B. Privileged Communication
 ___ C. Photocopying
 ___ D. Photographing
6. ENVIRONMENTAL 4
 ___ A. Clothing
 F. B. Diet
1 C. Personal hygiene
2 D. Safety
 ___ E. Sanitary
 ___ F. Humane
7. FREEDOM OF MOVEMENT 3
1 A. Building & Grounds
 F. B. General Restrictions
 ___ C. Least Restrictive Alternative
 ___ D. Leave of Absence
 ___ E. Restraint
 ___ F. Seclusion
 ___ G. Quiet Room
8. MONEY 3
 ___ A. Dissipation of Assets
 ___ B. Easy Access
 ___ C. Facility Account
 ___ D. Limitations
 ___ E. Safekeeping
 ___ F. Use of Funds
 ___ G. Exploitation
3 H. Entitlements/Benefits
9. NEGLECT 0
10. PERSONAL PROPERTY 6
 ___ A. Exclusion
 ___ B. Limitations
 ___ C. Protection
 ___ D. Purchase or Receive
 ___ E. Receipt
1 F. Storage
5 G. Theft/Loss/Destruction
11. RIGHTS PROTECTION SYSTEM 12
 ___ A. Complaint Forms
 ___ B. Explanation of Rights
 ___ C. Notification of Rights
 ___ D. Rights Advisor
 ___ E. Timely Impartial Investigation
3 F. Complaint Procedure
 ___ G. Retaliation
9 H. Legal Case Review
12. TREATMENT RIGHTS 5
1 A. Individual Treatment Plan
 ___ B. Informed Consent
1 C. Medical Care
 ___ D. Medication
2 E. Periodic Review
 ___ F. Research/At Risk Procedures
1 G. Knowledge of
 ___ H. Name of Treatment Staff
 ___ I. Alternate Treatment Services
 ___ J. Clinical Review Panel
 ___ K. Minor Placed With Adults
 ___ L. Aftercare Plan
 ___ M. Advance Medical Directive
 ___ P. Pain Management
13. OTHER 1
 ___ A. Forensic Issues
1 B. Guardianship
 ___ C. Rights Outside Jurisdiction
14. NO RIGHT INVOLVED 24
15. RESIDENT/RESIDENT ASSAULT 114
16. DEATH 0
- TOTAL CASES 182
 FACILITY Clifton T. Perkins Center
 FISCAL YEAR 2010

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Clifton T. Perkins Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	9	5	<18	0	0	African-American	109	59
Male	172	94	18-44	113	62	Asian	1	1
Class	1	1	45-64	66	36	Caucasian	66	36
Total	182	100	65+	2	1	Hispanic	1	1
			Class	1	1	Other	4	2
			Total	182	100	Class	1	1
						Total	182	100

RESIDENT GRIEVANCE SYSTEM

**REGIONAL INSTITUTE
FOR CHILDREN AND ADOLESCENTS
BALTIMORE**

FISCAL YEAR 2010

**Harry Evans III
Rights Advisor**

RICA - BALTIMORE
FISCAL YEAR 2010

GRIEVANCES	150
INFORMATION/ASSISTANCE CASES	79
TOTAL RIGHTS ADVISOR CONTACTS	229

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	0	0
ADMISSIONS/DISCHARGE/TRANSFER	7	5
CIVIL RIGHTS	22	3
COMMUNICATIONS/VISITS	11	7
CONFIDENTIALITY	1	0
ENVIRONMENTAL	16	0
FREEDOM OF MOVEMENT	47	2
MONEY	10	21
NEGLECT	0	0
PERSONAL PROPERTY	6	0
RIGHTS PROTECTION SYSTEM (RGS)	1	41
TREATMENT RIGHTS	13	0
OTHER	6	0
NO RIGHT INVOLVED	6	0
RESIDENT/RESIDENT ASSAULT	4	0
DEATH	0	0
TOTAL	150	79

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>0</u>	8. MONEY <u>10</u>
___ A Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>7</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
<u>7</u> D. Discharge	<u>10</u> H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>22</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>6</u>
<u>4</u> B. Verbal Abuse	___ A. Exclusion
<u>1</u> C. Barrier Free Design	<u>5</u> B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
___ E. Competency	___ D. Purchase or Receive
___ F. Dignity	___ E. Receipt
<u>1</u> G. Discrimination	<u>1</u> F. Storage
<u>9</u> H. Education	___ G. Theft/Loss/Destruction
<u>2</u> I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>1</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	___ B. Explanation of Rights
<u>2</u> L. Personal Search	<u>1</u> C. Notification of Rights
<u>2</u> M. Privacy	___ D. Rights Advisor
<u>1</u> N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	___ H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>11</u>	12. TREATMENT RIGHTS <u>13</u>
___ A. Attorney/Legal Matters	<u>2</u> A. Individual Treatment Plan
___ B. Clergy	<u>1</u> B. Informed Consent
<u>3</u> C. Visitors	<u>3</u> C. Medical Care
___ D. Stationery & Postage	<u>2</u> D. Medication
<u>3</u> E. Telephone	<u>3</u> E. Periodic Review
<u>4</u> F. Mail	___ F. Research/At Risk Procedures
<u>1</u> G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>1</u>	___ H. Name of Treatment Staff
___ A. Records	<u>1</u> I. Alternate Treatment Services
<u>1</u> B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	<u>1</u> L. Aftercare Plan
6. ENVIRONMENTAL <u>16</u>	___ M. Advance Medical Directive
___ A. Clothing	___ P. Pain Management
<u>9</u> B. Diet	
<u>2</u> C. Personal hygiene	13. OTHER <u>6</u>
___ D. Safety	___ A. Forensic Issues
<u>2</u> E. Sanitary	<u>1</u> B. Guardianship
<u>3</u> F. Humane	<u>5</u> C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>47</u>	14. NO RIGHT INVOLVED <u>6</u>
<u>1</u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSUALT <u>4</u>
___ B. General Restrictions	
<u>45</u> C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
<u>1</u> E. Restraint	TOTAL CASES <u>150</u>
___ F. Seclusion	FACILITY <u>RICA - Baltimore</u>
___ G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Grievances - RICA (Baltimore)

SEX	#	%	AGE	#	%	RACE	#	%
Female	72	49	<18	75	51	African-American	80	54
Male	65	44	18-44	62	42	Asian	0	0
Class	13	7	45-64	0	0	Caucasian	57	39
Total	150	100	65+	0	0	Hispanic	0	0
			Class	13	7	Other	0	0
			Total	150	100	Class	13	7
						Total	150	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>21</u>
___ A. Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>5</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	<u>1</u> G. Exploitation
<u>5</u> D. Discharge	<u>20</u> H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>3</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>0</u>
___ B. Verbal Abuse	___ A. Exclusion
___ C. Barrier Free Design	___ B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
___ E. Competency	___ D. Purchase or Receive
___ F. Dignity	___ E. Receipt
___ G. Discrimination	___ F. Storage
<u>3</u> H. Education	___ G. Theft/Loss/Destruction
___ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>41</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	<u>38</u> B. Explanation of Rights
___ L. Personal Search	___ C. Notification of Rights
___ M. Privacy	___ D. Rights Advisor
___ N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	<u>3</u> H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>7</u>	12. TREATMENT RIGHTS <u>0</u>
<u>6</u> A. Attorney/Legal Matters	___ A. Individual Treatment Plan
___ B. Clergy	___ B. Informed Consent
___ C. Visitors	___ C. Medical Care
___ D. Stationery & Postage	___ D. Medication
<u>1</u> E. Telephone	___ E. Periodic Review
___ F. Mail	___ F. Research/At Risk Procedures
___ G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	___ H. Name of Treatment Staff
___ A. Records	___ I. Alternate Treatment Services
___ B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	___ L. Aftercare Plan
6. ENVIRONMENTAL <u>0</u>	___ M. Advance Medical Directive
___ A. Clothing	___ P. Pain Management
___ B. Diet	
___ C. Personal hygiene	13. OTHER <u>0</u>
___ D. Safety	___ A. Forensic Issues
___ E. Sanitary	___ B. Guardianship
___ F. Humane	___ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>2</u>	14. NO RIGHT INVOLVED <u>0</u>
___ A. Building & Grounds	15. RESIDENT/RESIDENT ASSAULT <u>0</u>
___ B. General Restrictions	
<u>2</u> C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
___ E. Restraint	TOTAL CASES <u>79</u>
___ F. Seclusion	FACILITY <u>RICA – Baltimore</u>
___ G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - RICA (Baltimore)

SEX	#	%	AGE	#	%	RACE	#	%
Female	32	59	<18	67	85	African-American	53	67
Male	47	41	18-44	12	15	Asian	0	0
Class	0	0	45-64	0	0	Caucasian	26	33
Total	79	100	65+	0	0	Hispanic	0	0
			Class	0	0	Other	0	0
			Total	79	100	Class	0	0
						Total	79	100

RESIDENT GRIEVANCE SYSTEM

**JOHN L. GILDNER REGIONAL INSTITUTE
FOR CHILDREN AND ADOLESCENTS
ROCKVILLE**

FISCAL YEAR 2010

**Harry Evans III
Rights Advisor**

RICA – ROCKVILLE
FISCAL YEAR 2010

GRIEVANCES	49
INFORMATION/ASSISTANCE CASES	53
TOTAL RIGHTS ADVISOR CONTACTS	102

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	0	0
ADMISSIONS/DISCHARGE/TRANSFER	0	2
CIVIL RIGHTS	7	2
COMMUNICATIONS/VISITS	5	6
CONFIDENTIALITY	0	0
ENVIRONMENTAL	4	0
FREEDOM OF MOVEMENT	21	0
MONEY	2	18
NEGLECT	0	0
PERSONAL PROPERTY	2	0
RIGHTS PROTECTION SYSTEM (RGS)	0	25
TREATMENT RIGHTS	2	0
OTHER	3	0
NO RIGHT INVOLVED	3	0
RESIDENT/RESIDENT ASSAULT	0	0
DEATH	0	0
TOTAL	49	53

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>0</u>	8. MONEY <u>2</u>
___ A. Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>0</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
___ D. Discharge	<u>2</u> ___ H. Entitlements/Benefits
___ E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>7</u>	10. PERSONAL PROPERTY <u>2</u>
___ A. Abortion	___ A. Exclusion
___ B. Verbal Abuse	<u>2</u> ___ B. Limitations
___ C. Barrier Free Design	___ C. Protection
<u>1</u> ___ D. Business & Personal Affairs	___ D. Purchase or Receive
___ E. Competency	___ E. Receipt
___ F. Dignity	___ F. Storage
<u>1</u> ___ G. Discrimination	___ G. Theft/Loss/Destruction
<u>3</u> ___ H. Education	11. RIGHTS PROTECTION SYSTEM <u> </u>
___ I. Labor & Compensation	___ A. Complaint Forms
___ J. Marriage & Divorce	___ B. Explanation of Rights
___ K. Media	___ C. Notification of Rights
<u>1</u> ___ L. Personal Search	___ D. Rights Advisor
<u>1</u> ___ M. Privacy	___ E. Timely Impartial Investigation
___ N. Religion	___ F. Complaint Procedure
___ O. Sexuality	___ G. Retaliation
___ P. Harassment	___ H. Legal Case Review
___ Q. Voting	12. TREATMENT RIGHTS <u>2</u>
___ R. Immigration	___ A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>5</u>	<u>1</u> ___ B. Informed Consent
___ A. Attorney/Legal Matters	___ C. Medical Care
___ B. Clergy	<u>1</u> ___ D. Medication
<u>1</u> ___ C. Visitors	___ E. Periodic Review
___ D. Stationery & Postage	___ F. Research/At Risk Procedures
<u>2</u> ___ E. Telephone	___ G. Knowledge of
<u>2</u> ___ F. Mail	___ H. Name of Treatment Staff
___ G. Interpreter Service	___ I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>0</u>	___ J. Clinical Review Panel
___ A. Records	___ K. Minor Placed With Adults
___ B. Privileged Communication	___ L. Aftercare Plan
___ C. Photocopying	___ M. Advance Medical Directive
___ D. Photographing	___ P. Pain Management
6. ENVIRONMENTAL <u>4</u>	13. OTHER <u>3</u>
___ A. Clothing	___ A. Forensic Issues
<u>2</u> ___ B. Diet	___ B. Guardianship
<u>1</u> ___ C. Personal hygiene	<u>3</u> ___ C. Rights Outside Jurisdiction
___ D. Safety	14. NO RIGHT INVOLVED <u>3</u>
<u>1</u> ___ E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>0</u>
___ F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>21</u>	TOTAL CASES <u>49</u>
<u>1</u> ___ A. Building & Grounds	FACILITY <u>RICA - Rockville</u>
___ B. General Restrictions	FISCAL YEAR <u>2010</u>
<u>20</u> ___ C. Least Restrictive Alternative	
___ D. Leave of Absence	
___ E. Restraint	
___ F. Seclusion	
___ G. Quiet Room	

DEMOGRAPHIC INFORMATION FY 2010

Grievances - RICA (Rockville)

SEX	#	%	AGE	#	%	RACE	#	%
Female	18	37	<18	30	61	African-American	24	49
Male	30	61	18-44	18	37	Asian	0	0
Class	1	2	45-64	0	0	Caucasian	18	37
Total	49	100	65+	0	0	Hispanic	4	8
			Class	1	2	Other	2	4
			Total	49	100	Class	1	2
						Total	49	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE 0
 ___ A. Physical
 ___ B. Sexual
 ___ C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 2
 ___ A. Admission
 ___ B. Hearing
 ___ C. Transfer
2 D. Discharge
 ___ E. Respite Care

3. CIVIL RIGHTS 2
 ___ A. Abortion
 ___ B. Verbal Abuse
 ___ C. Barrier Free Design
 ___ D. Business & Personal Affairs
 ___ E. Competency
 ___ F. Dignity
 ___ G. Discrimination
2 H. Education
 ___ I. Labor & Compensation
 ___ J. Marriage & Divorce
 ___ K. Media
 ___ L. Personal Search
 ___ M. Privacy
 ___ N. Religion
 ___ O. Sexuality
 ___ P. Harassment
 ___ Q. Voting
 ___ R. Immigration

4. COMMUNICATION & VISITS 6
6 A. Attorney/Legal Matters
 ___ B. Clergy
 ___ C. Visitors
 ___ D. Stationery & Postage
 ___ E. Telephone
 ___ F. Mail
 ___ G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 0
 ___ A. Records
 ___ B. Privileged Communication
 ___ C. Photocopying
 ___ D. Photographing

6. ENVIRONMENTAL 0
 ___ A. Clothing
 ___ B. Diet
 ___ C. Personal hygiene
 ___ D. Safety
 ___ E. Sanitary
 ___ F. Humane

7. FREEDOM OF MOVEMENT 0
 ___ A. Building & Grounds
 ___ B. General Restrictions
 ___ C. Least Restrictive Alternative
 ___ D. Leave of Absence
 ___ E. Restraint
 ___ F. Seclusion
 ___ G. Quiet Room

8. MONEY 18
 ___ A. Dissipation of Assets
 ___ B. Easy Access
 ___ C. Facility Account
 ___ D. Limitations
 ___ E. Safekeeping
 ___ F. Use of Funds
1 G. Exploitation
17 H. Entitlements/Benefits

9. NEGLECT 0

10. PERSONAL PROPERTY 0
 ___ A. Exclusion
 ___ B. Limitations
 ___ C. Protection
 ___ D. Purchase or Receive
 ___ E. Receipt
 ___ F. Storage
 ___ G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 25
 ___ A. Complaint Forms
23 B. Explanation of Rights
 ___ C. Notification of Rights
 ___ D. Rights Advisor
 ___ E. Timely Impartial Investigation
 ___ F. Complaint Procedure
 ___ G. Retaliation
2 H. Legal Case Review

12. TREATMENT RIGHTS 0
 ___ A. Individual Treatment Plan
 ___ B. Informed Consent
 ___ C. Medical Care
 ___ D. Medication
 ___ E. Periodic Review
 ___ F. Research/At Risk Procedures
 ___ G. Knowledge of
 ___ H. Name of Treatment Staff
 ___ I. Alternate Treatment Services
 ___ J. Clinical Review Panel
 ___ K. Minor Placed With Adults
 ___ L. Aftercare Plan
 ___ M. Advance Medical Directive
 ___ P. Pain Management

13. OTHER 0
 ___ A. Forensic Issues
 ___ B. Guardianship
 ___ C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 0

15. RESIDENT/RESIDENT ASSUALT 0

16. DEATH 0

TOTAL CASES 53
 FACILITY RICA – Rockville
 FISCAL YEAR 2010

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - RICA (Rockville)

SEX	#	%	AGE	#	%	RACE	#	%
Female	18	34	<18	38	72	African-American	24	45
Male	35	66	18-44	15	28	Asian	0	0
Class	0	0	45-64	0	0	Caucasian	23	44
Total	53	100	65+	0	0	Hispanic	1	2
			Class	0	0	Other	5	9
			Total	53	100	Class	0	0
						Total	53	100

RESIDENT GRIEVANCE SYSTEM

SPRINGFIELD HOSPITAL CENTER

FISCAL YEAR 2010

**George Lyons
Rights Advisor**

**Susan Thomas
Rights Advisor**

SPRINGFIELD HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	188
INFORMATION/ASSISTANCE CASES	371
TOTAL RIGHTS ADVISOR CONTACTS	559

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	62	1
ADMISSIONS/DISCHARGE/TRANSFER	1	0
CIVIL RIGHTS	16	1
COMMUNICATIONS/VISITS	10	2
CONFIDENTIALITY	12	5
ENVIRONMENTAL	14	3
FREEDOM OF MOVEMENT	6	5
MONEY	7	24
NEGLECT	2	0
PERSONAL PROPERTY	17	2
RIGHTS PROTECTION SYSTEM (RGS)	3	57
TREATMENT RIGHTS	32	1
OTHER	1	10
NO RIGHT INVOLVED	3	2
RESIDENT/RESIDENT ASSAULT	2	258
DEATH	0	0
TOTAL	188	371

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>62</u>	8. MONEY <u>7</u>
<u>43</u> A. Physical	_____ A. Dissipation of Assets
<u>12</u> B. Sexual	_____ B. Easy Access
<u>7</u> C. Mental	<u>2</u> C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>1</u>	_____ D. Limitations
_____ A. Admission	_____ E. Safekeeping
_____ B. Hearing	_____ F. Use of Funds
_____ C. Transfer	<u>2</u> G. Exploitation
<u>1</u> D. Discharge	<u>3</u> H. Entitlements/Benefits
_____ E. Respite Care	
3. CIVIL RIGHTS <u>16</u>	9. NEGLECT <u>2</u>
_____ A. Abortion	10. PERSONAL PROPERTY <u>17</u>
<u>5</u> B. Verbal Abuse	<u>1</u> A. Exclusion
<u>1</u> C. Barrier Free Design	<u>7</u> B. Limitations
<u>2</u> D. Business & Personal Affairs	<u>4</u> C. Protection
_____ E. Competency	_____ D. Purchase or Receive
<u>1</u> F. Dignity	_____ E. Receipt
<u>3</u> G. Discrimination	_____ F. Storage
_____ H. Education	<u>5</u> G. Theft/Loss/Destruction
_____ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>3</u>
_____ J. Marriage & Divorce	_____ A. Complaint Forms
_____ K. Media	_____ B. Explanation of Rights
_____ L. Personal Search	_____ C. Notification of Rights
_____ M. Privacy	_____ D. Rights Advisor
<u>1</u> N. Religion	<u>1</u> E. Timely Impartial Investigation
_____ O. Sexuality	_____ F. Complaint Procedure
<u>3</u> P. Harassment	<u>2</u> G. Retaliation
_____ Q. Voting	_____ H. Legal Case Review
_____ R. Immigration	
4. COMMUNICATION & VISITS <u>10</u>	12. TREATMENT RIGHTS <u>32</u>
<u>2</u> A. Attorney/Legal Matters	<u>1</u> A. Individual Treatment Plan
_____ B. Clergy	<u>1</u> B. Informed Consent
_____ C. Visitors	<u>5</u> C. Medical Care
_____ D. Stationery & Postage	<u>13</u> D. Medication
<u>4</u> E. Telephone	_____ E. Periodic Review
<u>4</u> F. Mail	_____ F. Research/At Risk Procedures
_____ G. Interpreter Service	_____ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>12</u>	_____ H. Name of Treatment Staff
<u>8</u> A. Records	<u>9</u> I. Alternate Treatment Services
<u>4</u> B. Privileged Communication	_____ J. Clinical Review Panel
_____ C. Photocopying	_____ K. Minor Placed With Adults
_____ D. Photographing	<u>1</u> L. Aftercare Plan
6. ENVIRONMENTAL <u>14</u>	_____ M. Advance Medical Directive
<u>2</u> A. Clothing	<u>2</u> P. Pain Management
<u>3</u> B. Diet	
_____ C. Personal hygiene	13. OTHER <u>1</u>
<u>8</u> D. Safety	_____ A. Forensic Issues
_____ E. Sanitary	<u>1</u> B. Guardianship
<u>1</u> F. Humane	_____ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>6</u>	14. NO RIGHT INVOLVED <u>3</u>
<u>1</u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSUALT <u>2</u>
<u>2</u> B. General Restrictions	
<u>2</u> C. Least Restrictive Alternative	16. DEATH <u>0</u>
_____ D. Leave of Absence	
<u>1</u> E. Restraint	TOTAL CASES <u>188</u>
_____ F. Seclusion	FACILITY <u>Springfield Hospital Center</u>
_____ G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Grievances - Springfield Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	75	40	<18	0	0	African-American	95	51
Male	108	57	18-44	72	38	Asian	4	1
Class	5	3	45-64	107	57	Caucasian	80	43
Total	188	100	65+	4	2	Hispanic	1	1
			Class	5	3	Other	3	1
			Total	188	100	Class	5	3
						Total	188	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>1</u>	8. MONEY <u>24</u>
___ A. Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
<u>1</u> C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>0</u>	___ D. Limitations
___ A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
___ D. Discharge	<u>24</u> H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>1</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>2</u>
___ B. Verbal Abuse	___ A. Exclusion
___ C. Barrier Free Design	<u>1</u> B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
<u>1</u> E. Competency	___ D. Purchase or Receive
___ F. Dignity	___ E. Receipt
___ G. Discrimination	<u>1</u> F. Storage
___ H. Education	___ G. Theft/Loss/Destruction
___ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>57</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	<u>1</u> B. Explanation of Rights
___ L. Personal Search	___ C. Notification of Rights
___ M. Privacy	<u>1</u> D. Rights Advisor
___ N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	<u>55</u> H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>2</u>	12. TREATMENT RIGHTS <u>1</u>
___ A. Attorney/Legal Matters	___ A. Individual Treatment Plan
___ B. Clergy	___ B. Informed Consent
___ C. Visitors	___ C. Medical Care
___ D. Stationery & Postage	___ D. Medication
<u>1</u> E. Telephone	___ E. Periodic Review
<u>1</u> F. Mail	___ F. Research/At Risk Procedures
___ G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>5</u>	___ H. Name of Treatment Staff
<u>3</u> A. Records	___ I. Alternate Treatment Services
<u>2</u> B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	<u>1</u> L. Aftercare Plan
6. ENVIRONMENTAL <u>3</u>	___ M. Advance Medical Directive
<u>1</u> A. Clothing	___ P. Pain Management
___ B. Diet	
___ C. Personal hygiene	13. OTHER <u>10</u>
<u>1</u> D. Safety	<u>5</u> A. Forensic Issues
___ E. Sanitary	___ B. Guardianship
<u>1</u> F. Humane	<u>5</u> C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>5</u>	14. NO RIGHT INVOLVED <u>2</u>
<u>1</u> A. Building & Grounds	15. RESIDENT/RESIDENT ASSUALT <u>258</u>
<u>4</u> B. General Restrictions	
___ C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
___ E. Restraint	TOTAL CASES <u>371</u>
___ F. Seclusion	FACILITY <u>Springfield Hospital Center</u>
___ G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Springfield Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	130	35	<18	5	1	African-American	189	51
Male	241	65	18-44	176	48	Asian	14	4
Class	0	0	45-64	168	45	Caucasian	149	40
Total	371	100	65+	22	6	Hispanic	6	2
			Class	0	0	Other	13	3
			Total	371	100	Class	0	0
						Total	371	100

RESIDENT GRIEVANCE SYSTEM

SPRING GROVE HOSPITAL CENTER

FISCAL YEAR 2010

**Anne Harrison
Rights Advisor**

**Jennie Bishop
Rights Advisor**

**Everly Smith
Rights Advisor**

SPRING GROVE HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	342
INFORMATION/ASSISTANCE CASES	1,062
TOTAL RIGHTS ADVISOR CONTACTS	1,404

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	37	0
ADMISSIONS/DISCHARGE/TRANFER	22	7
CIVIL RIGHTS	42	16
COMMUNICATIONS/VISITS	13	19
CONFIDENTIALITY	8	2
ENVIRONMENTAL	52	28
FREEDOM OF MOVEMENT	23	1
MONEY	5	21
NEGLECT	0	0
PERSONAL PROPERTY	20	1
RIGHTS PROTECTION SYSTEM (RGS)	17	29
TREATMENT RIGHTS	90	12
OTHER	7	15
NO RIGHT INVOLVED	5	12
RESIDENT/RESIDENT ASSAULT	1	899
DEATH	0	0
TOTAL	342	1,062

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

1. ABUSE <u>37</u>	8. MONEY <u>5</u>
<u>34</u> A. Physical	<u>1</u> A. Dissipation of Assets
<u>3</u> B. Sexual	_____ B. Easy Access
_____ C. Mental	_____ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>24</u>	<u>2</u> D. Limitations
<u>4</u> A. Admission	_____ E. Safekeeping
<u>4</u> B. Hearing	<u>1</u> F. Use of Funds
<u>10</u> C. Transfer	_____ G. Exploitation
<u>6</u> D. Discharge	<u>1</u> H. Entitlements/Benefits
_____ E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>42</u>	10. PERSONAL PROPERTY <u>20</u>
_____ A. Abortion	<u>4</u> A. Exclusion
<u>1</u> B. Verbal Abuse	<u>2</u> B. Limitations
_____ C. Barrier Free Design	_____ C. Protection
<u>11</u> D. Business & Personal Affairs	<u>3</u> D. Purchase or Receive
<u>1</u> E. Competency	_____ E. Receipt
<u>15</u> F. Dignity	<u>3</u> F. Storage
<u>4</u> G. Discrimination	<u>8</u> G. Theft/Loss/Destruction
<u>1</u> H. Education	11. RIGHTS PROTECTION SYSTEM <u>6</u>
_____ I. Labor & Compensation	<u>1</u> A. Complaint Forms
_____ J. Marriage & Divorce	_____ B. Explanation of Rights
_____ K. Media	<u>2</u> C. Notification of Rights
_____ L. Personal Search	_____ D. Rights Advisor
<u>3</u> M. Privacy	<u>1</u> E. Timely Impartial Investigation
<u>1</u> N. Religion	<u>1</u> F. Complaint Procedure
_____ O. Sexuality	_____ G. Retaliation
<u>5</u> P. Harassment	<u>1</u> H. Legal Case Review
_____ Q. Voting	12. TREATMENT RIGHTS <u>92</u>
_____ R. Immigration	<u>5</u> A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>15</u>	_____ B. Informed Consent
<u>4</u> A. Attorney/Legal Matters	<u>23</u> C. Medical Care
_____ B. Clergy	<u>27</u> D. Medication
<u>4</u> C. Visitors	_____ E. Periodic Review
_____ D. Stationery & Postage	_____ F. Research/At Risk Procedures
<u>5</u> E. Telephone	<u>2</u> G. Knowledge of
<u>2</u> F. Mail	_____ H. Name of Treatment Staff
_____ G. Interpreter Service	<u>28</u> I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>9</u>	<u>2</u> J. Clinical Review Panel
<u>3</u> A. Records	_____ K. Minor Placed With Adults
<u>6</u> B. Privileged Communication	<u>1</u> L. Aftercare Plan
_____ C. Photocopying	_____ M. Advance Medical Directive
_____ D. Photographing	<u>4</u> P. Pain Management
6. ENVIRONMENTAL <u>56</u>	13. OTHER <u>7</u>
<u>5</u> A. Clothing	<u>4</u> A. Forensic Issues
<u>9</u> B. Diet	_____ B. Guardianship
<u>1</u> C. Personal hygiene	<u>3</u> C. Rights Outside Jurisdiction
<u>29</u> D. Safety	14. NO RIGHT INVOLVED <u>6</u>
<u>5</u> E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>1</u>
<u>7</u> F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>23</u>	TOTAL CASES <u>342</u>
<u>10</u> A. Building & Grounds	FACILITY <u>Spring Grove Hospital Center</u>
<u>1</u> B. General Restrictions	FISCAL YEAR <u>2010</u>
<u>4</u> C. Least Restrictive Alternative	
<u>1</u> D. Leave of Absence	
<u>4</u> E. Restraint	
<u>1</u> F. Seclusion	
<u>2</u> G. Quiet Room	

DEMOGRAPHIC INFORMATION FY 2010

Grievances - Spring Grove Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	124	36	<18	6	2	African-American	159	46
Male	195	57	18-44	177	51	Asian	0	0
Class	23	7	45-64	117	34	Caucasian	140	41
Total	342	100	65+	19	6	Hispanic	19	6
			Class	23	7	Other	1	0
			Total	342	100	Class	23	7
						Total	342	100

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>21</u>
___ A. Physical	<u>1</u> A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>7</u>	<u>1</u> D. Limitations
___ A. Admission	___ E. Safekeeping
<u>1</u> B. Hearing	___ F. Use of Funds
<u>4</u> C. Transfer	<u>1</u> G. Exploitation
<u>2</u> D. Discharge	<u>18</u> H. Entitlements/Benefits
___ E. Respite Care	9. NEGLECT <u>0</u>
3. CIVIL RIGHTS <u>16</u>	10. PERSONAL PROPERTY <u>1</u>
___ A. Abortion	___ A. Exclusion
<u>1</u> B. Verbal Abuse	___ B. Limitations
___ C. Barrier Free Design	<u>1</u> C. Protection
<u>8</u> D. Business & Personal Affairs	___ D. Purchase or Receive
<u>2</u> E. Competency	___ E. Receipt
___ F. Dignity	___ F. Storage
<u>1</u> G. Discrimination	___ G. Theft/Loss/Destruction
___ H. Education	11. RIGHTS PROTECTION SYSTEM <u>29</u>
___ I. Labor & Compensation	___ A. Complaint Forms
<u>1</u> J. Marriage & Divorce	<u>3</u> B. Explanation of Rights
___ K. Media	___ C. Notification of Rights
___ L. Personal Search	___ D. Rights Advisor
<u>2</u> M. Privacy	___ E. Timely Impartial Investigation
___ N. Religion	___ F. Complaint Procedure
___ O. Sexuality	___ G. Retaliation
___ P. Harassment	<u>26</u> H. Legal Case Review
___ Q. Voting	12. TREATMENT RIGHTS <u>12</u>
<u>1</u> R. Immigration	___ A. Individual Treatment Plan
4. COMMUNICATION & VISITS <u>19</u>	<u>2</u> B. Informed Consent
<u>4</u> A. Attorney/Legal Matters	<u>6</u> C. Medical Care
___ B. Clergy	<u>1</u> D. Medication
<u>2</u> C. Visitors	___ E. Periodic Review
___ D. Stationery & Postage	___ F. Research/At Risk Procedures
<u>2</u> E. Telephone	___ G. Knowledge of
<u>9</u> F. Mail	___ H. Name of Treatment Staff
<u>2</u> G. Interpreter Service	<u>2</u> I. Alternate Treatment Services
5. CONFIDENTIALITY & DISCLOSURE <u>2</u>	___ J. Clinical Review Panel
<u>1</u> A. Records	___ K. Minor Placed With Adults
<u>1</u> B. Privileged Communication	___ L. Aftercare Plan
___ C. Photocopying	<u>1</u> M. Advance Medical Directive
___ D. Photographing	___ P. Pain Management
6. ENVIRONMENTAL <u>28</u>	13. OTHER <u>15</u>
<u>2</u> A. Clothing	<u>9</u> A. Forensic Issues
<u>6</u> B. Diet	<u>1</u> B. Guardianship
<u>2</u> C. Personal hygiene	<u>5</u> C. Rights Outside Jurisdiction
<u>15</u> D. Safety	14. NO RIGHT INVOLVED <u>12</u>
<u>1</u> E. Sanitary	15. RESIDENT/RESIDENT ASSUALT <u>899</u>
<u>2</u> F. Humane	16. DEATH <u>0</u>
7. FREEDOM OF MOVEMENT <u>1</u>	TOTAL CASES <u>1,062</u>
___ A. Building & Grounds	FACILITY <u>Spring Grove Hospital Center</u>
___ B. General Restrictions	FISCAL YEAR <u>2010</u>
<u>1</u> C. Least Restrictive Alternative	
___ D. Leave of Absence	
___ E. Restraint	
___ F. Seclusion	
___ G. Quiet Room	

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Spring Grove Hospital

SEX	#	%
Female	291	27
Male	752	71
Class	19	2
Total	1,062	100

AGE	#	%
<18	57	5
18-44	565	53
45-64	373	35
65+	48	5
Class	19	2
Total	1,062	100

RACE	#	%
African-American	663	62
Asian	7	1
Caucasian	361	34
Hispanic	11	1
Other	1	0
Class	19	2
Total	1,062	100

RESIDENT GRIEVANCE SYSTEM

**UPPER SHORE COMMUNITY MENTAL
HEALTH CENTER**

FISCAL YEAR 2010

**Sharon Wert
Rights Advisor**

UPPER SHORE HOSPITAL CENTER
FISCAL YEAR 2010

GRIEVANCES	5
INFORMATION/ASSISTANCE CASES	70
TOTAL RIGHTS ADVISOR CONTACTS	75

RIGHTS CATEGORY	GRIEVANCES	INFORMATION/ ASSISTANCE CASES
ABUSE	0	0
ADMISSIONS/DISCHARGE/TRANFER	0	2
CIVIL RIGHTS	0	2
COMMUNICATIONS/VISITS	0	16
CONFIDENTIALITY	0	2
ENVIRONMENTAL	2	0
FREEDOM OF MOVEMENT	1	0
MONEY	0	22
NEGLECT	0	0
PERSONAL PROPERTY	0	4
RIGHTS PROTECTION SYSTEM (RGS)	0	3
TREATMENT RIGHTS	2	1
OTHER	0	0
NO RIGHT INVOLVED	0	0
RESIDENT/RESIDENT ASSAULT	0	18
DEATH	0	0
TOTAL	5	70

CATEGORIES OF RIGHTS ISSUES – INFORMATION/ASSISTANCE

1. ABUSE <u>0</u>	8. MONEY <u>22</u>
___ A. Physical	___ A. Dissipation of Assets
___ B. Sexual	___ B. Easy Access
___ C. Mental	___ C. Facility Account
2. ADMISSION/DISCHARGE/TRANSFER <u>2</u>	___ D. Limitations
<u>1</u> A. Admission	___ E. Safekeeping
___ B. Hearing	___ F. Use of Funds
___ C. Transfer	___ G. Exploitation
<u>1</u> D. Discharge	<u>22</u> H. Entitlements/Benefits
___ E. Respite Care	
3. CIVIL RIGHTS <u>2</u>	9. NEGLECT <u>0</u>
___ A. Abortion	10. PERSONAL PROPERTY <u>4</u>
___ B. Verbal Abuse	___ A. Exclusion
___ C. Barrier Free Design	___ B. Limitations
___ D. Business & Personal Affairs	___ C. Protection
___ E. Competency	___ D. Purchase or Receive
<u>1</u> F. Dignity	___ E. Receipt
___ G. Discrimination	___ F. Storage
___ H. Education	<u>4</u> G. Theft/Loss/Destruction
___ I. Labor & Compensation	11. RIGHTS PROTECTION SYSTEM <u>3</u>
___ J. Marriage & Divorce	___ A. Complaint Forms
___ K. Media	___ B. Explanation of Rights
___ L. Personal Search	___ C. Notification of Rights
___ M. Privacy	___ D. Rights Advisor
<u>1</u> N. Religion	___ E. Timely Impartial Investigation
___ O. Sexuality	___ F. Complaint Procedure
___ P. Harassment	___ G. Retaliation
___ Q. Voting	<u>3</u> H. Legal Case Review
___ R. Immigration	
4. COMMUNICATION & VISITS <u>16</u>	12. TREATMENT RIGHTS <u>1</u>
<u>16</u> A. Attorney/Legal Matters	___ A. Individual Treatment Plan
___ B. Clergy	___ B. Informed Consent
___ C. Visitors	<u>1</u> C. Medical Care
___ D. Stationery & Postage	___ D. Medication
___ E. Telephone	___ E. Periodic Review
___ F. Mail	___ F. Research/At Risk Procedures
___ G. Interpreter Service	___ G. Knowledge of
5. CONFIDENTIALITY & DISCLOSURE <u>2</u>	___ H. Name of Treatment Staff
<u>2</u> A. Records	___ I. Alternate Treatment Services
___ B. Privileged Communication	___ J. Clinical Review Panel
___ C. Photocopying	___ K. Minor Placed With Adults
___ D. Photographing	___ L. Aftercare Plan
6. ENVIRONMENTAL <u>0</u>	___ M. Advance Medical Directive
___ A. Clothing	___ P. Pain Management
___ B. Diet	
___ C. Personal hygiene	13. OTHER <u>0</u>
___ D. Safety	___ A. Forensic Issues
___ E. Sanitary	___ B. Guardianship
___ F. Humane	___ C. Rights Outside Jurisdiction
7. FREEDOM OF MOVEMENT <u>0</u>	14. NO RIGHT INVOLVED <u>0</u>
___ A. Building & Grounds	15. RESIDENT/RESIDENT ASSUALT <u>18</u>
___ B. General Restrictions	
___ C. Least Restrictive Alternative	16. DEATH <u>0</u>
___ D. Leave of Absence	
___ E. Restraint	TOTAL CASES <u>70</u>
___ F. Seclusion	FACILITY <u>Upper Shore Hospital Center</u>
___ G. Quiet Room	FISCAL YEAR <u>2010</u>

DEMOGRAPHIC INFORMATION FY 2010

Grievances - Upper Shore Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	0	0	<18	0	0	African-American	2	46
Male	5	100	18-44	3	60	Asian	0	0
Class	0	0	45-64	2	40	Caucasian	3	41
Total	5	100	65+	0	0	Hispanic	0	6
			Class	0	0	Other	0	0
			Total	5	100	Class	0	7
						Total	5	100

CATEGORIES OF RIGHTS ISSUES – GRIEVANCE

2. ABUSE 0

- A. Physical
- B. Sexual
- C. Mental

2. ADMISSION/DISCHARGE/TRANSFER 0

- A. Admission
- B. Hearing
- C. Transfer
- D. Discharge
- E. Respite Care

3. CIVIL RIGHTS 0

- A. Abortion
- B. Verbal Abuse
- C. Barrier Free Design
- D. Business & Personal Affairs
- E. Competency
- F. Dignity
- G. Discrimination
- H. Education
- I. Labor & Compensation
- J. Marriage & Divorce
- K. Media
- L. Personal Search
- M. Privacy
- N. Religion
- O. Sexuality
- P. Harassment
- Q. Voting
- R. Immigration

4. COMMUNICATION & VISITS 0

- A. Attorney/Legal Matters
- B. Clergy
- C. Visitors
- D. Stationery & Postage
- E. Telephone
- F. Mail
- G. Interpreter Service

5. CONFIDENTIALITY & DISCLOSURE 0

- A. Records
- B. Privileged Communication
- C. Photocopying
- D. Photographing

6. ENVIRONMENTAL 2

- A. Clothing
- B. Diet
- C. Personal hygiene
- 2 D. Safety
- E. Sanitary
- F. Humane

7. FREEDOM OF MOVEMENT 1

- A. Building & Grounds
- 1 B. General Restrictions
- C. Least Restrictive Alternative
- D. Leave of Absence
- E. Restraint
- F. Seclusion
- G. Quiet Room

8. MONEY 0

- A. Dissipation of Assets
- B. Easy Access
- C. Facility Account
- D. Limitations
- E. Safekeeping
- F. Use of Funds
- G. Exploitation
- H. Entitlements/Benefits

9. NEGLECT 0

10. PERSONAL PROPERTY 0

- A. Exclusion
- B. Limitations
- C. Protection
- D. Purchase or Receive
- E. Receipt
- F. Storage
- G. Theft/Loss/Destruction

11. RIGHTS PROTECTION SYSTEM 0

- A. Complaint Forms
- B. Explanation of Rights
- C. Notification of Rights
- D. Rights Advisor
- E. Timely Impartial Investigation
- F. Complaint Procedure
- G. Retaliation
- H. Legal Case Review

12. TREATMENT RIGHTS 2

- A. Individual Treatment Plan
- B. Informed Consent
- 2 C. Medical Care
- D. Medication
- E. Periodic Review
- F. Research/At Risk Procedures
- G. Knowledge of
- H. Name of Treatment Staff
- I. Alternate Treatment Services
- J. Clinical Review Panel
- K. Minor Placed With Adults
- L. Aftercare Plan
- M. Advance Medical Directive
- P. Pain Management

13. OTHER 0

- A. Forensic Issues
- B. Guardianship
- C. Rights Outside Jurisdiction

14. NO RIGHT INVOLVED 0

15. RESIDENT/RESIDENT ASSUALT 0

16. DEATH 0

TOTAL CASES 5

FACILITY Upper Shore Hospital Center

FISCAL YEAR 2010

DEMOGRAPHIC INFORMATION FY 2010

Information/Assistance - Upper Shore Hospital

SEX	#	%	AGE	#	%	RACE	#	%
Female	18	26	<18	0	0	African-American	18	26
Male	52	74	18-44	35	50	Asian	0	0
Class	0	0	45-64	35	50	Caucasian	51	73
Total	70	100	65+	0	0	Hispanic	1	0
			Class	0	0	Other	0	0
			Total	70	100	Class	0	1
						Total	70	100

PART III

LEGAL ASSISTANCE PROVIDERS

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2007-2008**

John L. Gildner Regional Institute for Children and Adolescents

*Hamlin Group, LLC for
Hamlin & Swain, LLC*
9A West Patrick Street, Suite 2
Frederick, MD 20902

TOTAL CASE COUNT

Total number of cases opened during fiscal year	28
Total number of cases closed during fiscal year	27
Number of cases carried over from previous fiscal year	1
Total number of cases open at close of fiscal year	2

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlements Referrals/Cases 2

Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.); lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

Educational Benefits, retention in RICA to allow completion of educational component of treatment, assist parents with the SSI application process on behalf of the resident, and assisted with educational placement/transfer to RICA Baltimore School as an out-patient placement. Unknowns sums were awarded for Social Security Benefits with parents as Representative Payee.

Clinical Review Panel Appeals

Number of Administrative Appeals	0
Number of Circuit Court Appeals	0

Rights Issues

Number of issues referred/handled 28

Rights and Entitlement Issues: The LAP has worked closely with the RGA, Court Appointed Special Advocates (CASA), Department of Social Services Social Workers, Department of Juvenile Services, therapists, residential and school staff in addition to private counsel and interested persons to ensure that the rights, entitlements and after-care plans for long-term residents have been addressed.

In one particular case, the LAP received several RGS complaints from this resident regarding treatment, discharge planning, educational issues, sports, and other matters.

The support and collaboration of all staff including treatment providers and legal counsel have been beneficial to ensuring that this resident's placement at the facility provided all available resources to meet his needs. The resident throughout his stay at the facility was actively advocating for himself with both the staff at the facility and other external service providers. He was vocal in his court appearances and at his IEP meeting despite the fact that his parents had limited involvement. He was eventually placed in a Licensed Foster Program that provides independent living services. Additionally, the LAP, RGA and facility staff members were successful in assisting him with placement at the RICA Baltimore School. This resident is an example of how facility staff, LAP, RGA and school staff worked together to monitor this resident's successful transition from a residential treatment center to the community.

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days	0
Residents who have been in the MHA facility for more than 5 years	0
Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility	12
Total Number of Legal Case Reviews	15
Total Number of Legal Case Reviews in which no legal issues were identified	9
Total number of Legal Case Reviews in which legal issues were identified	6

In conducting the legal case reviews, the LAP has identified the following issues during the 2008-2009 fiscal year:

- Transportation (Residents are placed outside of their jurisdiction and the parent/guardian do not have access to transportation)
- Educational (Issues concerning education are not being given enough weight during preparation for discharge of residents under the jurisdiction of DJS)
- Clothing (Residents under the jurisdiction of DJS/DSS request funding for clothing and other personal property items)
- Wrap around services (There is difficulty coordinating with other agencies to provide the necessary wrap around services for the residents after discharge)

Referrals for General Civil Claims

Number of requests for information regarding general civil claims	0
Number of cases successfully referred	0
Names of Legal Providers who accepted LAP's referral for services:	
Number of cases that did not result in a referral	0
Number of cases referred to other providers but not accepted	0

Informational Meetings

Total number of information meetings conducted	4
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Training

Total number of trainings conducted	2
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List of topics presented at training:

- Resident's rights
- Introduction of the LAP
- Contacting the LAP
- The Role of the LAP



Attorney's Signature

8/31/10

Date

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2010**

LOCATION: Perkins

CONTRACTOR: Law Offices of Terri Mason

The following data is a cumulative summary of data from the monthly invoices.

PART 1

Cases Processed

1.	Total number of cases opened during fiscal year	50
2.	Total number of cases closed during fiscal year	30
3.	Number of cases carried over from previous fiscal year	253
4.	Total number of case open at close of fiscal year	322

Legal Proceedings

Information details the total number of cases handled and the total number of hours billed for each legal proceeding. The total number of hours billed should be consistent with information provided on monthly invoices.

	<u>Total No. of Cases Handled</u>	<u>Total No. of hours billed</u>
1. Entitlements	20	1,220.00
2. Clinical Review Panel Adm. Appeals		
a. Administrative Hearings	10	75.00
b. Appeals to Circuit Court	5	48.00
c. Appeals to Appellate Court		
3. Rights Issues	13	144.50

4.	Legal Case Reviews		
	a. Automatic Referrals	18	126.00
	b. Discretionary Referrals		
5.	General Civil Claims		
	a. Claims that were referred to other legal providers	5	
	b. Claims that were handled by LAP		
6.	Quarterly informational meetings		36.00
7.	Annual Staff Training on Entitlements		
8.	Brief Intake		30.10

PART II

A. Summary of type and amount of benefits / entitlements obtained for each case by facility.

<u>Type of benefit</u>	<u>Amount of Lump</u>	<u>Amount of Monthly</u>
SSI	3400.00	680.00
SSI	1360.00	680.00
SSI	2730.00	680.00

None

B. Summary of Legal Issues Identified at Legal Case Reviews

1. The LAP identified that the client, who is dually diagnosed, is not receiving appropriate services and treatment to meet his clinical needs foreclosing his ability to advance through the privilege level system.

C. Summary of General Civil Claims

Cases Referred to Other Providers:

Legal Issue	Provider Referred
Trust	Jason Frank, Esquire Esq.
Admission Status	Office of the Public Defender
Personal Injury	Robert Smith, Esq.

2. Cases Approved by Monitor and Handled by LAP:

None

PART III

Provide a brief narrative of a representative sample of cases for each facility in the region.

1. The LAP was successful with preventing several patients from being forcibly medicated against their will at the OAH level. before an ALJ.
2. The LAP represented the client at a clinical review panel appeal hearing. ALJ reversed the decision of the panel authorizing forced medication in the event of a refusal.
3. The LAP filed Petitions for Judicial Review concerning several erroneous decisions to affirm forced medication.
4. The LAP represented a patient concerning the wrongful use of seclusion and restraints. The Superintendent found the grievance valid. The Central Review Committee concurred with the Superintendent on behalf of a client concerning alleged while the patient was in seclusion and restraints. This case was resolved to the satisfaction of the patient following a review by the Superintendent of the facility.
5. The LAP was successful in assisting several patients with overpayment matters.

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2009-2010**

Upper Shore Community Health Center
Name of Facility

Jennings & Treff
Legal Assistance Provider

TOTAL CASE COUNT

Total number of cases opened during fiscal year	28
Total number of cases closed during fiscal year	35 cases were closed or transferred
Number of cases carried over from previous fiscal year	7
Total number of cases open at close of fiscal year	0

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlements Referrals/Cases	23
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Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.; lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

<u>Type of Benefit</u>	<u>Lump Sum Amount</u>	<u>Monthly Amount</u>
	\$4,216.00 back award	\$962.00
	0	\$674.00
	0	\$674.00
	\$14,539.74 in three payments	
	\$3,086.44	\$674.00

Total for Year

\$50,921.66
(Lump Sum)

\$2,984.00
(Monthly)

Clinical Review Panel Appeals

Number of Administrative Appeals 0

Number of Circuit Court Appeals 0

Rights Issues

Number of issues referred/handled 6

Narrative summary highlighting a random selection of interesting/unusual cases:

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days 3

Residents who have been in the MHA facility for more than 5 years _____
Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility _____

Total Number of Legal Case Reviews 3

Total Number of Legal Case Reviews in which no legal issues were identified 0

Total number of Legal Case Reviews in which legal issues were identified 0

Narrative summary of legal issues identified by LAP:

Referrals for General Civil Claims

Number of requests for information regarding general civil claims 0

Number of cases successfully referred 0

Names of Legal Providers who accepted LAP's referral for services:

Number of cases that did not result in a referral 0

Number of cases referred to other providers but not accepted _____

Informational Meetings

Total number of information meetings conducted 4

Training

Total number of trainings conducted _____

List of topics presented at training:



Attorney's Signature

9/30/10

Date

**LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2009-2010**

Eastern Shore Hospital
Name of Facility

Jennings & Treff
Legal Assistance Provider

TOTAL CASE COUNT

Total number of cases opened during fiscal year	18
Total number of cases closed during fiscal year	0
Number of cases carried over from previous fiscal year	4
Total number of cases open at close of fiscal year	22

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlements Referrals/Cases 9

Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.; lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

<u>Type of Benefit</u>	<u>Lump Sum Amount</u>	<u>Monthly Amount</u>
Total for Year (Lump Sum)	0	(Monthly)

Clinical Review Panel Appeals

Number of Administrative Appeals	3
Number of Circuit Court Appeals	0

Rights Issues

Number of issues referred/handled	4
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Narrative summary highlighting a random selection of interesting/unusual cases:

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days	2
Residents who have been in the MHA facility for more than 5 years	_____
Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility	_____

Total Number of Legal Case Reviews	2
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Total Number of Legal Case Reviews in which no legal issues were identified	0
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Total number of Legal Case Reviews in which legal issues were identified	0
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Narrative summary of legal issues identified by LAP:

Referrals for General Civil Claims

Number of requests for information regarding
general civil claims 0

Number of cases successfully referred 0

Names of Legal Providers who accepted LAP's referral for services:

Number of cases that did not result in a referral 0

Number of cases referred to other providers but not
accepted _____

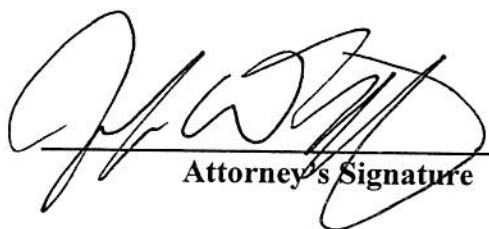
Informational Meetings

Total number of information meetings conducted 4

Training

Total number of trainings conducted _____

List of topics presented at training:



Attorney's Signature

9/30/10

Date

LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2010

Spring Grove Hospital Center

Name of facility

Ria P. Rochvarg, P.A.

Legal Assistance Provider

TOTAL CASE COUNT

Total number of cases opened during fiscal year	<u>217</u>
Total number of cases closed during fiscal year	<u>271</u>
Number of cases carried over from previous fiscal year	<u>115</u>
Total number of cases open at close of fiscal year	<u>61</u>

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlement	<u>46</u>
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Referrals/Cases

Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.; lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

Type of Benefit	Lump Sum Amount	Monthly Amount
SSI	\$16,300.00	\$ 637.00
SSI	\$.00	\$ 674.00
SSI	\$ 8,151.71	\$ 674.00
SSI	\$.00	\$ 606.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 676.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 549.00
SSI	\$ 2,022.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSDI	\$.00	\$ 721.00
SSDI	\$.00	\$ 847.00
SSDI	\$.00	\$ 261.00
SSDI	\$.00	\$1,000.00
SSDI	\$ 6,337.72	\$ 802.00
SSDI	\$ 3,000.00	\$1,000.00
Total	\$35,811.43	\$13,165.00

Clinical Review Panel Appeals

Number of Administrative Appeals	<u>06</u>
Number of Circuit Court Appeals	<u>06</u>

Rights Issues

Number of issues referred/handled	<u>122</u>
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1. A female client complained that a male patient entered the bathroom while she was showering. Though staff removed him, he re-entered just minutes later. The client believed staff did not take appropriate steps to assure her privacy after the first intrusion. The Stage 1 RGS report revealed that the male patient has a history of intruding upon the female bathroom and was supposed to be on Continuous Close Observation at the time of the incidents. Since this grievance was filed, staff members have been able to stop the male from invading the client's, or any other female's privacy.
2. Client contacted the LAP alleging that she was being told she was going to be transferred to Clifton T. Perkins Hospital Center and that discharge planning would not be initiated until after the transfer. LAP threatened to file an injunction in court to halt the transfer of patients from a lesser restrictive environment to a more restrictive environment. All transfers to CTP were stayed as the administration decided how much process would be due to those individuals designated for transfer. Subsequent to the stay and LAP's grievance, client was transitioned to the SPEF unit at the Dayhoff building and discharge plans were initiated and completed for client to return to the service provider that she was with prior to her admission to the hospital. The client was transferred to Clifton T. Perkins Hospital Center.
3. Client sought help of LAP after grievance was initiated by his brother. Client wished to let his brother review his medical records for him, but was initially told this was not possible. Client was eventually given the correct forms to review his medical records, and his brother was allowed to copy them with the client's authorization. Grievance was appealed to Stage 4 as denial of access to one's medical records was a recurring problem. At Stage 4, the Central Review Committee found the grievance to be valid and recommended more training programs and oversight for staff, as well as a receipt system for patients who request to view their medical records.

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days 05

Residents who have been in the MHA facility for more than 5 years 08

Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility 13

Total Number of Legal Case Reviews 26

Total Number of Legal Case Reviews in which no legal issues were identified 07

Total number of Legal Case Reviews in which legal issues were identified 19

Narrative summary of legal issues identified by LAP:

1. Court committed client was referred to LAP for an LCR after he alleged that his SSDI checks were being misappropriated. Representative payee denied misappropriating the checks, stating that they were used to satisfy hospital bills. LAP provided client with the forms necessary to become his own representative payee.
2. Client was referred to the LAP for an LCR as an individual who is committed to the facility by court order. Upon reviewing his medical record the LAP found multiple

issues that resulted in grievances: First, no documentation of evaluation by doctor after injury. Second, IM administered, but no form was filled out and there was no evidence that less restrictive means were offered. Finally, no documentation of evaluation by a doctor after repeatedly being put in the somatic book.

3. Client was referred to the LAP for an LCR as an individual who is committed to the facility by court order. Upon reviewing his medical record the LAP found multiple issues that resulted in grievances: First, the need for clarification in medical records. Second, denial of access to the shower. Finally, denial of access to the snack machine as a punishment.

Referrals for General Civil Claims

Number of requests for information regarding general civil claims 11

Number of cases successfully referred 01

Names of Legal Providers who accepted LAP's referral for services:
Craig L. Ziseel, Esquire

Number of cases that did not result in a referral 10

Number of cases referred to other providers but not accepted 00

1. Client was referred for a civil referral after being served with a civil lawsuit because his parents' home insurance company was suing him. LAP filed a Notice to Court of Special Circumstances of Third Party Defendant, _____ in the United States District Court for the District of Maryland, asking the judge to appoint an attorney to represent the client. The Court ordered a pro bono attorney to represent the client.
2. Client was referred for a civil referral for assistance in dealing with the United States Citizenship and Immigration Services. After meeting with the client, the LAP helped client file an application for nationalization as well as a petition for expedited processing of the application. The petition for expedited processing was subsequently granted.
3. Client was referred for a civil referral to assist with creating a power of attorney. The LAP met with client and social worker to give the client forms and give instructions

about how to fill them out. The LAP subsequently met with the client and all forms were filled out to the client's satisfaction.

Informational Meetings


Total number of information meetings conducted 40

Training

Total number of trainings conducted 01

List of topics presented at training:

Clinical Review Panel Training



Attorney's Signature

8/31/10

Date

LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2010

RICA

Name of facility

Ria P. Rochvarg, P.A.

Legal Assistance Provider

TOTAL CASE COUNT

Total number of cases opened during fiscal year	<u>21</u>
Total number of cases closed during fiscal year	<u>17</u>
Number of cases carried over from previous fiscal year	<u>00</u>
Total number of cases open at close of fiscal year	<u>04</u>

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlements	<u>00</u>
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Referrals/Cases

Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.; lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

<u>Type of Benefit</u>	<u>Lump Sum Amount</u>	<u>Monthly Amount</u>
No Data		
Total for Year	<u>\$0.00</u>	<u>\$0.00</u>
	(Lump Sum)	(Monthly)

Clinical Review Panel Appeals

Number of Administrative Appeals 00

Number of Circuit Court Appeals 00

Rights Issues

Number of issues referred/handled 17

Narrative summary highlighting a random selection of interesting/unusual cases:

1. The LAP heard from 8 residential Clients who alleged that they were not receiving their monthly allowance from their respective branch of the Department of Social Services. The LAP communicated with the Department of Social Services social workers assigned to these Clients. The LAP provided each social worker with the invoices needing payment. The LAP then followed up with the business office at RICA-Baltimore to determine whether checks were being sent on each Client's behalf. In a little less than two months each delinquent account was satisfied and the Clients were able to make their personal purchases with their monthly allowances.

2. Client contacted LAP alleging that he was unfairly being denied Leave of

Absence. LAP reviewed Client's medical record and determined that Client was being denied LOA's but that the denials were due in part to his foster mother's refusal to pick Client up if he had engaged in behaviors that would require restrictions the week prior to the LOA. The LAP advocated for the implementation of a behavioral contract so that the Client would clearly understand what actions were required to receive an LOA. The LAP spoke with Client's clinician who informed LAP that Client had been honoring the contract and that Clinician had personally taken Client on a LOA when his foster mother was unavailable.

3. The Client contacted the LAP and alleged that she was being told that would not be permitted to request discharge from the facility upon the date that she achieved eighteen years. Client stated that she would like to sign herself out of the facility but was informed that she was not able to do so because she remained under auspices of the Department of Social Services. The LAP learned that the Client was a voluntary admission and informed Client's clinician. The LAP followed up with the clinician three days following Client's request to be released and was informed that Client had been discharged.

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days	<u>00</u>
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Residents who have been in the MHA facility for more than 5 years	<u>00</u>
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Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility	<u>04</u>
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Total Number of Legal Case Review	<u>04</u>
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Total Number of Legal Case Reviews in which no legal issues were identified

01

Total number of Legal Case Reviews in which legal issues were identified

03

Narrative summary of legal issues identified by LAP:

1. Client's clinician contacted LAP alleging that Client was being abandoned by County 1 and that County 2 was refusing to accept responsibility for Client's school funding as the Client's home jurisdiction. The LAP reviewed Client's medical record to determine his home jurisdiction and educational funding source. LAP discovered that Client was being served by the County 1's Department of Social Services and that County 1 was funding his education but that Client's case was being transferred to County 2 because Client's mother moved to County 2 during Client's residence at RICA-Baltimore, thus altering his home school jurisdiction. The LAP facilitated contact between the two jurisdictions and the resolution was reached that County 1 would be funding Client's education for the rest of the school year and that the case would then be transferred to County 2. The transfers occurred as planned and without further incident.
2. Client contacted LAP alleging that she was clinically appropriate for discharge and that her placement in the community was being impeded. The Client's clinician stated that placement in the community was being delayed by a lack of documentation from Client's family. Client had an older sister who was identified as a possible placement option. This sister was preliminarily disqualified as a potential placement because she had active Child Protective Services cases. LAP spoke with the sister who had the CPS cases and was informed that the CPS cases were more than five years old and that they were unfounded attempts at harassment by her ex-husband. The LAP requested documentation to support her claim and she provided LAP with letters on the CPS letterhead informing her that no further action would be taken on the claim and that the investigations were closed. The LAP then contacted an agent from CPS who confirmed that the cases were closed. Finally, the LAP finally sent a letter to Client's social worker at Baltimore County Department of Social Services requesting another evaluation of Client's sister's fitness for placement and attached the documentation of the closed cases. Client called LAP and confirmed that she had been discharged to her sister's home following the DSS evaluation for fitness for placement.
3. The LAP was contacted by Client's clinician who alleged that Client did not have an Individual Education Plan and that he would need one once he was reintegrated into the community and attending his home school. The LAP then sent a letter to Client's father and legal guardian requesting permission to request Client's IEP on his father's behalf. Client's father granted permission and the LAP sent a letter to Client's home school requesting that the principal schedule the evaluations necessary to develop an IEP for Client. The LAP was later informed by the Rights Advisor that County Board of Education was alleging that Client never

attended school in that county and that they were not obligated to participate in the development of an IEP for Client. The LAP obtained a report card from Client's attendance at the home school and drafted a letter to the County Board of Education demanding an IEP for Client and attaching his old report card as proof that Client attended school at some point in that county. Approximately one month later, the LAP learned that the Client's IEP had been scheduled and completed.

Referrals for General Civil Claims

Number of requests for information regarding general civil claims 00

Number of cases successfully referred 00

Names of Legal Providers who accepted LAP's referral for services:

Number of cases that did not result in a referral 00

Number of cases referred to other providers but not accepted 00

Informational Meetings

Total number of information meetings conducted 12

Training

Total number of trainings conducted

00

List of topics presented at training:



Attorney's Signature

8/31/10
Date

LEGAL ASSISTANCE PROVIDER
ANNUAL REPORT FOR
FISCAL YEAR 2010

Springfield Hospital Center

Name of facility

Ria P. Rochvarg, P.A.

Legal Assistance Provider

TOTAL CASE COUNT

Total number of cases opened during fiscal year	<u>195</u>
Total number of cases closed during fiscal year	<u>291</u>
Number of cases carried over from previous fiscal year	<u>123</u>
Total number of cases open at close of fiscal year	<u>27</u>

SUMMARY OF SERVICES PROVIDED

Entitlements

Total Number of Entitlements	<u>42</u>
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Referrals/Cases

Detail of Entitlements obtained for residents, indicating type of benefit (Social Security, Veterans, etc.; lump sum amount awarded, and the monthly benefit amount awarded for each case handled:

<u>Type of Benefit</u>	<u>Lump Sum Amount</u>	<u>Monthly Amount</u>
SSI	\$.00	\$ 717.00
SSI	\$27,111.26	\$.00
SSI	\$.00	\$ 674.00
SSI	\$12,605.89	\$.00
SSI	\$.00	\$ 674.00
SSI	\$ 2,022.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$1,533.00
SSI	\$.00	\$ 674.00
SSI	\$.00	\$ 674.00
SSDI	\$24,400.00	\$1,525.00
SSDI	\$.00	\$1,585.00
Total	\$66,139.15	\$9,404.00

Clinical Review Panel Appeals

Number of Administrative Appeals 31

Number of Circuit Court Appeals 05

Rights Issues

Number of issues referred/handled

65

Narrative summary highlighting a random selection of interesting/unusual cases:

- Client contacted the Legal Assistance Provider alleging that he was being prevented from practicing his religion or in the alternative he was being treated inhumanely because staff refused to make arrangements for him to have non-perishable meals during Ramadan as he fasted from sun up to sun down. LAP filed a grievance. Rights advisor investigated this issue and found the complaint valid. In response, Client was provided non-perishable items during the scheduled meal times that he was able to store until sun down.
- Several Clients from Salomon B contacted the Legal Assistance Provider alleging that unit staff had instituted a blanket visitation ban in response to continued smoking on the unit in violation of Springfield Hospital Center policy. It was alleged that the entire unit was being punished for the wrongful acts of two individuals who are smuggling in cigarettes and smoking in the unit bathrooms. LAP filed a grievance. In immediate response to LAP's grievance, the visitation prohibition was lifted. LAP then contacted Clients residing on the ward to confirm that they were being permitted to have visitors.
- Client contacted the Legal Assistance Provider alleging that his personal property was confiscated without cause. He stated that he had purchased a portable radio and head set from the Canteen, a hospital sponsored store for patients, and that the radio and head set were confiscated as contraband when he returned to the unit. The LAP filed a grievance. The Rights Advisor's investigation revealed that the property was confiscated because the cord to the head set was considered contraband and was not permitted on the unit. Although this assertion was correct, LAP argued that the Rights Advisor's report did not reflect that fact. The Rights Advisor's report quoted the head nurse on Client's ward who stated that the property was confiscated as a preventative measure against bartering amongst the patients and the complications thereto. LAP appealed the initial decision arguing that prevention of bartering was not just cause for confiscation of personal property and asked that staff cite to the requisite policy against bartering. Rights Advisor responded that Client's property was exchanged at the Canteen for a radio and head set all in one combo that did not have a cord.

Legal Case Reviews

Number of Legal Case Reviews per subclass:

Residents who have been diagnosed as mentally retarded/developmentally disabled (dually diagnosed) and have been in facility for more than 30 days 18

Residents who have been in the MHA facility for more than 5 years 17

Residents who have been court-committed to a governmental agency or placed in the care and custody of a governmental agency and are presently in a DHMH MHA facility 12

Total Number of Legal Case Reviews: 47

Total Number of Legal Case Reviews in which No Legal Issues were Identified: 36

Total Number of Legal Case Reviews in which Legal Issues were Identified: 11

Narrative Summary of Legal Issues Identified by LAP:

- The Legal Assistance Provider conducted a legal case review on behalf of Client who alleged that he had been denied access to his medical record prior to a Clinical Review Panel despite requests by the Client. LAP found that Client requested to review his medical record on numerous occasions in writing and that these requests had been ignored. LAP filed a grievance arguing that Client had the right to review his medical record in preparation for his CRP or for any other reason. The LAP

responded by arguing that the offered justification was not a valid cause for denying Client his right to review his medical record and requested that the clinical staff follow proper protocol for consenting to or denying a patient's request to review their medical record, namely, soliciting the attorney general for the hospital to provide enumerated written justifications for the decision not to allow review of the medical record. Following this argument staff worked with Client to review his entire medical record.

- The Legal Assistance Provider conducted a legal case review on behalf of Client who was subjected to numerous, consecutive 72 hour emergency medication orders. The LAP filed a grievance arguing that such an order could not be used against Client who was a voluntary patient at the hospital and could only be exposed to forced medication against his will in the event of a behavioral emergency. In response to LAP's complaint the hospital discontinued the use of the 72 hour medication orders.
- The Legal Assistance Provider conducted a legal case review on behalf of Client and found that Client had worked for seven weeks without being paid for his labor consistent with the last pay period that Client worked but did not issue him back pay to cover the previous five weeks of labor. The LAP appealed the decision, stating that the pay given did not reflect all Client was owed. The hospital provided Client with the lump sum payment and Client returned to employment following the settlement of this matter.

Referrals for General Civil Claims

Number of requests for information regarding general civil claims	<u>05</u>
Number of cases successfully referred	<u>01</u>
Names of Legal Providers who accepted LAP's referral for services: Alternative Directions, Inc.	
Number of cases that did not result in a referral	<u>04</u>
Number of cases referred to other providers but not accepted	<u>00</u>

- Client was referred for a civil referral after being served with divorce papers. The Legal Assistance Provider conducted research to find pro bono legal services to help Client fill out any paperwork or other documentation necessary to complete the divorce. Client was referred a community organization that provides this service. The Legal Assistance Provider obtained the intake form from the organization and helped Client fill it out. Client was then given the help she needed to finalize her divorce.
- Client was referred for a civil referral to assist with creating a Power of Attorney. The Legal Assistance Provider was unable to find pro bono legal services for Client, but was able to send the a form so that the Client could appoint his chosen family member to the position of his Power of Attorney.

Informational Meetings

Total number of information meetings conducted 40

Training

Total number of trainings conducted 01

List of topics presented at training:

Clinical Review Panel Training



 Attorney's Signature

8/31/18

 Date