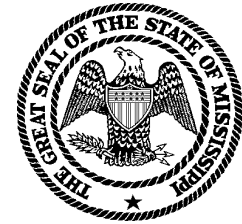


**Joint Legislative Committee on Performance  
Evaluation and Expenditure Review (PEER)**

Report to  
the Mississippi Legislature



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## **A Review of Selected Quality of Care Issues at Hudspeth Regional Center**

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The Hudspeth Regional Center is an intermediate care facility for the mentally retarded that is operated by the Department of Mental Health's Bureau of Mental Retardation. Hudspeth serves twenty-two counties in central Mississippi, providing twenty-four-hour care to clients residing on the center's campus and providing services to other clients through community services.

In response to a legislative request, the PEER Committee reviewed selected quality of care issues at Hudspeth Regional Center. The requesting legislator had expressed concern over allegations that Hudspeth's direct care staff was not providing adequate assistance to clients with physical care and personal hygiene, including bathing, grooming, and toileting, and that Hudspeth staff could not account for clients' clothing items.

PEER conducted two unannounced inspections at Hudspeth Regional Center's campus, observing the condition of clients' personal hygiene in their regular environment and observing the morning preparation of clients. No clients appeared deficient in personal hygiene. The direct care staff had a systematic approach to assisting clients with personal hygiene and clients were familiar with the routine. The center's staff has developed and implemented a training program that supports and prepares direct care staff in providing assistance with clients' personal hygiene.

Regarding staffing, according to records for the two days of PEER's inspections, as well as for two days on the preceding weekend, the center met or exceeded the staffing ratio required by federal regulations. Also, the staff has developed and implemented a system for identifying, investigating, and processing complaints related to alleged neglect, abuse, or mistreatment of Hudspeth clients. None of the complaints filed from January 1, 2004, through March 1, 2005, related to clients' personal hygiene.

PEER conducted inventory audits at three Hudspeth cottages and found that clothing and grooming/personal care items had been labeled with clients' names. However, Hudspeth staff could not provide a record of the location of clients' clothing that had reportedly been sent to the laundry. Also, the center's staff does not complete an annual audit of each client's belongings.

May 6, 2005

## **PEER: The Mississippi Legislature's Oversight Agency**

The Mississippi Legislature created the Joint Legislative Committee on Performance Evaluation and Expenditure Review (PEER Committee) by statute in 1973. A joint committee, the PEER Committee is composed of seven members of the House of Representatives appointed by the Speaker and seven members of the Senate appointed by the Lieutenant Governor. Appointments are made for four-year terms with one Senator and one Representative appointed from each of the U. S. Congressional Districts. Committee officers are elected by the membership with officers alternating annually between the two houses. All Committee actions by statute require a majority vote of four Representatives and four Senators voting in the affirmative.

Mississippi's constitution gives the Legislature broad power to conduct examinations and investigations. PEER is authorized by law to review any public entity, including contractors supported in whole or in part by public funds, and to address any issues that may require legislative action. PEER has statutory access to all state and local records and has subpoena power to compel testimony or the production of documents.

PEER provides a variety of services to the Legislature, including program evaluations, economy and efficiency reviews, financial audits, limited scope evaluations, fiscal notes, special investigations, briefings to individual legislators, testimony, and other governmental research and assistance. The Committee identifies inefficiency or ineffectiveness or a failure to accomplish legislative objectives, and makes recommendations for redefinition, redirection, redistribution and/or restructuring of Mississippi government. As directed by and subject to the prior approval of the PEER Committee, the Committee's professional staff executes audit and evaluation projects obtaining information and developing options for consideration by the Committee. The PEER Committee releases reports to the Legislature, Governor, Lieutenant Governor, and the agency examined.

The Committee assigns top priority to written requests from individual legislators and legislative committees. The Committee also considers PEER staff proposals and written requests from state officials and others.

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May 6, 2005

Honorable Haley Barbour, Governor  
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Honorable Billy McCoy, Speaker of the House  
Members of the Mississippi State Legislature

On May 6, 2005, the PEER Committee authorized release of the report entitled **A Review of Selected Quality of Care Issues at Hudspeth Regional Center.**

A handwritten signature in cursive script that reads "Dirk D. Dedeaux".

Representative Dirk Dedeaux, Chair

**This report does not recommend increased funding or additional staff.**



*Table of Contents*

Letter of Transmittal ..... i

List of Exhibits ..... v

Executive Summary ..... vii

Introduction ..... 1

    Authority ..... 1

    Scope and Purpose..... 1

    Scope Limitation..... 2

    Method ..... 2

Background ..... 3

    Creation/Role of the Hudspeth Regional Center ..... 3

    Description of Hudspeth Regional Center..... 3

    Admission to Hudspeth Regional Center ..... 5

    Entities Providing Oversight of Hudspeth Regional Center ..... 5

Services Provided by Hudspeth Regional Center and the  
Role of Direct Care Staff in the Campus Program ..... 7

    Programs and Services Provided by Hudspeth Regional Center ..... 7

    The Role of Direct Care Staff in the Campus Program..... 9

Does Hudspeth Regional Center provide for and monitor assistance  
with clients’ daily personal hygiene? ..... 11

    PEER’s Observation of Clients ..... 12

    Training Requirements and Programs for Hudspeth Staff..... 13

    Staff-to-Client Ratio..... 17

    Handling of Complaints ..... 19

Has Hudspeth Regional Center implemented an adequate system of  
inventory control over clients’ clothing and personal belongings? ..... 21

Recommendation ..... 24

***Table of Contents (continued)***

Appendix: Checklist for March 7, 2005, PEER Inspection of  
Hudspeth Clients' Personal Hygiene .....25

Agency Response .....27

*List of Exhibits*

1. Hudspeth Regional Center Service Area and Locations of  
Other Regional Mental Retardation Centers ..... 5





# A Review of Selected Quality of Care Issues at Hudspeth Regional Center

## Executive Summary

### Introduction

In response to a legislative request, the PEER Committee reviewed selected quality of care issues (specifically, clients' personal hygiene and inventory controls over clients' personal belongings) at Hudspeth Regional Center. PEER conducted the review pursuant to the authority granted by MISS. CODE ANN. Section 5-3-57 et seq. (1972).

The requesting legislator expressed concern over allegations that Hudspeth Regional Center's direct care staff were not providing adequate assistance to clients with physical care and personal hygiene, including bathing, grooming, and toileting, and that Hudspeth staff could not account for clients' clothing items.

In response to this request, PEER focused its review on:

- determining, through unannounced inspections and through the use of an evaluation instrument, the condition of Hudspeth clients' personal hygiene and the contribution of direct care staff to clients' personal hygiene;
- identifying training requirements for Hudspeth's direct care staff;
- determining whether Hudspeth Regional Center adheres to staffing ratios required by the Center for Medicare and Medicaid Services (CMS) for intermediate care facilities for the mentally retarded;
- identifying procedures utilized by Hudspeth Regional Center for handling complaints related to alleged client neglect; and,
- determining whether Hudspeth's staff utilize inventory controls over clients' personal items.

Because the complainant alleged that the problems with personal hygiene and inventory control were occurring on the campus of Hudspeth Regional Center, PEER limited its observations to the center. Also, while PEER only observed clients on two occasions, PEER staff reinforced assurance of the level of care being provided to Hudspeth clients by reviewing policies and procedures for care of residents, direct care worker

staffing levels, training for direct care staff, complaint handling, and inventory control.

## Background

The Hudspeth Regional Center at Whitfield is an intermediate care facility for the mentally retarded (ICF/MR), one of five such facilities operated in Mississippi by the State Department of Mental Health's Bureau of Mental Retardation. Hudspeth serves twenty-two counties in central Mississippi and provides twenty-four-hour care to 281 clients residing on the center's campus and provides services to another 1,430 clients through community services.

As is the case at other ICF/MR centers, direct care staff have the daily responsibility to manage, supervise, and provide direct care to individuals in their residential living units. According to federal regulations, direct care staff may also include professional staff such as nurses, social workers, and other support staff, if their primary assigned daily function is to provide direct care of clients' daily needs.<sup>1</sup>

Hudspeth's direct care staff have a significant impact on the daily personal hygiene of the clients who reside on the grounds as part of the Campus Program. Direct care staff also have contact with clients' grooming and clothing items through daily interaction with clients.

## Conclusions

**Does Hudspeth Regional Center provide for and monitor assistance with clients' daily personal hygiene?**

***Yes, based on PEER's observations of Hudspeth's clients in their daily environment, the direct care staff's preparation of clients for daily activities, and a review of the center's policies and procedures for direct care staff training, staffing ratios, and complaint handling.***

PEER conducted two unannounced inspections at Hudspeth Regional Center's Campus Program. PEER observed the condition of Hudspeth clients' personal hygiene in their regular environment at the center on March 7, 2005. PEER also observed the morning preparation (e.g., bathing, grooming, dressing) of Hudspeth clients on March 9, 2005, to determine the contribution of Hudspeth's direct care staff and other staff to clients' personal hygiene.

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<sup>1</sup> 42 CFR §483.420 (c) (2)

Based on the above inspections and reviews, PEER concluded that the Hudspeth Regional Center provides the proper assistance with and monitoring of clients' daily personal hygiene. Hudspeth's policies and procedures prescribe a planned daily routine for direct care staff in assisting clients with personal hygiene.

Regarding training, Hudspeth has developed and implemented a training program that supports and prepares direct care staff in providing assistance with clients' personal hygiene. PEER verified that Hudspeth Regional Center provided the federal- and state-mandated courses for its staff multiple times in FY 2004. Also, within PEER's sample of twenty direct care staff, all workers had completed the new employee orientation program and seven of the twenty direct care staff who completed orientation prior to PEER's review period had completed an average of three hours per month of additional classroom training.

Regarding staffing, according to staffing records for the two days of PEER's inspections, as well as two days on the preceding weekend, the center met or exceeded the recommended staffing ratio of 1 direct care staff employee to 3.2 clients over a twenty-four-hour period.

Hudspeth Regional Center has developed and implemented a system for identifying, investigating, and processing complaints related to alleged neglect, abuse, or mistreatment of Hudspeth clients. None of the complaints filed from January 1, 2004, through March 1, 2005, related to clients' personal hygiene.

**Has Hudspeth Regional Center implemented an adequate system of inventory control over clients' clothing and personal belongings?**

*Although Hudspeth Regional Center staff label clients' clothing and grooming/personal care items, the staff could not provide a record of the location of clients' clothing that was not in the clients' closets on the dates of PEER's inventory audits.*

Federal regulations require intermediate care facilities to ensure that clients have the right to retain and use appropriate personal possessions and clothing and to ensure that each client is dressed in his or her own clothing each day.

PEER conducted clothing inventory audits at three Hudspeth cottages on March 9 and April 11. On those two dates, PEER found that clothing and grooming/personal care items had been labeled with clients' names. However, on those dates Hudspeth staff could not provide a record of the location of client's clothing that had reportedly been sent to the laundry.

Additionally, PEER found that Hudspeth does not complete an annual audit of each client's belongings to compare the

items in the client's closet or in storage to the master record of inventory. Since federal regulations state that clients have the right to retain and use appropriate personal possessions, it is important for Hudspeth Regional Center to have a system in place to protect client's personal belongings. PEER acknowledges that taking frequent inventories of clients' belongings and recording items sent to the laundry on an individual client level must understandably be assigned a lower priority than the primary task of caring for Hudspeth's clients. However, Hudspeth's staff could improve the current inventory control procedures to provide better protection of clients' personal belongings.

## Recommendation

Hudspeth Regional Center should require the Clothing Coordinator to complete an annual audit of each client's belongings to ensure accountability for all items included on the master record of inventory. This would include all items in the client's closet, seasonal items that might be in storage, items given to the seamstress for repair, and items sent to the laundry. The Clothing Coordinator could audit a specific number of clients each month to ensure that each client's belongings are audited annually.

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# A Review of Selected Quality of Care Issues at Hudspeth Regional Center

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## Introduction

### Authority

In response to a legislative request, the PEER Committee reviewed selected quality of care issues (specifically, clients' personal hygiene and inventory controls over clients' personal belongings) at Hudspeth Regional Center. PEER conducted the review pursuant to the authority granted by MISS. CODE ANN. Section 5-3-57 et seq. (1972).

### Scope and Purpose

The requesting legislator expressed concern over allegations that Hudspeth Regional Center's direct care staff were not providing adequate assistance to clients with personal skills such as bathing, grooming, and toileting and that Hudspeth staff could not account for clients' clothing items.

In response to this request, PEER focused its review on:

- determining, through unannounced inspections and through the use of an evaluation instrument, the condition of Hudspeth clients' personal hygiene and the contribution of direct care staff to clients' personal hygiene;
- identifying training requirements for Hudspeth's direct care staff;
- determining whether Hudspeth Regional Center adheres to staffing ratios required by the Center for Medicare and Medicaid Services (CMS) for intermediate care facilities for the mentally retarded;
- identifying procedures utilized by Hudspeth Regional Center for handling complaints related to alleged client neglect; and,
- determining whether Hudspeth's staff utilize inventory controls over clients' personal items.

## Scope Limitation

Because the complainant alleged that the problems with clients' personal hygiene and inventory control were occurring on the campus of Hudspeth Regional Center, PEER limited its observations to the center. Also, while PEER only observed clients on two occasions, PEER staff reinforced assurance of the level of care being provided to Hudspeth clients by reviewing policies and procedures for care of residents, direct care worker staffing levels, training for direct care staff, complaint handling, and inventory control.

## Method

In conducting this review, PEER:

- reviewed relevant sections of state law, federal law, and Hudspeth Regional Center's policies and procedures regarding training for direct care staff and complaint handling;
- interviewed selected Hudspeth Regional Center personnel, Mississippi Department of Health staff, and Mississippi Attorney General's Office staff;
- reviewed selected Hudspeth Regional Center staff sign-in sheets, training records, complaints, and inventory documents;
- examined audit reports completed by the Mississippi Department of Health and a summary of complaints investigated by the Mississippi Protection and Advocacy System, Inc. (see page 6 for a discussion of the functions of this body);
- conducted two unannounced inspections of the Hudspeth Regional Center on March 7, 2005, and March 9, 2005;
  - In the first inspection, PEER staff utilized evaluation instruments (i.e., checklists), on which they were pre-trained, to assess the personal hygiene of Hudspeth clients in their regular environment at the center.
  - In the second inspection, PEER observed the morning preparation (e.g., bathing, grooming, dressing) of Hudspeth clients to determine the contribution of Hudspeth's direct care staff to clients' personal hygiene.
- reviewed Hudspeth's policy regarding direct care staffs' daily routine in assisting clients with personal hygiene.

---

# Background

## Creation/Role of the Hudspeth Regional Center

**Hudspeth Regional Center is one of Mississippi's five intermediate care facilities for the mentally retarded.**

MISS. CODE ANN. §§ 41-19-231 through 245 (1972) created a center in central Mississippi in 1974 for the care and treatment of the mentally retarded, known as the Hudspeth Regional Center. Hudspeth is an intermediate care facility for the mentally retarded, or ICF/MR.

MISS. CODE ANN. §41-7-173 (h) (viii) (1972) states that the purpose of an ICF/MR is to provide "health or rehabilitative services in a planned program of activities to the mentally retarded, also including, but not limited to, cerebral palsy and other conditions covered by the Federal Developmentally Disabled Assistance and Bill of Rights Act." Mississippi has four other comprehensive regional facilities for persons with developmental disabilities/mental retardation. All five centers are operated by the Department of Mental Health's Bureau of Mental Retardation and serve a specific geographic region of the state. Additionally, Boswell Regional Center and Ellisville State School also provide specific services to the entire state.

Hudspeth Regional Center serves twenty-two counties in central Mississippi (see Exhibit, page 4, for a map showing Hudspeth's service area).

## Description of Hudspeth Regional Center

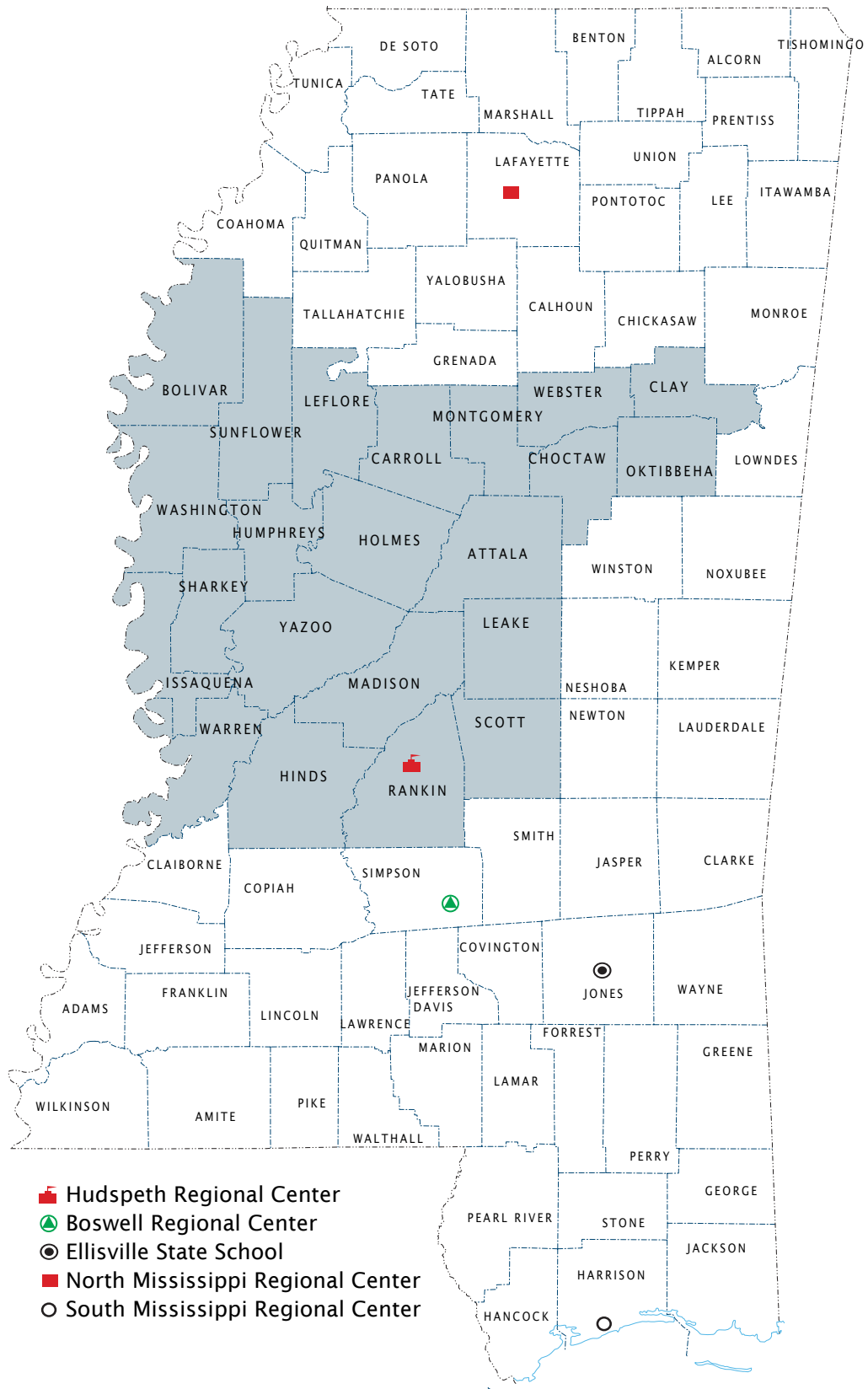
**As of March 1, 2005, Hudspeth served 281 clients residing on the center's campus and provided services to another 1,430 clients through the Community Services Division.**

Hudspeth Regional Center is located on 120 acres on the site of the Mississippi State Hospital at Whitfield in Rankin County. Hudspeth opened in October 1962 as an annex of the state hospital and initially housed approximately 900 clients.

As of March 1, 2005, Hudspeth provided twenty-four-hour care to 281 clients residing on the center's campus and provided services to another 1,430 clients through the Community Services Division. (See discussion on page 7 of community services).

Hudspeth's website states that its mission is to provide excellence in individualized services for persons with developmental disabilities. It reports that it attempts to advance personal growth and productivity by offering opportunities for choice, achievement, and success in all aspects of living.

## Exhibit: Hudspeth Regional Center Service Area and Locations of Other Regional Mental Retardation Centers



SOURCE: Department of Mental Health web site.



## Admission to Hudspeth Regional Center

**Services provided by the Hudspeth Regional Center are primarily for individuals five years of age or older.**

Services provided by the Hudspeth Regional Center are primarily for individuals with severe and profound mental retardation who are five years of age or older and reside within the center's service area.

MISS. CODE ANN. §41-19-237 (1972) describes the criteria for admission to Hudspeth Regional Center:

1. The individual's parent or guardian has resided in the state at least one year before the date of admission;  
*and,*
2. The individual is at least five years of age and is so mentally retarded that he is incapable of managing himself or his affairs, or he is retarded to the extent that special care, training and education provided at the center will enable him to better function in society;  
*or,*

The individual is committed to the center by the chancery court; *or,*

The individual is under five years of age and is approved for admission by the Board of Mental Health, upon the recommendation of the director, because of having an exceptional handicap.

## Entities Providing Oversight of Hudspeth Regional Center

### Department of Mental Health

The Department of Mental Health's Bureau of Mental Retardation supervises the five regional facilities for persons with developmental disabilities and mental retardation. Each facility is supervised by a director who reports to the Chief of the Bureau of Mental Retardation and is ultimately accountable to the Board of Mental Health.

### Centers for Medicare and Medicaid Services

The federal government's Centers for Medicare and Medicaid Services (CMS) require the State Department of Health to conduct an annual survey of intermediate care facilities (see following section). According to 42 CFR §442.101 (e), failure to meet one or more of the applicable conditions of participation in the Medicaid program (e.g., management of the intermediate care facility, client protection, staffing, or health care services) is cause for

termination or non-renewal of the ICF/MR provider agreement. Without a provider agreement, the facility cannot receive reimbursement for services provided to Medicaid recipients.

## **Department of Health**

The Department of Health's Division of Health Facilities Licensure and Certification certifies health care facilities (including Hudspeth) for participation in Medicare and/or Medicaid programs, in response to requirements of the Centers for Medicare and Medicaid Services (see previous section). This division also licenses hospitals, nursing homes, personal care homes, home health agencies, ambulatory surgical facilities, birthing centers, abortion facilities, and hospices.

The division conducts annual surveys of health facilities for CMS, as well as follow-up visits to verify implementation of corrective action. The division's surveyors investigate complaints and take appropriate action.

## **Mississippi Protection and Advocacy Systems**

Mississippi Protection and Advocacy Systems, Inc., is a congressionally mandated disability rights agency with oversight responsibility for intermediate care facilities for the mentally retarded in Mississippi. This entity uses authority granted to it by the Developmental Disabilities Assistance and Bill of Rights Act to provide legal representation and other advocacy services to people with disabilities. Mississippi Protection and Advocacy System monitors, investigates, and attempts to remedy any adverse conditions identified in facilities such as Hudspeth Regional Center and ensures full access to inclusive educational programs, financial entitlements, health care, accessible housing, and productive employment opportunities.

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# Services Provided by Hudspeth Regional Center and the Role of Direct Care Staff in the Campus Program

## Programs and Services Provided by Hudspeth Regional Center

Hudspeth Regional Center offers programs and services to children and adults living in the community and to those individuals enrolled in the center's residential program.

The two main program areas are Community Services and the Campus Program. Within the Campus Program, Hudspeth provides direct care, educational, and social services.

### Community Services

**Clients receiving community services either reside at their own homes or in group homes.**

This program provides opportunities for persons with developmental disabilities to lead productive lives in a community setting that enables them to make choices and decisions about their lives. In this program, clients either reside at their own homes or in group homes.

#### *Clients Residing in Their Own Homes*

The program utilizes campus-based staff and community resources to assist clients who reside at home and their families in making decisions about jobs, training, and creating relationships with teachers, friends, and family members.

#### *Clients Residing in Group Homes*

**Hudspeth Regional Center currently serves group homes in seven locations in its service area.**

The group home program provides comprehensive, twenty-four-hour care, treatment, and habitation in a community-based residence. Clients who reside in group homes receive live-in supervision from group home managers who are responsible for daily program supervision and activities designed to promote clients' independence as community residents.

Hudspeth currently serves group homes in seven locations throughout Hudspeth Regional Center's service area. These group homes are located in Brandon, Kilmichael,

Kosciusko, Louisville, Meridian, Morton, and in Rankin County (in an unincorporated area that is actually located in the rear of the Hudspeth campus).

## Campus Program

**Each client in the Campus Program participates in an individualized plan of care designed to address that person's strengths and needs.**

The Campus Program provides twenty-four-hour, seven days per week of habilitative, therapeutic, and medical care and treatment for mentally retarded individuals. Each client participates in an individualized plan of care designed to address that person's strengths and needs.

Campus Program services depend on the individual client and include, but are not limited to:

### ***Direct Care Services***

This program provides around-the clock residential and habilitative care. This component provides services for nine residential cottages located on the campus of Hudspeth.

Individuals residing in the cottages are to receive continuous programs of active treatment to promote optimal independence. The "Duties of Direct Care Staff" section on page 10 describes in detail the types of personal services that direct care staff provide to clients in the Campus Program.

### ***Educational Services***

All clients in the Campus Program receive educational services supervised by teachers with special educational licensure, teacher aides, and other support staff. The Campus Program's educational services are:

- *Developmental Programming*—This service focuses on developing daily living (including personal grooming and care), self-help, communication, and pre-vocational skills.
- *Hudspeth Industries*—This is a work activity center that focuses on vocational training and money management skills through the use of contractual work.
- *Local School Attendance*—Through an agreement with the Rankin County Schools, Hudspeth's school-aged children attend schools within the district.

Hudspeth's educational program for clients under the age of twenty-one is licensed as a nonpublic school program

by the Mississippi Department of Education and is accredited by the Southern Association of Colleges and Schools Commission on Elementary and Middle Schools and the Commission on International and Trans-Regional Accreditation.<sup>2</sup>

### ***Social Services***

Hudspeth's licensed social workers provide the following social services to clients:

- serve as client advocate regarding client rights;
- maintain and promote contact between the family and the center;
- maintain and promote contact between the family and the client;
- assist clients with shopping for clothing and other personal items; and,
- complete the admission process in order to help make the transition from the family to the center as easy as possible.

## **The Role of Direct Care Staff in the Campus Program**

**Federal regulations define *direct care staff* of intermediate care facilities as those personnel whose daily responsibility is to manage, supervise, and provide direct care to individuals in their residential living units.**

Federal regulations define direct care staff of intermediate care facilities as those personnel whose daily responsibility is to manage, supervise, and provide direct care to individuals in their residential living units, which could include professional staff such as nurses, social workers and other support staff, if their primary assigned daily function is to provide direct care of clients' daily needs.<sup>3</sup>

Direct care staff have a significant impact on the daily condition of personal hygiene of the clients who reside on the Hudspeth grounds as part of the Campus Program. They also have contact with the clients' personal items through their interaction with clients on a daily basis.

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<sup>2</sup> The Southern Association of Colleges and Schools accredits educational institutions through the use of academic standards that provide guidance and support to develop and maintain quality educational programs. The Commission on International and Trans-Regional Accreditation also provides accreditation protocols and standards for schools.

<sup>3</sup> Title 42 CFR §483.420 (c)(2)

## Hiring of and Qualifications for Direct Care Staff

**In addition to the orientation training required of all new employees, Hudspeth Regional Center requires each direct care staff to attend a one-time, five-day session of training designed specifically for direct care staff.**

Hudspeth Regional Center hires individuals as direct care worker trainees. These individuals must have graduated from a standard four-year high school or have received a general equivalency diploma; or they must have completed the eighth grade and have four years of experience.

Once direct care worker trainees complete the required classroom and on-the-job training (see following section and “Training Requirements and Programs for Hudspeth Staff” section on page 13 for further discussion of training), they are designated as direct care workers.

The center has created a career ladder for direct care workers that allows them to become direct care workers advanced, direct care alternate supervisors, and direct care supervisors if they meet the criteria, complete the required training, and if positions and funding are available.

## Training Requirements for Direct Care Staff

In addition to the orientation training required of all new employees, Hudspeth Regional Center requires each direct care staff to attend a one-time, five-day session of training designed specifically for direct care staff. See page 15 for a description of this training program.

## Duties of Direct Care Staff

The Campus Program’s Direct Care Services staff works three eight-hour shifts at the cottages. According to the State Personnel Board’s job description for direct care workers in mental health facilities, these workers are to assist clients in all areas of physical care and assume total responsibility for the personal hygiene of clients who are unable to perform such tasks independently.

As a condition of Medicaid funding to intermediate care facilities for the mentally retarded, assistance to clients must include physical care and hygiene. According to the 42 CFR §483.440 (c)(6)(iii), the personal skills included in the physical care and hygiene of clients include, but are not limited to, toileting, bathing, dressing, grooming, and brushing of teeth. Other duties include general housekeeping assignments, participating in social and recreational activities for the clients, and writing non-technical reports on client behavior and activity.

---

## Does Hudspeth Regional Center provide for and monitor assistance with clients' daily personal hygiene?

**Yes, based on PEER's observations of Hudspeth's clients in their daily environment, the direct care staff's preparation of clients for daily activities, and a review of the center's policies and procedures for direct care staff training, staffing ratios, and complaint handling.**

As noted on page 2, PEER conducted two unannounced inspections at Hudspeth Regional Center's Campus Program. On March 7, 2005, PEER observed the condition of Hudspeth clients' personal hygiene in their regular environment at the center. On March 9, 2005, PEER also observed the morning preparation (e.g., bathing, grooming, dressing) of Hudspeth clients, to determine the contribution of Hudspeth's direct care staff and other staff to clients' personal hygiene.

In addition, PEER determined that Hudspeth's policies and procedures prescribe a planned daily routine for direct care staff in assisting clients with personal hygiene. PEER reviewed records to determine whether a training system is in place to educate direct care staff regarding the proper grooming and daily personal care of clients.

Based on the above inspections and reviews, PEER concluded that the Hudspeth Regional Center provides the proper assistance with and monitoring of clients' daily personal hygiene.

Regarding training, Hudspeth has developed and implemented a training program that supports and prepares direct care staff in providing assistance with clients' personal hygiene. According to staffing records for the two days of PEER's inspections, as well as two days on the preceding weekend, the center met or exceeded the recommended staffing ratio of 1 direct care staff employee to 3.2 clients over a twenty-four-hour period.

PEER also found that Hudspeth Regional Center has developed and implemented a system for identifying, investigating, and processing complaints related to alleged neglect, abuse, or mistreatment of Hudspeth clients. None of the complaints filed between January 1, 2004, and March 1, 2005, related to clients' personal hygiene.

## PEER's Observation of Clients

***On March 7, 2005, during an unannounced inspection of classrooms, cottages, and workshops at Hudspeth Regional Center, PEER concluded that no Hudspeth clients appeared deficient in personal hygiene.***

On Monday, March 7, 2005 at 9:30 a.m., seven PEER staff members conducted an unannounced inspection at Hudspeth Regional Center. This unannounced inspection included inspections of classrooms, cottages, and workshops (Hudspeth Industries' main workshop, Signature Works, and Azalea Cottage workshop). The classrooms, cottages, and workshops provide services for clients of various levels of cognitive and physical abilities. PEER selected classrooms for inspection based on these various levels of abilities in order to detect any problems that might be associated with each level. PEER observed clients in seven of nine cottages and inspected two additional buildings that provide educational services only.

PEER selected classrooms for inspection based on the various levels of abilities in order to detect any problems that might be associated with each level.

PEER observed clients in these settings and inspected their personal appearance to ensure that clients' personal hygiene needs were being met (see Appendix, page 25, for a copy of the inspection checklist PEER used). PEER visually inspected clients' clothing to ensure that it was clean and not in need of repair and determined whether clothing was appropriate for the current season. PEER also visually inspected clients' skin, fingernails, ears, and teeth, when readily visible, to determine whether clients were receiving assistance with personal grooming. Many clients wore long-sleeved shirts and pants, which was appropriate for the weather on this date.

PEER observed one client with an irritated patch of skin on the side of the nose and back of the hand, but a review of medical records reflected that the direct care staff was aware of this and that the client was receiving medical treatment. PEER also observed several clients whose fingernails should be trimmed to ensure that they do not cause harm to themselves or others and one client with symptoms of nail fungus. However, PEER concluded that no Hudspeth clients had been neglected in assistance with personal hygiene.

***On March 9, 2005, during an unannounced inspection at selected cottages at Hudspeth Regional Center, PEER concluded that the center's direct care staff had a systematic approach to assisting clients with personal hygiene and that clients were familiar with the routine.***

PEER conducted a second unannounced inspection on March 9, 2005, at 5:30 a. m. to observe the activities of the end of Shift C (the evening shift) and the beginning of Shift A (the morning shift) at Hudspeth Regional Center. PEER staff observed the morning activities at Dogwood Cottage, Camellia Cottage, and Azalea Cottage. These three



**Direct care staff had a systematic approach to morning preparation of clients. The direct care staff and other staff (e.g., recreation aides, psychologists) worked as a team to accomplish the tasks associated with the morning routine of each cottage.**

cottages have clients with various levels of cognitive and physical abilities.

In each cottage, PEER observed the arrival and departure of direct care staff as well as the actions of the direct care staff as they prepared the clients for their daily activities. PEER did not observe the bathing and toileting of clients due to federal regulations addressing confidentiality and clients' privacy rights.

Direct care staff had a systematic approach to bathing, dressing, grooming, feeding, and brushing teeth of clients. The direct care staff and other staff (e.g., recreation aides, psychologists) worked as a team to accomplish the tasks associated with the morning routine of each cottage. PEER observed that clients were familiar with the routine.

## **Training Requirements and Programs for Hudspeth Staff**

*Hudspeth Regional Center has developed and implemented a training program that supports and prepares direct care staff in providing assistance with clients' personal hygiene.*

### **Training Requirements for Hudspeth Staff**

#### ***Federal Training Requirements***

The Centers for Medicare and Medicaid Services (CMS) State Operations Manual for intermediate care facilities for the mentally retarded states that staff should receive training in how to care for health needs and conditions, personal hygiene, health maintenance, and disease prevention.

Additionally, the Federal Code of Regulations 42 CFR §483.430 (e) (1-4) states the following regarding training in intermediate care facilities for the mentally retarded:

- a center must provide each employee with initial and continuing training that enables the employee to perform his or her duties effectively, efficiently, and competently;
- employees who work with clients must receive training that focuses on skills and competencies directed toward the clients' developmental, behavioral, and health needs;
- staff must be able to demonstrate the skills and techniques necessary to administer intervention to manage the inappropriate behavior of clients; and,
- staff must be able to demonstrate the skills and techniques necessary to care for each client for whom they are responsible.

CMS requires specific annual training for all Hudspeth employees on the following topics:

- Confidentiality and the Health Insurance Portability and Accountability Act of 1996;
- Client Rights;
- Client Abuse, Reporting and the Vulnerable Adults Act;
- Safety Training in Accident Prevention;
- Signs and Symptoms of Illness and First Aid;
- Infection Control and Universal Precautions;
- Fire Safety and Emergency Disaster Plans; and,
- Drug-Free Workplace.

### ***State Training Requirements***

In addition to the annual training required by CMS for all Hudspeth Center employees, the Department of Mental Health requires the following training for Hudspeth staff:

- five days of orientation (one-time), required for all new employees;
- five days of direct care worker training (one-time); and,
- annual training on management of aggressive behavior.

The following section includes brief discussions of these training programs.

Hudspeth also provides departmental training and staff development, discussed on pages 15 and 16.

## **Training Programs Provided by Hudspeth Center**

*PEER verified that Hudspeth Regional Center provided the federal- and state-mandated courses for its staff multiple times in FY 2004.*

### ***Federally Required Training Programs***

As noted above, CMS requires annual training on specified topics for staff at intermediate care facilities for the mentally retarded (see list of topics in previous section).

PEER reviewed a summary of FY 2004 training provided to Hudspeth Regional Center staff and verified that the federally mandated courses were provided multiple times in FY 2004.

### ***State-Required Training Programs***

PEER reviewed a summary of FY 2004 training provided to Hudspeth Regional Center staff and verified that the state-mandated courses were provided multiple times in FY 2004. These courses consisted of the following:

- *Techniques for Management of Aggressive Behavior*--The Department of Mental Health requires all Hudspeth employees directly involved with client care to be re-certified annually in techniques for management of aggressive behavior. This is a course that the agency has developed that utilizes behavior management and preventive techniques, as well as the practice of physical techniques, to be used when managing aggressive or hostile individuals. The agency requires that employees demonstrate proficiency in at least ninety percent of the techniques in order to be certified.
- *New Employee Orientation*--Hudspeth requires one-time orientation of new employees. The center provides this orientation every month during the first full week of the month. The orientation consists of forty hours of classroom instruction and includes, but is not limited to, basic information about the center, personnel policies and procedures, confidentiality requirements, CPR training, basic infection control precautions, and instruction on clients' rights.
- *Direct Care Staff Training*--In addition to new employee orientation, Hudspeth Regional Center requires each direct care staff to attend once a five-day session of training designed specifically for direct care staff. These five days include two days in the classroom and three days of on-the-job training under the supervision of cottage direct care worker supervisors.

The topics covered during these five additional days include, but are not limited to, techniques for the management of aggressive behavior, personal care and responsibility, tooth brushing and oral care, clothing procedures, and beauty and barber shop procedures.

### ***Departmental In-Service Training***

Each department at Hudspeth Regional Center participates in departmental in-service training. For example, direct care staff receive departmental training in oral hygiene care, feeding techniques, lifting and transferring, adaptive equipment, and other topics as deemed necessary

throughout the year. According to the Staff Development policies and procedures manual, the Staff Development department assists in conducting, scheduling, or obtaining speakers for departmental specialized training.

### ***Professional Development***

According to the Staff Development department's policies and procedures manual and an interview with the Staff Development Director, Hudspeth Regional Center's department directors may request professional development workshops for their staff. Hudspeth staff may also request to attend an off-site workshop, conference, or seminar. All requests for professional development must be approved by Hudspeth Regional Center's Director and Business Director.

Professional development topics scheduled for training for FY 2005 include Communicating with Individuals with Disabilities, Professional Ethics, and The Aging Process and Alzheimer's Disease.

### **Hudspeth Staff's Completion of Training**

*Within PEER's sample of twenty direct care staff, all workers had completed the new employee orientation program and seven of the twenty direct care staff who completed orientation prior to PEER's review period had completed an average of three hours per month of additional classroom training.*

Hudspeth employs a total of approximately 450 direct care staff. PEER randomly selected training records of twenty direct care staff, selecting workers from each of Hudspeth's three shifts who were on duty during the period of PEER's review. Hudspeth training records show that each of the direct care staff included in the sample had completed both the classroom and the on-site components of the facility's new employee orientation program.

PEER also reviewed classroom training records for the twenty employees included in the sample for the period January 1, 2004, through April 11, 2005, to determine whether they had completed additional training after new employee orientation, including departmental training or professional development. Seven of the twenty direct care staff included in the sample had completed new employee orientation prior to January 1, 2004. These seven direct care staff completed an average of three classroom training hours per month, ranging from two hours to five hours of classroom training each month. Examples of classroom training courses that the workers completed include: grooming/care for clients, infection/universal

precautions, oral hygiene, and personal care and responsibility.

## Staff-to-Client Ratio

***PEER reviewed staffing records for four days at Hudspeth Regional Center and found that on those days, the center met or exceeded the recommended staffing ratio of 1 direct care staff employee to 3.2 clients over a twenty-four-hour period.***

PEER reviewed the staffing records for March 7, 2005, and March 9, 2005, to determine whether the appropriate number of direct care staff employees were present when PEER conducted its unannounced inspections. PEER also reviewed the staffing records for the Saturday and Sunday preceding the first unannounced inspection (March 5 and 6, 2005) because the requestor reported allegations that clients' personal hygiene problems were prevalent on Mondays.

*Federal regulations require a minimum staffing ratio of 1 direct care staff employee to 3.2 clients over a twenty-four-hour period.*

42 CFR §483.420 (d)(3) requires that direct care staff must be provided according to minimum ratios of direct care staff to clients. As noted on page 9, federal regulations define *direct care staff* as those personnel whose daily responsibility is to manage, supervise, and provide direct care to individuals in their residential living units. This could include professional staff such as nurses, social workers, and other support staff if their primary assigned daily function is to provide direct care of clients' daily needs. The minimum ratio, according to the CMS State Operations Manual, indicates the minimum number of direct care staff that must be present and on-duty, twenty-four hours a day, 365 days per year, for each living unit.

The Centers for Medicare and Medicaid Services provides the following example in its state operations manual:

*...to calculate the minimum number of living unit staff that must be present and on duty in a discrete living unit serving 16 individuals with multiple disabilities: divide the number of individuals [which is] "16" by the number corresponding to the regulation [which is] "3.2", [and] the result equals "5." Therefore, the facility must determine how many staff it must hire to ensure that at least 5 staff will be able to be present and on duty during the 24 hour period in which those individuals are present.*

The CMS state operations manual also describes how these five staff should be allocated over a twenty-four-hour period:

*...there should be present and on duty every day of the year: "one direct care staff for each eight individuals on the first shift (1:8), one direct care staff for each eight individuals on the second shift (1:8), and one direct care staff for each 16 individuals on the third shift (1:16). Therefore, there are five (5) direct care staff present and on duty for each twenty-four hour day, for each 16 individuals.*

For residential living units serving severely and profoundly retarded clients, such as Hudspeth, the direct care staff-to-client ratio is 1 to 3.2.

The 42 CFR §483.430(d)(1) states that intermediate care facilities for the mentally retarded must provide *sufficient* direct care staff to manage and supervise clients. The Centers for Medicare and Medicaid Services (CMS) State Operations Manual defines *sufficient* as the number of staff over and above the ratios specified in 42 CFR §483.430 (d)(3), necessary to implement active treatment as required by the individual's treatment needs.

*Dogwood Cottage, Camellia Cottage, and Azalea Cottage met or exceeded the recommended staffing ratios for March 5, 2005, through March 7, 2005, and for March 9, 2005.*

PEER staff reviewed Hudspeth Regional Center's daily time sheets and the shift coverage logs for March 5-7 and March 9, 2005, to determine whether Hudspeth Regional Center was adhering to the federal requirements for client to staff ratios. These staffing documents contained information for each of the three eight-hour shifts for each of the cottages inspected, including the number of staff scheduled to work, the number of staff absent from work and reason for their absence, the number of staff called back to work multiple shifts (overtime), the names and number of staff pulled from other cottages to provide coverage for cottages without adequate staff, and the total number of staff actually working at each cottage.

PEER staff compared the required staff-to-client ratio to the actual staff-to-client ratio for each of the four days reviewed and found that each cottage met or exceeded the recommended minimum staff-to-client ratio for facilities with severely and profoundly mentally retarded individuals. For example, twenty-five clients resided in Dogwood Cottage on March 7 and sixteen direct care staff were present in this cottage over a twenty-four-hour period, resulting in a ratio of 1 direct care staff to 1.6 clients per twenty-four-hour period, which exceeds the required ratio of 1 direct care staff to 3.2 clients over a twenty-four-hour period.

## Handling of Complaints

*Hudspeth Regional Center has developed and implemented a system for identifying, investigating, and processing complaints related to alleged neglect, abuse, or mistreatment of Hudspeth clients. None of the complaints filed from January 1, 2004, through March 1, 2005, related to clients' personal hygiene.*

### Federal Requirements for Handling Complaints

The Code of Federal Regulations 42 CFR §483.420 (a)(3) and the Centers for Medicare and Medicaid Services (CMS) State Operations Manual require that intermediate care facilities should ensure that:

- individuals are taught and encouraged to claim and exercise their rights;
- a personal advocate or legally sanctioned surrogate decision-maker has been identified and is encouraged to assist/support the individual in exercising these rights; and,
- individuals and their representatives are aware of how to file a complaint and are free from reprisal when they do so.

Federal regulations also require intermediate care facilities for the mentally retarded to ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported, thoroughly investigated, and that the results of investigations are reported in accordance with state law.

### State Requirements for Handling Complaints

In Mississippi, the Vulnerable Adults Act (Title 43, Chapter 47, MISS. CODE ANN. [1972]) requires that all abuse, neglect or exploitation shall be reported in person or by telephone within twenty-four hours to the State Department of Health and the Medicaid Fraud Control Unit of the Attorney General's Office and in writing to these same entities within seventy-two hours of discovery.

### Hudspeth's Compliance with Complaint Handling Requirements

#### *Applicable Policies and Procedures in Place at Hudspeth*

PEER staff reviewed Hudspeth's policies and procedures for complaint handling and found that the center has appropriate policies and procedures in place for reporting and investigating serious accidental injuries to clients, non-serious client-to-client incidents, serious injuries of

unknown origin, and suspected client abuse and/or neglect. Reports may be filed anonymously by Hudspeth staff, clients' parents or guardians, etc., via telephone or pager, or may be initiated in person to the client advocate (also referred to as the Risk Manager). Procedures are in place for notifying the Department of Health and the Medicaid Fraud Control Unit within the time frames established in the Vulnerable Adults Act as well as procedures for notifying the center's director and social worker responsible for the program or unit. The social worker is responsible for notifying the family or guardian of the client.

**Hudspeth has appropriate policies and procedures in place for reporting and investigating serious accidental injuries to clients, non-serious client-to-client incidents, serious injuries of unknown origin, and suspected client abuse and/or neglect.**

The center's procedures also include requirements for conducting investigations, such as obtaining statements from staff, other witnesses, and victims; gathering details about the time and location of the incident; evaluation of the procedures followed in documentation of the incident, and an assessment of factors to determine whether actions should be initiated to prevent similar incidents from occurring in the future.

***Review of Complaints and Reports of Oversight Agencies Filed From January 1, 2004, through March 1, 2005***

PEER reviewed all eighteen complaints filed with the Client Advocate for alleged neglect, abuse, or mistreatment of clients from January 1, 2004, through March 1, 2005, and found that none were related to substandard personal hygiene.

Additionally, PEER reviewed Department of Health audit reports from FY 2001 through FY 2004 and found that there were no findings of neglect related to clients' personal hygiene. PEER also reviewed a list of complaints received by Mississippi Protection and Advocacy Systems for FY 2004 and found that none were related to clients' personal hygiene.



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## Has Hudspeth Regional Center implemented an adequate system of inventory control over clients' clothing and personal belongings?

Although Hudspeth Regional Center staff label clients' clothing and grooming/personal care items, the staff could not provide a record of the location of clients' clothing that was not in the clients' closets on the dates of PEER's inventory audits.

PEER defines an adequate system of inventory control as one that utilizes a master record of inventory that reflects the location of all items of clothing at any point in time. Such a record would identify those items that the client brings into the facility, those items sent to the seamstress for mending or labeling, items that have been destroyed, items returned to the client's family, and seasonal items that are in storage. An inventory control system should also utilize the master record of inventory to conduct an annual inventory of each client's clothing and personal items.

Although the Federal Code of Regulations does not define how an intermediate care facility should provide for and monitor inventory control, 42 CFR §483.420 (a)(12) states that intermediate care facilities must ensure that clients have the right to retain and use appropriate personal possessions and clothing and must ensure that each client is dressed in his or her own clothing each day. The Centers for Medicare and Medicaid Services (CMS) State Operations Manual further states that if a method for identifying personal effects is used, it should be inconspicuous.

### ***Hudspeth Regional Center's staff utilize labels to identify clients' clothing and grooming/personal care items.***

PEER observed Hudspeth's direct care staff as they assisted clients with personal skills on the morning of March 9, 2005, in Dogwood Cottage, Camellia Cottage, and Azalea Cottage.

Hair brushes and other grooming/personal care items were maintained in small zippered bags, labeled with the clients' names and locked in a central storage area or in the clients' rooms. PEER also observed a cabinet in each of the cottage bathrooms that contained toothbrushes that were labeled with each client's name to ensure that direct care staff selected the appropriate toothbrush for each client.

PEER also conducted clothing inventory audits on March 9 and April 11, 2005. On March 9, PEER inspected five closets in each of the three cottages (Dogwood, Camellia, and Azalea) and on April 11 inspected one closet in each of the three cottages. PEER conducted each inventory audit in the presence of the cottage supervisor and/or the unit supervisor.

PEER identified labels in each piece of clothing inspected in the closets and observed that the labels were sewn into each item of clothing in inconspicuous locations such as in the waistband of pants and undergarments. The labels were legible and did not appear to have faded due to repeated laundering. Proper labeling of clothing ensures that clothing is returned to the proper client and that if it is sent to the wrong location or client, it may be returned without difficulty.

***Hudspeth staff could not provide a record of the location of clients' clothing that was not in the clients' closets on the dates of PEER's inventory audits.***

According to Hudspeth Regional Center's Inventory Control Procedures, the facility's staff compiles an inventory list of each client's belongings upon the client's admission to the facility and the Clothing Department and the Cottage Supervisor retain copies of the list. Each cottage's staff prepares a list of clothes by client that is sent to the cottage's seamstress to be labeled, mended, or destroyed and the seamstress maintains this list. Also, the staff of each cottage completes a summary of all items from the cottage that have been sent to the laundry, but the staff does not maintain a list for each individual client.

PEER compared the clothing in each client's closet to the most recent inventory list maintained in the cottage and found that the current actual inventory was inconsistent with the most recent list. PEER inquired about the location of the missing items of clothing and was told by the cottage supervisors and/or unit supervisors that the items were either being worn by the client or were being laundered, but the facility's staff could not provide a record of the location of the clients' clothing. Because the items sent to the laundry are recorded by cottage and not by individual client, the center cannot maintain an accurate record of the whereabouts of each client's clothing. During FY 2004, the Mississippi Protection and Advocacy System received two complaints of Hudspeth clients' clothes being worn by other clients.

Hudspeth's inventory control procedures also provide for weekly and monthly inventories to be completed by cottage staff to ensure each client has a sufficient amount of clothing, which consists of counting the items in the client's closet or storage locker. PEER found that Hudspeth does not complete an annual audit of each client's

**During FY 2004, the Mississippi Protection and Advocacy System received two complaints of Hudspeth clients' clothes being worn by other clients.**

**PEER acknowledges that taking frequent inventories of clients' belongings and recording items sent to the laundry on an individual client level must understandably be assigned a lower priority than the primary task of caring for clients.**

belongings to compare the items in the client's closet or in storage to the master record of inventory.

Since federal regulations state that clients have the right to retain and use appropriate personal possessions, it is important for Hudspeth Regional Center to have a system in place to protect client's personal belongings. PEER acknowledges that taking frequent inventories of clients' belongings and recording items sent to the laundry on an individual client level must understandably be assigned a lower priority than the primary task of caring for clients. However, Hudspeth's staff could improve current inventory control procedures to provide better protection of client's personal belongings.

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## Recommendation

Hudspeth Regional Center should require the Clothing Coordinator to complete an annual audit of each client's belongings to ensure accountability for all items included on the master record of inventory. This would include all items in the client's closet, seasonal items that might be in storage, items given to the seamstress for repair, and items sent to the laundry. The Clothing Coordinator could audit a specific number of clients each month to ensure that each client's belongings are audited annually.

## Appendix: Checklist for March 7, 2005, PEER Inspection of Hudspeth Clients' Personal Hygiene

INSPECTION CHECKLIST - \_\_\_\_\_(Name of Facility)

	<u>YES</u>	<u>NO</u>
1. Is the client dressed in attire appropriate to the season? (Do not want them to be too hot or cold. Is there evidence of discomfort?).	----	----
2. Do the client's clothes appear to fit properly?	----	----
3. Is client's shirt properly fastened? (snapped, buttoned correctly? Worn correctly?)	----	----
4. Are the client's pants properly fastened? (snapped, buttoned?)	----	----
5. Do the client's clothes appear to be in need of mending? (holes, missing buttons or snaps?)	----	----
6. Do the client's clothes appear to be in need of washing? (obvious stains, odor?)	----	----
7. Are the client's shoes on the correct feet and properly fastened?	----	----
8. Does the client "appear" to have had a bath within the last 24-48 hours? (any odors? Hair is clean, etc.)	----	----
9. If male client, has face been shaved? Mark N/A if female. _____	----	----
10. Is hair combed and presentable?	----	----
11. If client has acne, does it appear that care is being provided? (no oozing, no sign of infection such as extreme redness and puffiness)	----	----
12. Are client's fingernails trimmed to ensure that they cannot cause harm to themselves or others?	----	----
13. Are client's fingernails clean and free from fungus? (Note any red areas around nail beds)	----	----
14. Are client's hands clean? (Take into consideration the activities they are performing)	----	----
15. If visible, are client's toenails clean and free from fungus?	----	----
16. If visible, are ears clean?	----	----
17. If visible, do teeth/dentures appear to be clean? (odor?)	----	----
18. Does skin appear to be taken care of? (dry, cracked skin?)	----	----

Additional Comments:

Name of Client: \_\_\_\_\_ Cottage: \_\_\_\_\_

I attest that the checklist above is an accurate representation of the appearance of the above named client on March 7, 2005.

\_\_\_\_\_  
PEER Evaluator

\_\_\_\_\_  
Name & Title of Hudspeth Staff

# Agency Response

## HUDSPETH REGIONAL CENTER



John P. Lipscomb, Ph.D.  
Director

Highway 475 South  
Post Office Box 127-B  
Whitfield, Mississippi 39193

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Fax: (601) 354-6945

May 5, 2005

Max K. Arinder, Ph.D.  
Executive Director  
PEER Committee  
P.O. Box 1204  
Jackson, MS 39215-1204

Dear Dr. Arinder:

Attached please find Hudspeth Regional Center's response to the PEER Committee's recent investigation of our facility. I trust this response will be satisfactory. Should you have any questions, please feel free to contact me.

Sincerely,

John P. Lipscomb, Ph.D.  
Director

JPL/jcg  
Attachment

pc: Mr. Edwin C. LeGrand  
Deputy Director, Department of Mental Health

## Response to PEER Recommendation

**Hudspeth Regional Center should require the Clothing Coordinator to complete an annual audit of each client's belongings to ensure accountability for all items included on the master record of inventory. This would include all items in the client's closet, seasonal items that might be in storage, items given to the seamstress for repair, and items sent to the laundry. The Clothing Coordinator could audit a specific number of clients each month to ensure that each client's belongings are audited annually.**

Our current procedure of auditing the clothing of three (3) clients per cottage per month, has been revised to include an element which requires counting each client's individual clothing items being returned from the Laundry on the day of the audit and those in mending. This clothing count will be compared with the purchase records and cottage clothing inventory. A complete report of the audit results will be provided monthly to the Cottage Supervisor, Clothing QSM, Unit Administrator and Assistant Director. This process will result in an annual complete audit of each client's clothing.

Effective: May 9, 2005



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James Barber, Deputy Director  
Ted Booth, General Counsel

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