
STANDING COMMITTEE TRAINING



Standing Committee Training

Introduction

- The Developmental Disabilities Administration would like to thank you for agreeing to serve as a member of a standing committee for one of Maryland's agencies providing services to individuals with developmental disabilities.
- The word stand is often used to imply taking a position on, or making a commitment to something. As a member of this standing committee, you have demonstrated your willingness to take a stand on ensuring the rights of the individuals with disabilities. You have made a commitment to protect their rights through your voting power as a member of this committee. As such you have become a primary advocate for individuals with developmental disabilities in Maryland.
- This is a responsibility that should not be taken lightly. It is not enough to just be familiar with individual rights, however. To perform your function as a member of this standing committee you must also have a working knowledge of the types of services and supports typically needed by this population, and the manner in which agencies are to provide them. This is important because as a voting member of the standing committee you will be expected to make informed decisions regarding portions of individual's plans that, while based on regulations, are first and foremost rights issues.
- In 1999, COMAR regulations governing services to people with developmental disabilities were revised. Establishment and composition of standing committees were regulated at that time. The regulations additionally placed new emphasis on rights and quality of life issues.
- This training has been designed to give you a synopsis of those regulations which impact standing committee decisions and responsibilities. We hope that it will prepare you to move forward in your position armed with the information that you need to have a positive influence on the quality of life for individuals with developmental disabilities in the state of Maryland.

STANDING COMMITTEES



Why have a Standing Committee?

- To take an unbiased look at agency practices
- To help develop creative solutions to problems
- To bring fresh ideas into agencies
- Establishment of a Standing Committee is required by regulation – COMAR 10.22.02.14



Who needs to be on a Standing Committee?

The committee or committees shall include an equal number of licensee staff, and individuals, proponents or members of the community who are not employed by the licensee.

For a committee member who is paid only to serve as a member of the committee, that member is not counted as staff or as a member of the community.

The committee shall meet as needed to perform the functions with at least a majority of the members present.

What Do Standing Committees Do?

The licensee shall establish a committee or committees to perform the following functions:

- Perform the quality assurance functions set forth in COMAR 10.22.02.14
 - Review the licensee's protocol for identifying, reporting, documenting, investigating and reviewing incidents to ensure compliance with Administration procedures
 - Monitor whether the licensee's protocol identified in this regulation is being properly implemented by reviewing all incidents in an effort to identify deficient practices and recommend necessary corrective action.
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What Do Standing Committees Do?

cont.

- Approve all behavior plans which use restrictive techniques to ensure that the behavior plan complies with the requirements of COMAR 10:22.04.03A and 10:22.10
 - Review, approve and establish the time frame for the restriction of a right if it is not related to a challenging behavior, in accordance with COMAR 10:22.04.03A
 - Review the licensee's policies and procedures, and their implementation, to ensure that they adequately protect the legal and human rights of each individual served by the licensee
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Role & Function # 1

Assists in developing the annual
QA Plan

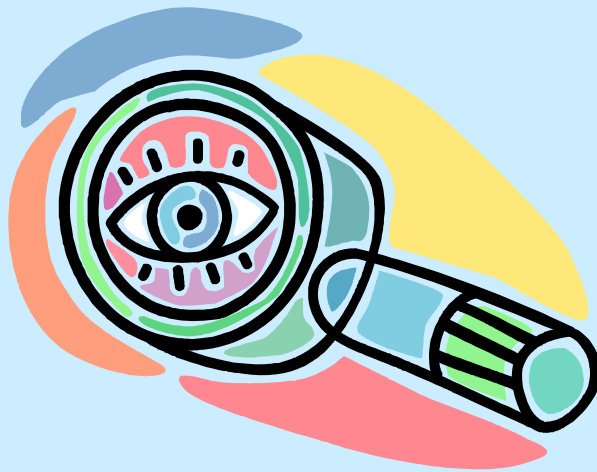


How do they assist in developing the annual QA Plan?

- Ensure plan is focused on individual choices, preferences and desires
 - Develop outcomes that are measurable
 - Collect and evaluate data and analyze trends
 - Establish goals and standards to measure
 - Review and record data
 - Suggest changes based on data/results
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Role & Function # 2

Review Reportable and
Internally Investigated Incidents



Points for reviewing incidents:

- Review the protocol for identifying, reporting, documenting, and investigating incidents
 - Review each incident
 - Monitor protocol to ensure compliance with procedures
 - Provide prompt and appropriate response when health and safety are at risk
 - Offer recommendations for prevention, education, and growth in regard to reporting and investigating incidents
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TO PERFORM THESE FUNCTIONS
COMMITTEE MEMBERS MUST BE
FAMILIAR WITH THE
ADMINISTRATION'S POLICY ON
REPORTABLE INCIDENTS

Developmental Disabilities Administration

Policy on Reportable Incidents and Investigations





This policy applies to all community agencies licensed by DDA, regardless of the individual's funding source, and to all SRC's (State Residential Centers) operated by DDA.

PURPOSE

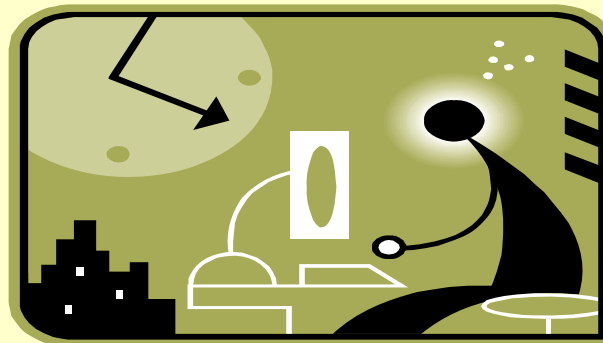
- Inform community agencies, SRCs, DDA (Developmental Disabilities Administration), OHCQ (Office of Health Care Quality) and other stakeholders of incidents
- Insure that corrective measures are taken
- Minimize the potential for recurrence of similar events in the future.



BACKGROUND AND INTENT

The Policy on Reportable Incidents:

- ✓ Describes the types of incidents to be reviewed internally, as well as those that shall be reported to external entities.
- ✓ Provides specific time frames for reporting and investigating certain incidents.
- ✓ Briefly outlines the respective roles of OHCQ and DDA with regard to incident investigations.



General Requirements

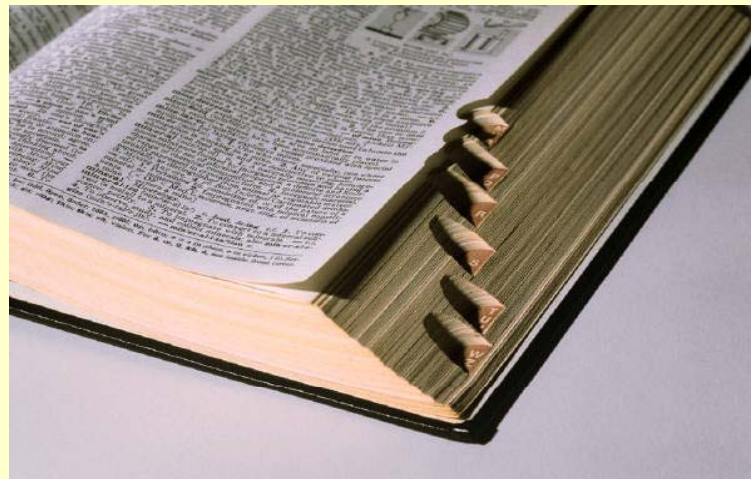
Every agency is responsible for:

- Developing and implementing policies and procedures to ensure that all incidents, including those involving life-threatening conditions, are reported and investigated in accordance with this policy.



REPORTABLE INCIDENTS

- **Definition:** Significant events or situations that, because of the severity or the sensitivity of the situation, shall be reported within prescribed time frames to OHCQ and the DDA regional office.



REPORTABLE INCIDENTS

Notifications:

- The agency shall notify family and/or advocates as identified by the interdisciplinary team of all reportable incidents.
- Some reportable incidents shall also be reported to other external entities such as MDLC (Maryland Disability Law Center), law enforcement, etc.



REPORTABLE INCIDENTS

Reporting Timeframes:



- Immediately: Abuse, neglect and deaths shall be reported to OHCQ and the DDA regional office. The report may be made verbally or by e-mailing the Appendix 4.
- Within 1 business day of discovery: For all reportable incidents, the agency must complete and submit the Appendix 4 by e-mail to OHCQ and the DDA regional office.

REPORTABLE INCIDENTS

Investigations:

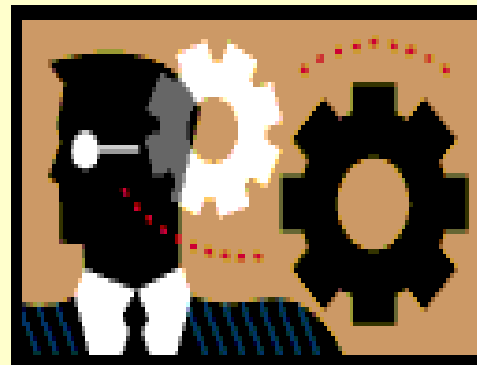
- The agency's policies and procedures provide guidelines for the incident investigation.
- The Agency Investigation Report (Appendix 7) must be submitted by e-mail to OHCQ and the DDA regional office within 21 working days of the incident.



INTERNALLY INVESTIGATED INCIDENTS

- **DEFINITION:**

Internally investigated incidents are those significant events or situations that shall be reported to designated authorities within the agency.



INTERNALLY INVESTIGATED INCIDENTS

- Within 21 working days, the agency shall complete a final report (Appendix 7).
- As a member of the standing committee, you will receive a copy of this report to review.
- If the investigation reveals that an injury was the result of abuse, neglect or restraint, this information must be reflected in the agency internal report and be reported as a reportable incident following the Appendix 2.



INTERNALLY INVESTIGATED INCIDENTS

Appendix 5:

- This report reflects the agency's list of all internally investigated incidents for the quarter. The report is due Jan. 15, Apr. 14, July 15 and Oct. 15.



Rule 3 or more:

- If 3 or more internally investigated incidents occur within a 4 week time frame for the same individual, the most recent incident must be treated as a reportable incident and investigated accordingly. Documentation of the other incidents must be included.

INTERNALLY REVIEWED INCIDENTS

Definitions:

Planned Use of Restraints: The use of a mechanical device or physical intervention that is approved as part of an individual's behavior plan which has been reviewed and approved by the standing committee.

Chemical Supports: The use of medication as an intervention to support an individual for a medical appointment that would not typically require sedation.

Mechanical Supports: The use of a mechanical device to support an individual's proper position, or to protect an individual with a continuing medical condition from sustaining an injury.



INVESTIGATION, FOLLOW-UP AND RECORDS MAINTENANCE

Investigations:

- No one may participate in an investigation of an incident when there is a conflict of interest.

Follow-up:

- Members of the standing committees are not allowed to participate in the decision making process for any incident in which there is a conflict of interest, or in which the committee member was involved.
- All records relevant to an internally investigated or a reportable incident, shall be submitted to the standing committee within 7 calendar days of the closure of the matter. *Closure* for internally investigated incidents means the completion of the agency investigation. *Closure* for reportable incidents means the completion of the OHCQ investigation.
- The Standing Committee should use the Appendix 7 Addendum to document follow up and review of all incidents by the standing committee.

Records Maintenance:

- Files containing incident reports, investigatory materials, meeting minutes, etc., must be kept on file for a minimum of 5 years.

ADDITIONAL INFORMATION

The complete document of the Policy on Reportable Incidents can be viewed on the DDA website: www.ddamaryland.org



(Listed under the link entitled
“Forms and Resources for Providers”)

*The policy contains all appendices
identified in this presentation.*

ROLE & FUNCTION # 3

- Approve All Behavior Plans that have any restrictive component.



WHEN REVIEWING BEHAVIOR
PLANS FOR APPROVAL,
ASK THE FOLLOWING
QUESTIONS:

- Does the plan restrict any fundamental rights?
- Is the restriction of the right necessary to address the behavior?
- Has a time frame for the restriction been addressed?
- Are restrictive techniques utilized in the plan consistent with the DDA's approved curriculums on Behavior Programs and Supports?
- If medication is used to modify behavior, is there a plan in place to reduce the use of the medication?
- Have all less restrictive alternatives to handling the behavior been considered?
- Do the approaches taken seem reasonable to you?
- Is the plan appropriate to deal with the behavior?

BEHAVIOR SUPPORT SERVICES

What you should know as a
Standing Committee
Member



All behavior plans which utilize restrictive techniques must be approved by the Standing Committee to assure compliance with the regulatory requirements governing behavior support planning (COMAR 10.22.10).

COMAR 10.22.01 defines restrictive technique as:

Any technique that is implemented to impede an individual's physical mobility or limit access to the environment including but not limited to physical, mechanical, or chemical restraints or medications used to modify behavior.



Behavior Modifying Medications

Any medication prescribed for, and used on an ongoing basis to assist in managing and modifying a challenging behavior



Behavior Plans including the use of behavior modifying medications must:

- Include the specific medications prescribed
- Include the reason for the medication
- Include alternative methods for managing the challenging behavior
- Specify that objective data be collected and reviewed by the prescribing physician to measure the effectiveness of the medication.

Physical Restraints

Physical restraints are defined as any manual method used to restrict the free movement of an individual. This includes therapeutic holds as defined and approved in DDA'S approved curriculums for behavioral support.

Only techniques in curriculums approved by DDA may be included in a behavior plan approved by standing committees.

Only staff trained and certified in these approved curriculums may apply any of the approved therapeutic holds.

Mechanical Restraints

Any mechanical device which restricts the free movement of an individual.

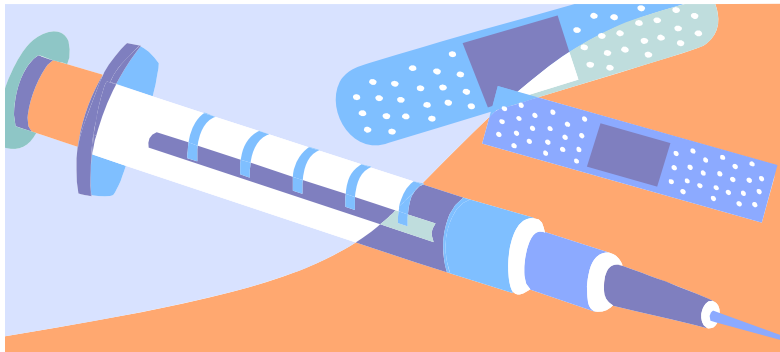


Mechanical restraint may be used only to:

- Prevent an individual from engaging in self injurious behavior
- Prevent serious bodily harm to others
- Allow an individual to recuperate from surgery or serious injury as required and approved by the treating licensed health care practitioner.

Chemical Restraint

- The use of an injectable medication as an intervention in a behavioral emergency

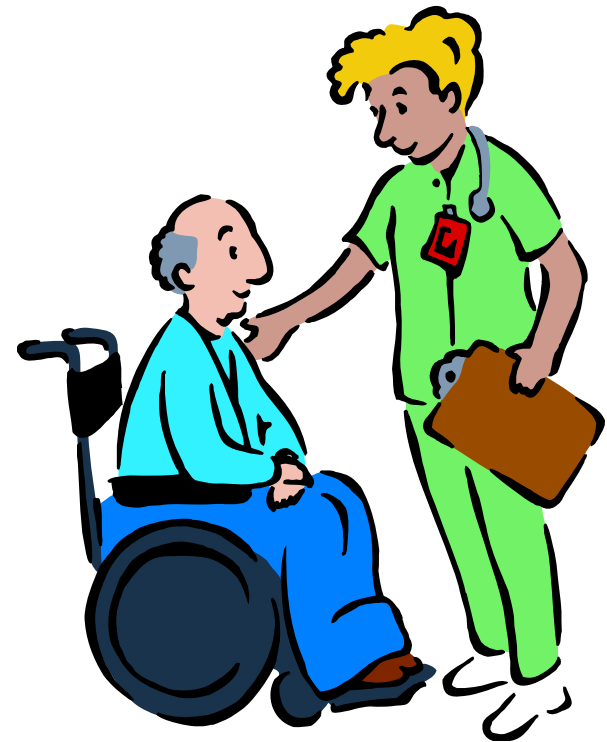


A chemical restraint may only be used:

- When an individual's behavior presents a danger of serious bodily harm to self and/or others
- As ordered by a physician when all other least restrictive methods have been implemented and proven ineffective in the behavioral emergency

Authorization

Chemical restraints may be used in a behavioral emergency only when ordered, administered, and monitored by a licensed health care practitioner.



Issues for the Standing Committee to consider:

- Be sure that the restriction being considered represents the least restrictive effective alternative or the lowest effective dose of medication
- Require that agency personnel be able to demonstrate that other methods have been systematically tried and determined to be ineffective
- Ensure that the agency has and implements a policy dictating that data to support the effectiveness of the restrictive technique is provided to the licensed health care practitioner
- Ensure that the agency implements a policy requiring that the team convene within 5 calendar days of the use of an emergency restrictive technique to review the situation and the action taken

If it is necessary to restrict a right not related to a challenging behavior, the standing committee shall review and approve the restriction and establish a time frame for the restriction.

No Behavior Plan may be approved if:

- It includes any technique prohibited by law including the use of aversive techniques in general
- It includes the use of seclusion
- It includes provisions for depriving an individual of a nutritionally adequate diet
- It includes any method or technique constituting a rights violation except when the team decides that it is necessary to restrict a right due to a challenging behavior and has followed the procedures in the behavioral supports chapter having to do with rights restrictions.

QUESTION:

HOW CAN
STANDING COMMITTEE MEMBERS
BE SURE THAT PLANS REVIEWED
MEET PROFESSIONAL STANDARDS
IN ALL RELEVANT FIELDS?

ANSWER:

The committee or committees may consult with a licensed health professional such as a psychologist, physician, physician's assistant, nurse practitioner or board certified clinical pharmacist as needed

What is a Conflict of Interest?

**Webster's dictionary defines it as
“conflict between one's obligation to the
public good and one's self-interest, as in
the case of a public officeholder who owns
stock in a company seeking government
contracts.”**

Conflict of Interest

No member may participate in making a decision of the standing committee if he/she:

- a. is involved in the incident
- b. is related to anyone involved in the incident
- c. wrote the behavior plan being considered
- d. has any other conflict of interests related to the situation being considered.

Conflict Example # 1

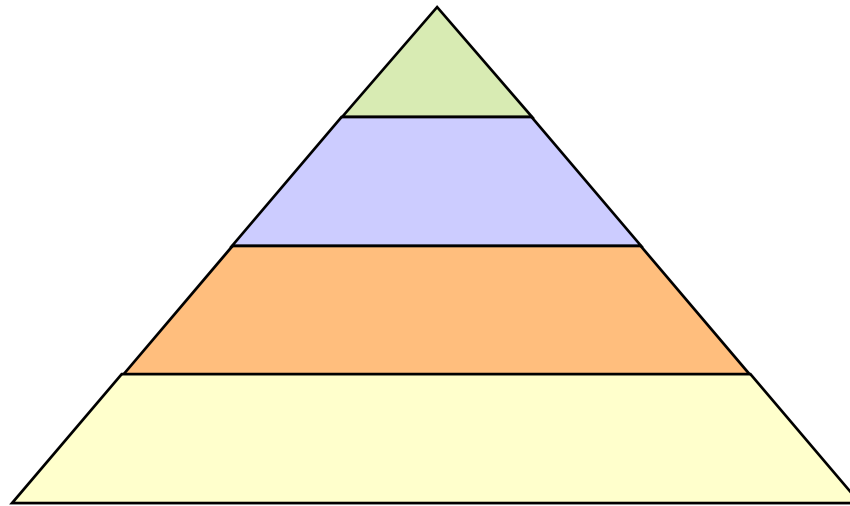
A direct care staff member on the committee was involved in the use of a restraint with an individual that is being reviewed.

Conflict Example # 2

The spouse of a member of the committee was involved in an allegation of neglect/abuse of an individual

Role & Function # 4

- Review agency policy and procedures



Reviewing agency policies and procedures will ensure what?

- DDA Regulation 10.22.02.14 requires that standing committees review agency policies and procedures to ensure that these policies and procedures adequately protect the legal and human rights of the individuals that the agency serves.

OVERVIEW OF AGENCY POLICIES AND PROCEDURES



Regulation requires that agencies have policies and procedures in the following areas:

- 1. Policy on Reportable Incidents**
- 2. Policy on Abuse & Neglect**
- 3. Policy on Ethics & Standards**
- 4. Policy on conflict of Interest**
- 5. Policy on Medication Errors**
- 6. Policy on reimbursement for damaged/stolen property**
- 7. Policy on Fundamental Rights**
- 8. Policy on Confidentiality**
- 9. Policy on grievance procedures**
- 10. For a list of required policies please refer to DDA regulations 10.22.02.10**

Standing Committee Training

Self Determination

As people grow and mature it is taken for granted that they will assume more and more control of their lives until they reach a point where they make all of the important decisions in their lives and take responsibility for their choices



- But for many people with developmental disabilities, the opportunity to make choices and decisions has often been denied.
- Experience has shown, however, that given the opportunity, many people with developmental disabilities can learn to direct their own lives.



Maryland's Developmental Disabilities Administration believes that people with disabilities have the same right to self determination as everyone else in society



Self-Determination

- The Developmental Disabilities Administration sees it as their role to assure that people with disabilities receive the support and training necessary to live their lives in a self directed manner through realization of the principles of Self-Determination.





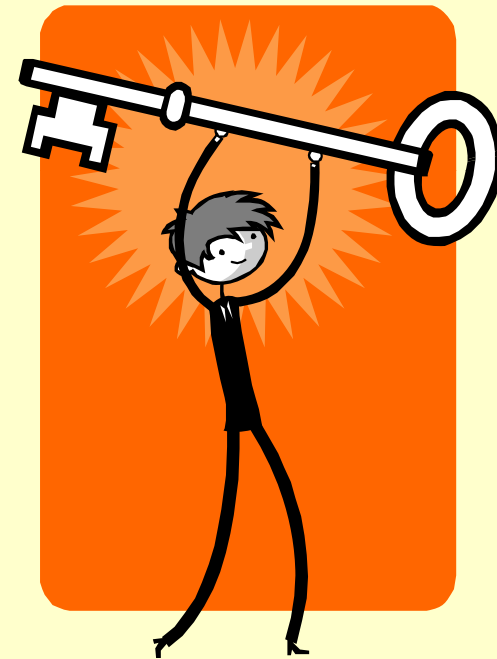
- The principles of self determination include but are not limited to:
- FREEDOM
- AUTHORITY
- RESPONSIBILITY
- SUPPORTS

Freedom to:

- Live a meaningful life in the community where, how and with whom one chooses
- Work where one chooses in a meaningful pursuit
- Develop true and meaningful relationships with fellow community members
- Participate in activities open to the general public
- Take the same risks that others take in living their lives (relationships, changing jobs, experiencing intimacy) while maintaining an acceptable level of personal safety

Authority over:

- Funding for supports rather than the authority resting with a service provider or DDA
- Development of individual plans or life plans rather than someone other than the individual in question planning their own life



Responsibility for:

- Making decisions that influence their own lives
- The wise use of public funds and other public resources such as therapies and various types of social services



SUPPORTS:

- Supports necessary to live as independently as possible in the community





Fundamental Rights

The stepping stone
for all services we provide



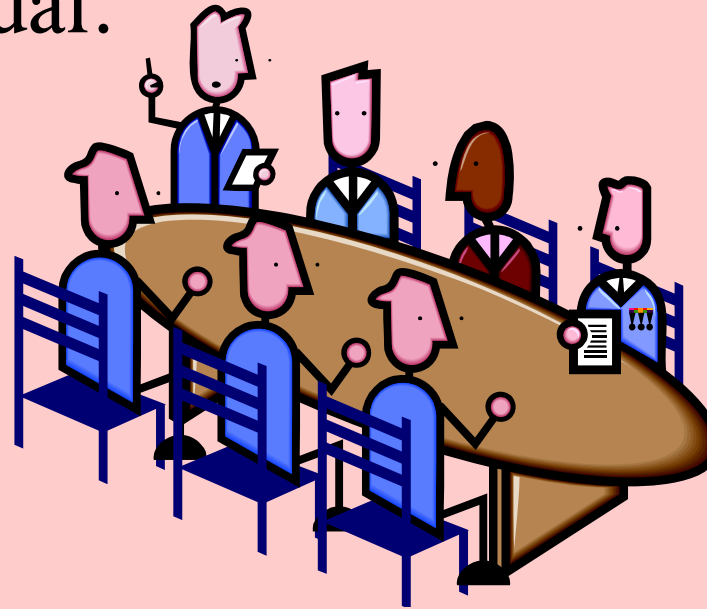
Everyone Has the Right to:

- Live in the community of their choice
- Work in the setting of their choice
- Fully participate in their community
- Have meaningful friendships/relationships
- Receive health care services that meet his/her needs from the professionals he/she chooses
- Privacy



When Can Rights Be Restricted?

When an individual's team agrees it is necessary to restrict a right for the safety and well-being of the individual.

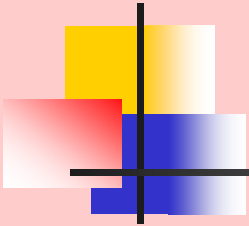




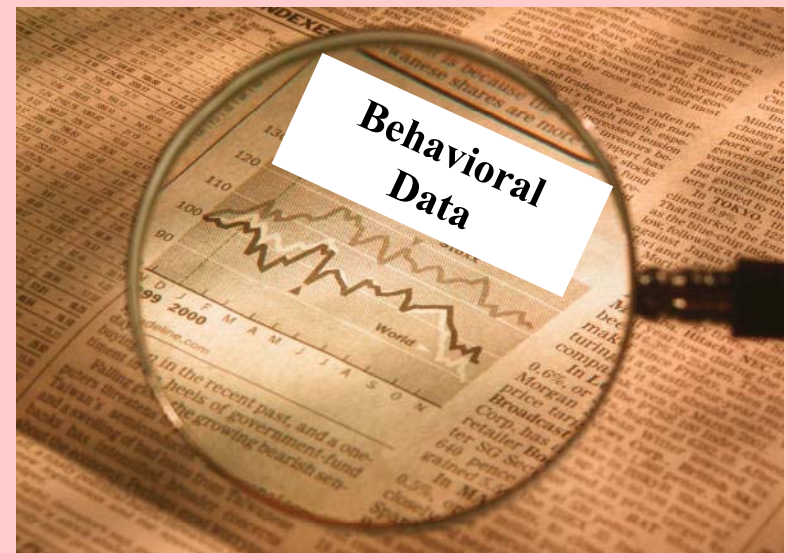
How are Rights Restrictions Documented?

All rights restrictions must be documented in the IP and/or BP. The IP and/or BP must include:

- The right to be restricted, reason(s) for the restriction, condition(s) under which the restriction can be applied, as well as the specified timeframe and review schedule for the restricted right
- A written plan to restore the restricted right



A rights restriction may be implemented only after other methods have been systematically tried and objectively determined to be ineffective



Individuals Making Choices



Choices

- People have a fundamental right to independently, or with assistance, make decisions and choices that affect their lives.



Choices such as:

- Where and with whom to live
- Where to work
- Desired vacation spots
- The appearance of their home
- Who will provide needed services
- Community involvement
- Relationships
- Recreational activities
- Creating their menu
- What to wear
- Personal growth goals

When are choices made?

- As with everyone – individuals with disabilities should have the opportunity to make choices regarding various aspects of their lives on a daily basis.
- Individuals also have the right to change their minds about their choices.

If an Individual needs support in making decisions he/she may receive support from other important people in his/her life such as:



- Advocate
- Family/ Legal guardian
- Friends
- Resource Coordinator
- Residential Provider/ Staff
- Employer
- Day Program Provider
- Medical Staff

Why is emphasis put on ensuring that choices are respected?

- In the past, individuals were often not given the opportunity to make choices even as small as selecting their own clothing.
- It is the RIGHT of all human beings to make their own decisions regarding their needs, wants and desires, and have those decisions respected whenever possible .

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Individual Planning



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What is the Individual Plan?



The Individual Plan (IP) is

- A single plan for the provision of services and supports to the individual
- Directed by the individual
- Based on preferences and desires identified by and for the individual

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Individual Plans

- Should be outcome oriented
- Should include measurable goals for completion of outcomes



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Individual Plans

Are intended to specify all needed assessments, services and training



Individual Plans

- Are required by the COMAR regulations

COMAR



**Office of the
Secretary of State**
Division of State Documents

REGULATIONS CODIFICATION SYSTEM

Under the COMAR codification system, every regulation is assigned a unique four-part codification number by which it may be identified. All regulations found in COMAR are arranged by title. Each title is divided into numbered subtitles, each subtitle is divided into numbered chapters, and each chapter into numbered regulations.

09.12.01.02D(2)(c)(iii)

Title	Subtitle	Chapter	Regulation	Subsection	Paragraph

A regulation may be divided into lettered sections, a section divided into numbered subsections, a subsection divided into lettered paragraphs, and a paragraph divided into numbered subparagraphs.

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Individual Plans

- Are based on the needs, interests and wants of the individual and are completed on at least an annual basis



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Standing Committees must review any IP
which contains a rights restriction

OR

any IP which contains a behavior plan
with restrictive techniques.

(Detailed information is provided in the “Behavior Support Services” section)

CONFIDENTIALITY



Defining Confidentiality

- Confidentiality means protecting the privacy of information about an individual
- All information the standing committee reviews about an individual should be kept private. It cannot be discussed outside the standing committee.



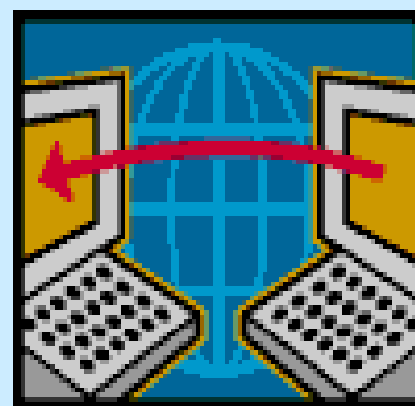
POLICIES AND PROCEDURES



According to COMAR's 10.22.02.10A(4), each provider agency is responsible for developing and adopting written policies and procedures for ensuring the **confidentiality** of information about each individual in accordance with Health-General Article, §7-1010, Annotated Code of Maryland.

Additional Information

- **The Code of Maryland regulations may be viewed on the website:**
www.ddamaryland.org
 - Click on Regulations
 - Title 10
 - Subtitle 22 – Developmental Disabilities
- **The Health General Article, §7-1010, Annotated Code of Maryland can be viewed online by typing:**
 - Annotated Code of the Public General Laws of Maryland, UM Libraries
 - MD Code Online
 - On left, click on Maryland Code
 - Open Health General
 - Click on DD Law
 - 7-1005 Abuse



Thank You

Thank you again for accepting a position on a standing committee. The foregoing material was developed to provide you with basic information to assist you in fulfilling your responsibilities to the committee. Your participation as a committee member will positively affect the lives of individuals receiving services through the Developmental Disabilities Administration.