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HUMAN RIGHTS AUTHORITY - PEORIA REGION
REPORT OF FINDINGS

Case #15-090-9014

EPIC (Empowering People. Inspiring Capabilities.) Respite Care

INTRODUCTION

The Human Rights Authority (HRA) opened an investigation after receiving a complaint of possible rights violations with services at EPIC respite care. The complaints alleged the following:

1. Inadequate care and treatment

If found substantiated, the allegations would violate the Illinois Department of Children and Family Services, Licensing Standards for Child Care Institutions (89 Il Admin Code 404).

The EPIC respite facility is a 16 bed facility that provides respite services to individuals with developmental disabilities from the ages of 2 and above. Individuals receive respite services 30 days per year and services can be used as needed. The facility services 200 families and averages 175 used beds per month. There are 10 staff members at the facility; some staff are Direct Support Personal (DPS) and others are Department of Children and Family Services (DCFS) Childcare Aides. The facility is licensed through DCFS and the facility supports clients from all across the state of Illinois.

To investigate the allegations, HRA team members met and interviewed members of the EPIC staff and reviewed documents pertinent to the case.

COMPLAINT STATEMENT

The complaint alleges that meals are not adequately documented and that clients do not have activities while receiving services.

INTERVIEW WITH STAFF

Interview with EPIC staff (3.5.2015)

Regarding the complaint of inadequate food documentation, staff began the interview by explaining the facility is required to document the percentage of food eaten by the clients in a daily progress note. For example, staff will document that the client ate 30% of his/her meal.

Staff explained that percentage documentation is all the facility has to record in accordance with the DCFS standards. The facility creates a card that describes what each client's diet is and if there are any specific needs, for example, if a child requires a gluten free diet, the staff will purchase the needed food.

Staff stated that meal arrangements depend on the individual. The typical meals are served between 7am and 8am for breakfast, 11am and 12pm for lunch and 5pm and 6pm for dinner, but they just served a client who they prepared a meal for whenever she said she was hungry. Many of the individuals have been receiving services at the facility for a long time and staff are familiar with their likes and dislikes. Food preferences are discussed with new clients during intake/care plan meetings.

Staff know if someone received a meal that day because they are documenting percentages eaten and because they are present in the dining room during mealtime. All meals are documented except for snacks. All cooking is done in-house by the staff and they have a menu for the day. Staff document if someone refused their meal. They will also make alternative meals for clients who dislike what is prepared. Meals are held for anyone sleeping. Staff explained that clients are fed when they are hungry and meals can be given regardless of admission times.

In order to participate in the respite program, reservations are made and documented in two different places, to record the number of clients in the facility and which beds they are occupying. The documentation is basically a list of who is admitted and discharged. When the clients arrive, the parents or guardians complete admission forms that document items like medication, who admitted the client, etc., and the forms are placed in the client's file. If there is a special diet, it is discussed during admission. Repeat clients already have diet cards and the staff are also aware of details like allergies or the need for special utensils. If a client is new, a care plan is prepared. The application forms that are completed are extensive and cover food. Staff will usually tell parents/guardians if there were behavior issues, injuries, or anything else important upon discharge. If a client is not eating well, the staff will communicate verbally or in the communication log to other staff members.

Staff explained that they have many games, books, arts and crafts, toys, a piano and a huge, fenced back yard. They do not have defined activity sessions because the clients are so diverse and each day is different. Activities depend on the client's requests. There are clients who attend after school programs, and staff try to fill their time with crafts. They have paint, glitter, glue and those types of items. Staff are always playing games with clients and they usually have a puzzle for clients to work on. The clients are not always occupied; some people want to watch a movie instead of crafts. Staff explained that one client loves to sit by the back door and feel the sun. Staff said that some clients treat the facility like it is a vacation and do not want to be active, but as another example, another client enters the facility and staff know they are going to meet with him and plan activities like going to the zoo, movies, restaurants, the mall, etc. They do have activities outside of the facility and some clients attend day training and some students attend school.

Staff said there is an activity policy/procedure. They have developmental toys and an Ipad at the facility. They try to work on Ipad communication skills with some of the children who are non-verbal. They also have a television area for children and a separate one for adults. Because of the short term nature of the program, they do little active treatment. The typical length of stay at the facility is 3 or 4 days. Sometimes activities will be recorded in the client's progress notes but not consistently. Staff said that regulations do not require activities to be recorded in the progress notes.

The HRA toured the facility and observed the kitchen and pantry which was stocked with food and the dining area which had cabinets filled with different games and crafts. There was also an area of the facility shelves filled with games. There were 4 clients present, one child was waiting to go home, two adolescents were watching television and another was in the television room but playing a game on a smart phone with staff.

FINDINGS (Including record review, mandates, and conclusion)

The HRA reviewed an administrative policy regarding recreation and leisure activities. The policy states that "Recreation and leisure activities shall be provided as part of Respite Care Center's total scope of services." The purpose of the policy states "To provide individuals with the opportunity to develop social interaction and leisure time skills based on personal needs and choices." The first statement in the procedures section of the policy reads "Recreation and leisure activities will be readily available and offered to all Respite Care Center individuals based on needs and personal choices." Another procedural statement reads "In-house leisure activities will be developed to meet the needs of all individual's service by Respite, based on ability, needs and personal preference." The policy also states that staff will make all the activities available to all individuals, discusses cost and transportation, and states that monthly documentation will be compiled and reviewed.

The HRA reviewed redacted records for five individuals who use respite services from EPIC. According to the record, the first individual's diet is "mechanical soft" and the individual likes mashed potatoes, meatloaf, French fries and dill pickles, among other items. It also states that the individual does not eat on schedule, "...will open mouth wide when hungry and will pocket food in mouth, so avoid bread." The record also has other recreational information that the individual likes country music, musical toys and soft toys and enjoys being read to. The individual's physical screening also mentions the individual's diet and that bread is pocketed, which also appears in the physical information section of the admission record. Another section of the record (not labeled) discusses the diet and also mentions activities that the individual enjoys, for example it mentions music (as was mentioned previously) and states "Has headphones and radio she will listen to at times, most recently not as much, was listening to music on youtube. Likes to walk around, jump, sway from side to side, dance. Likes to rock in a rocking chair at times. Has used peanut therapy ball to play on as well. Likes to sit or lay wrapped on her bed, listening to music or playing with her toys. Likes to have her head stroked, helps her fall asleep." The HRA reviewed the individual's progress notes for her stay at the facility which is where the food intake is recorded. The individual stayed from 2/12/2015 until 3/3/2015 and most of the days had a percentage listed for breakfast, lunch, dinner and snack. On 2/13, the log area for breakfast and lunch were left blank and it stated 0% for snacks but in a shift

summary it stated that she had snacks throughout the day. On 2/18, the log area for lunch was left blank and there was no mention of lunch in the shift summary. On 2/21, there was a question mark for breakfast but in an activity section, it states that she was up for medication and breakfast at 8am. On 2/23, the area for breakfast states “mashed potatoes” but there is no percentage and the other meal areas are left blank. On 2/25, there is food logged but no percentages of food eaten for breakfast or lunch. On 2/27, the area for lunch is left blank and there is no mention of the meal in the shift summary and the same situation occurs for 3/2. On 3/3, foods are mentioned but with no percentages. The HRA also did not see it recorded that the client denied meals. In reviewing the progress notes for activities, the activities logged were listening to music, television, story books and the client sometimes played with toys. In the areas left blank there is no line or verbiage added to indicate whether or not the individual ate the meal or not.

The second client also had a sheet at the beginning of the record which documented her diet. It stated that the client’s diet was general with small bites, feeds herself and loves fruit snacks. According to the record, the client is at the facility for before and after school care. The record documents types of food for the client as well as a care plan that indicates the individual has a general diet and feeds herself with no special feeding. In a medical information section, it states that the client has allergy restrictions of Amoxicillin and catfish. The catfish does not appear to be added with any of the nutritional information. There are 7 days of progress notes, and each has a percentage documented for lunch and a line through breakfast (except for one day when the client ate 100% of breakfast). The client’s activities seem to indicate that she played or watched television while at the facility.

The third client has similar documentation to the first two regarding diet and food preferences. According to the record, the client likes food that can be picked up with his hands with examples like hot dogs, hamburgers, French fries, toast, fruit and cheese. Another section states that the client likes spaghetti, pizza, cereal, hot dogs, peanut butter and dislikes most other foods than those mentioned. This client stayed at the facility from 8/13/14 until 8/19/14 and then again from 10/7/14 until 10/13/14. Each day that the individual was at the facility, the meals are all documented. The activities listed consisted of watching television, walking around, and some singing.

The record documents that the fourth client is on a mechanical soft diet with no milk, only soy milk. The client also needs to be fed and likes applesauce and oatmeal. There is also a very detailed account on how the client must be fed, including not putting the plate in front of him and that he dislikes fresh fruit and food with very little texture. There is also a warning that the client puts everything in his mouth so they must keep the area around him clean and he is not allowed into the bathroom alone. Another area of the record indicates that the client has a general diet. The HRA was only provided two days of progress reports for the individual and all the meals were documented on the charts and the activities documented were walking around, talking and sitting in the chair. The individual was only at the facility for partial days.

According to the record, the final client is on a mechanical soft diet and it is important that the client receives cold water each day to control seizures. The client also likes strawberry, chocolate and vanilla ice cream. According to the progress notes provided, this client was

admitted for two evenings, after dinner and then was discharged a few hours later in that same evening. The client did not eat and it was indicated that she watched television and worked on a puzzle while at the facility.

Regulations regarding food read “f) Three balanced meals shall be served each day. The time span between service of one meal and the next meal shall not be greater than 14 hours (overnight)” (89 Il Admin Code 404.38).

The HRA spoke with DCFS who said that there was no regulation dictating that food must be tracked through percentages. The HRA also found no reference to this in the Illinois Department of Human Services regulations. In a conversation with an EPIC staff member, it was speculated that this practice was a facility policy, but when policy and clarification was requested neither were provided.

DCFS regulations read “a) Recreation activities play a major role in the development of children. Recreation should enhance sportsmanship, coordination, and peer acceptance. b) Recreation should be appropriately planned for after school hours, weekends, and holidays. c) An exercise room and a yard of sufficient area to allow strenuous physical exercises must be accessible. d) There shall be a written policy covering recreation activities and schedules. e) Recreational activities shall include the use of recreational resources in the community when available and appropriate” (89 Il Admin Code 404.36).

Complaint #1 - Conclusion

In the documentation dealing with recording the food, the HRA discovered one record with incomplete documentation. The first individual record reviewed indicated that there were 6 instances in the record where the meal tracking was incomplete. The HRA does acknowledge that in the other records, the meal tracking was complete. The facility appears to have the practice of using the percentage of food eaten to track the meals for the individuals. The DCFS regulations state that “Three balanced meals shall be served each day” (89 Il Admin Code 404.38) and the HRA believes that, because of the incomplete tracking, it cannot be proven that the regulations were followed for one client. Because of this, the HRA finds the complaint **substantiated and recommends the following: the facility take action in assuring that three balanced meals are served daily by training staff in properly documenting the food served in accordance with the facility practices and DCFS regulations.**

Additionally, the HRA offers the following suggestions:

- The DCFS regulations (89 Il Admin Code 404.36) state “Recreation activities play a major role in the development of children. Recreation should enhance sportsmanship, coordination, and peer acceptance” and “Recreational activities shall include the use of recreational resources in the community when available and appropriate.” The HRA believes that many of the reviewed recreational activities were individual activities and not peer activities and also they were all in the facility. The HRA suggests that the

facility reviews their recreational activities to assure that these regulations are being followed.

- Policy says monthly documentation of recreation will be compiled and reviewed but, if the recreation activities are not consistently logged, then that part of the policy cannot be reviewed factually. The HRA suggests the facility consistently follow their own policy to ensure accurate review regarding review.

There appears to be some inconsistencies in the client's records that the HRA suggests are corrected. The second client listed in the report appears to be allergic to catfish, but this is not in the nutrition section, only in the allergy area. Also the third client has inconsistencies in likes and dislikes, for example the records reads that the client likes food that can be picked up with his hands and specifies hot dogs, hamburgers, French fries, toast, fruit and cheese, but another section states that the client likes spaghetti, pizza, cereal, hot dogs, peanut butter and the dislikes are most other foods than those mentioned. Finally the fourth client's record stated that he has a mechanical soft diet and also a general diet in the record.

Through reviewing documentation, the HRA found no conclusive evidence that the clients do not have activities while receiving services. The regulations require a policy and there is evidence that clients are working on puzzles, playing with toys, listening to story books and music, and watching television.

RESPONSE

Notice: The following page(s) contain the provider response. Due to technical requirements, some provider responses appear verbatim in retyped format.

HRA Case # 15-090-9014

EP!C Respite Care Center Plan of Correction

Complaint One: In order to insure that three balanced meals a day are served to our individuals we will use the menu provided by the EP!C dietitian. These menus will be posted on the refrigerator on a weekly basis. Family members can request copies of the menus in advance of their individual's visit. In addition, staff will be retrained on documenting the appropriate amount of intake per meal, per individual. The facility director will ensure that staff are documenting the intake on a daily basis.

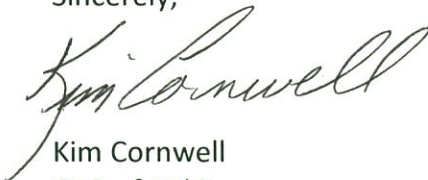
Complaint Two: In order to insure that appropriate activities are provided to individuals during a stay at the EP!C Respite Care Center, the director will post a monthly calendar with daily activities for first and second shifts during the week and all three shifts on the weekends. Out-of-facility activities will be provided to individuals whose stay is five or more days. The staff will be required to document activities for each individual on an activity log. We will use the log which is currently being used in the EP!C residential facilities. Staff will be trained on the use of the log as well as providing individuals activities outside the monthly calendar.

Upon discharge, each individual will receive a Discharge Summary stating, food intake, activities provided, behaviors exhibited, sleeping pattern, etc.

Submitted by: Keo E. Thompson

Please let us know if our plan of correction is approved.

Sincerely,



Kim Cornwell
CEO of EP!C