

Motion for Immediate Relief

Exhibit 21

STATE OF GEORGIA
DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL
DISABILITIES

f/k/a DEPARTMENT OF HUMAN RESOURCES, DIVISION OF MHDDAD

1.15.2010 REPORT OF COMPLIANCE

And

1.15.2010 PLAN OF IMPLEMENTATION

Relating To

THE CRIPA SETTLEMENT AGREEMENT ENTERED INTO BY THE UNITED
STATES OF AMERICA
AND THE STATE OF GEORGIA
January 15, 2009

INTRODUCTION

This report provides planned time lines and status of each of the six major areas and sub-sections of the CRIPA Settlement Agreement.

The Department of Behavioral Health and Developmental Disabilities (DBHDD) has determined that all hospitals will collaboratively review, revise, or develop and implement statewide policies and procedures to effect systemic changes in the quality of care provided to all individuals in hospitals operated by the Department.

DBHDD and its experts will lead this effort by assisting with the development of policies, procedures and processes. Furthermore, they will use a 'train the trainer' model to develop local capacity at each hospital, assist the hospitals to set up a quality monitoring system for each of the six major areas listed below, and enable the hospitals to implement a mentoring system for long-term maintenance.

In this report, "in process" means that DBHDD has started the process of reviewing the nature and quality of current policies, procedures and processes. The "start date" signifies when the statewide collaborative process will begin for each item, and "full implementation" signifies the date when the policies and procedures will be functional at each state hospital. Monitoring, mentoring, and quality improvement efforts will follow full implementation.

Item	Settlement Agreement Tasks	Who is Responsible?	Status	Start Date	Full Implementation
A	Protection From Harm				
A1	Develop an incident management system	DBHDD, Clinical Directors, Incident Managers	Policy developed and implemented	10/19/09	7/15/10
	Implement an incident management system	DBHDD, Clinical Directors, Incident Managers	Training in process	1/1/10	12/31/10
	Revise existing incident management database (ROCI)	DBHDD	Being aligned with new policy	1/1/10	9/30/10
A2	Develop a risk management system	DBHDD, Clinical Directors, Incident Managers	Policy developed and implemented	10/19/09	7/15/10
	Implement a risk management system	DBHDD, Clinical Directors, Incident Managers	Training in process	1/1/10	12/31/10
	Employ new risk management database	DBHDD	In procurement	12/15/09	12/31/10
B	Mental Health Care				
B1	Review and revise (as needed) assessment and diagnoses	DBHDD	In process	1/15/10	12/31/10
	Revise psychiatry assessment process	Clinical Directors	In process	1/15/10	9/30/10
	Revise nursing assessment process	Nurse Administrators	In process	1/15/10	9/30/10
	Revise rehabilitation services assessments	Rehabilitation Services	In process	4/1/10	12/31/10
	Revise psychology assessment process	Psychology Directors	In process	4/1/10	12/31/10
	Develop and implement psychiatry Weekly Progress Note	Clinical Directors	Policy developed and implemented	12/1/09	7/15/10
	Develop and implement monitoring system for psychiatry Weekly Progress Note	Clinical Directors	Training in process	1/1/5/10	9/1/10
	Develop and implement psychiatry Monthly Progress Note	Clinical Directors	Policy developed and implemented	12/1/09	7/15/10
	Develop and implement monitoring system for psychiatry Monthly Progress Note	Clinical Directors	Training in process	1/1/5/10	9/1/10
B2	Revise treatment planning system	DBHDD, Clinical Directors	In process	1/15/10	12/31/10
	Train staff in revised treatment planning, including new employees	Treatment planning trainers	In process	4/1/10	12/31/13

Item	Settlement Agreement Tasks	Who is Responsible?	Status	Start Date	Full Implementation
	Develop treatment planning monitoring system	Treatment planning monitors	In process	6/30/10	12/31/10
C	Seclusion and Restraint				
C1	Eliminate the planned use of restrictive interventions	Clinical Directors, Nurse Administrators, Psychology Directors	In process	1/15/10	12/31/13
C2	Revise and implement policies and procedures relating to seclusion or restraint	DBHDD	In process	3/1/10	12/31/10
C3	Monitor physician orders written for seclusion or restraint	DBHDD	In process	3/1/10	12/31/10
C4	Monitor physician consultation for seclusion or restraint	Clinical Directors, Nurse Administrators, Psychology Directors	In process	3/1/10	2/28/11
C5	Monitor documented behavioral criteria for release	Clinical Directors, Nurse Administrators, Psychology Directors	In process	3/1/10	2/28/11
C6	Ensure team review of seclusion or restraint episode within one business day	Clinical Directors, Nurse Administrators, Psychology Directors	In process	3/1/10	2/28/11
C7	Monitor assessment of individuals while in seclusion or restraint	Clinical Directors, Nurse Administrators, Psychology Directors	In process	3/1/10	2/28/11
C8	Provide training in revised policies and procedures relating to seclusion or restraint	Staff Training Department	In process	3/1/10	12/31/10
D	Medical and Nursing				
D1	Require adequate clinical oversight	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D2	Hire sufficient nursing staff	Clinical Directors, Nursing Administrators	In process	1/15/10	12/31/13
D3	Provide nursing training	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D4	Require nursing documentation	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D5	Require nursing participation in treatment planning	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D6	Require nursing participation in individualized treatment	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D7	Require nursing supervision	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D8	Require nursing training in medication administration	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11

Item	Settlement Agreement Tasks	Who is Responsible?	Status	Start Date	Full Implementation
D9	Require signatures on medication administration record and narcotics Log	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
	Revise medication variance policy and procedures	Clinical Directors, Nursing Administrators	Policy developed	11/1/09	8/15/10
D10	Revise infection control program	Clinical Directors, Nursing Administrators	In process	1/15/10	6/30/11
D11	Establish a physical and nutritional management program	Clinical Directors, Nursing Administrators	Policy developed and implemented	10/19/09	7/15/10
D12	Require staff training on physical and nutritional management	Clinical Directors, Nursing Administrators	Training in process	12/1/09	12/31/10
D13	Provide rehabilitation services and adaptive equipment	Clinical Directors, Nursing Administrators	In process	7/1/10	12/31/13
D14	Revise medical emergency response system	Clinical Directors, Nursing Administrators	Policy developed and implemented	10/19/09	7/15/10
D15	Require assessment and treatment common of medical conditions	Clinical Directors, Nursing Administrators	Training in process	12/1/09	12/31/10
	Develop seizure disorders policy and procedures	Clinical Directors, Nursing Administrators	Policy developed and implemented	10/19/09	8/1/10
	Develop epilepsy disorders policy and procedures	Clinical Directors, Nursing Administrators	Policy developed	11/1/09	8/15/10
	Develop adverse drug reaction policy and procedures	Clinical Directors, Nursing Administrators	Policy developed	11/1/09	8/15/10
	Revise diabetic assessment and care policy and procedures	Clinical Directors, Nursing Administrators	Policy developed	11/1/09	8/15/10
	Develop drug utilization evaluation policy and procedures	Clinical Directors, Nursing Administrators	Policy developed	11/1/09	8/15/10
E	Special Needs				
E1	Provide services to individuals with limited English proficiency or sensory impairment	Mall Director, Rehabilitation Services	In process	1/15/10	12/31/13
E2	Require Special education and IEP services for qualified individuals	Education Director	In process	1/15/10	12/31/13
F	Discharge Planning				
F1	Identify and address barriers to discharge	Social Work, RARC	In process	1/15/10	12/31/10
F2	Provide for individual participation in treatment planning	Social Work, RARC	In process	1/15/10	12/31/10
F3	Provide individuals with skills training for discharge	Social Work, RARC	In process	1/15/10	12/31/13

Item	Settlement Agreement Tasks	Who is Responsible?	Status	Start Date	Full Implementation
F4	Provide hospital transition services	Social Work, RARC	In process	1/15/10	12/31/10
F5	Develop Repeat Admissions Review Coordinators (RARC) systems and processes	Social Work, RARC	RARC established	1/1/10	7/15/10