

**PARENTS COORDINATING COUNCIL  
AT LANTERMAN DEVELOPMENTAL CENTER**

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**APRIL -- MAY 2013**

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# CONTACT

*Keeping Communication Open  
With Lanterman Families*

THE NEWSLETTER FOR PARENTS AND FRIENDS

**Important Reminder:** The PCC Office is staffed by dedicated volunteer family members who donate their time to support the Lanterman families. These volunteers take care of the many organizational and office duties, ranging from sending out the Newsletter to running the fundraiser, to responding to individual family needs and many more activities. The PCC Office is open most but not all days, and may be reached by phone (909-444-7572), fax (909-444-2047), email ([ldcpc@gmail.com](mailto:ldcpc@gmail.com)), or U.S. Mail: P.O. Box 4408, Diamond Bar, CA 91765.

**LANTERMAN DEVELOPMENTAL CENTER POPULATION AS OF APRIL 19, 2013 -- 183**

## **Parents Coordinating Council Meeting**

**Date: Saturday, May 11, 2013**

**Time: 10:00 a.m.**

**Location: Lanterman Developmental Center  
3530 Pomona Boulevard  
DeBell Auditorium**

### **IMPORTANT GAINS MADE AT SACRAMENTO HEARINGS AND AN OPEN DISCUSSION ON YOUR LOVED ONES TRANSITION TO THEIR NEW HOME**

On April 11<sup>th</sup> and April 17<sup>th</sup> the Senate and Assembly Health and Human Services Budget Subcommittees held hearings on the Lanterman Closure. Video highlights of these Hearings, including testimony by PCC members will be shown. There will be an open discussion on what this means for employees, families, and our loved ones.

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After our open discussion on the Sacramento Hearings, the topic will turn to Transitioning your loved one to their new home. Once the Transition Team has made a decision on an appropriate placement, the next step is transitioning your loved one into their new home. This will include visits to their new home, cross-training of staff who will provide services to your loved one, and the transition of medical services and day programs. Guaranteeing your loved one is comfortable and well adjusted will be the responsibility of the Transition Team who will plan the steps to a successful new home experience.

We have invited Amy Wall of the Department, the LDC Medical Director, Danny McCarns of the Regional Project, and Transition Coordinators from the Regional Project to participate in this discussion. Please bring all your insight and questions.

## IMPORTANT GAINS MADE AT SACRAMENTO HEARINGS

At the invitation of the Senate Budget Subcommittee, the PCC participated in a stakeholder panel to discuss the closure process for Lanterman Developmental Center. Prior to the hearing, the PCC provided the committee with two Position Papers. The first was a formal request to remove the 2-year “sunset date” from the Community State Staffing program, and the second called for an independent oversight panel to monitor the closure of LDC. Both of these Position Papers were included in the Senators’ briefing materials (***and both are reprinted in this newsletter***).

As described in the PCC’s Position Paper on the State Staffing Program, the two-year sunset date is the biggest barrier to the success of the program, making it prohibitively unattractive to Lanterman employees. **The Senate subcommittee agreed, and voted to remove the sunset date**, and to adopt corresponding trailer bill language that may be necessary to effectuate that action.

Similarly, the Legislative Analyst’s Office recommended the creation of the Office of Inspector General to oversee DDS’s handling of state Developmental Centers. This recommendation was prompted by recent revelations of abuse at Sonoma DC, and was strongly supported by the PCC. The subcommittee voted to hold this item open for further analysis.

The PCC Position Papers were also provided the corresponding Assembly subcommittee, which took identical actions the following week.

**Video highlights of these Hearings, including testimony by PCC members, will be shown at our next General Membership Meeting on May 11.**

## POSITION PAPERS PCC SUBMITTED TO THE LEGISLATURE

### THE NEED FOR INDEPENDENT OVERSIGHT

Transparency and accountability are reasonable expectations from a state agency responsible for providing services to the developmentally disabled population. Yet DDS has failed to meet this standard in its management of the state’s Developmental Center system.

**Abuse and Cover-Ups at Sonoma DC** – The recent revelations of rape, sexual assaults, and the use of “tasers” against clients at Sonoma DC is truly horrific. But equally troublesome is the fact that the Office of Protective Services (DDS’s internal police force) failed to report and investigate this abuse for years. Additionally, several independent news organizations have been highly critical of the Department’s failure to comply with “Public Records” requests, as required by law.

**The Lanterman DC Closure** – The Department promised that the current closure of Lanterman DC would mirror and build upon the successful closure of Agnews DC, which was accomplished just a few years earlier. This promise was made to both family members impacted by the closure, and to the state legislature. However, more than three years into the process, DDS has willfully failed to implement similar policies that were in effect for Agnews (***see separate paper on the Community State Staffing Program***).

Lanterman families continue to report rapidly deteriorating care at the facility, and a rise in Special Incident Reports. There have been several “unexpected” deaths, with little or no explanation provided to the grieving families.

Families have also reported dramatic staffing shortages, and a sense that the remaining staff has become exhausted and demoralized. They are also reporting that their community placement options are limited, and there is growing pressure to accept placements that they feel do not meet the needs of their loved ones.

Lanterman families, both collectively and individually, have brought these concerns directly to the Department on a regular basis, but have never received a meaningful response.

**Closure-Related Death at Inland Regional Center** – In October 2012, a former Lanterman resident died within two weeks of placement at a Group Home in Inland Regional Center. A second Lanterman mover at the same Home was hospitalized shortly after her placement.

Both of these individuals had previously resided at Lanterman’s Skilled Nursing Facility. But they were both placed in a Group Home that did **not** meet the requirements of the ARFPSHN homes that are being developed specifically for medically fragile individuals leaving Lanterman.

The client who died (Stephanie) passed away from issues related to “suctioning” (ie. keeping her lungs and airways free of bodily fluids). The other client (Lisa) was hospitalized for issues related to dehydration. Proper suctioning and hydration are common practices at Lanterman DC, and any home accepting medically fragile individuals from Lanterman should be properly trained and experienced in those procedures.

This situation raises serious questions about the type of medical assessments that were conducted for these individuals, and how those assessments led them to be placed in a Group Home that was clearly not equipped to meet their medical needs.

The Parents Coordinating Council at Lanterman formally requested an accounting of this situation from both Inland Regional Center and DDS. Six months later, we still have not received any meaningful response. We also asked that no further placements be made into this Home until these problems were identified and corrected; but again, we have received no response.

**The Cost to Taxpayers** – The situation at Sonoma DC has resulted in the ongoing loss of more than \$1 million *per month* in Federal funding. Meanwhile, millions more are being spent on the Lanterman DC closure, a process which is actually undermining the successful precedents that were set during the Agnews closure just a few years earlier. This is a grave disservice to both the state’s disabled population and its taxpayers.

**Summary** – The Department of Developmental Services has failed to maintain institutional control at Sonoma and Lanterman DCs, as is its obligation. It has irrevocably breached the good faith of those clients and their families who are currently being served by the state’s Developmental Center system. It has become unresponsive to the concerns of the families that it serves, yet it continues to operate with fiscal and procedural impunity.

**Recommendation** – The Department can no longer be allowed to “write its own report card.” There must be **meaningful and independent oversight**, with measurable criteria for performance and accountability.

**We therefore request that this Committee mandate the creation of an independent Oversight Panel for the purpose of monitoring the operation the state’s four remaining Developmental Centers, and supervising their closure when such closures arise.**

Any Oversight Panel must include representation from an appropriate federal agency; an independent quality control monitoring agency, service providers who are not beholden to DDS funding, and disabled service recipients and their families.

We truly believe that any costs associated with the creation of such an Oversight Panel will more than pay for itself through the more efficient use of existing funding, the prevention of future loss of funding at the federal level, a more streamlined service delivery system, and a more efficient process for future DC closures.

## **FAILURE OF THE COMMUNITY STATE STAFFING PROGRAM**

It has been widely acknowledged by multiple sources (including DDS itself) that the Community State Staffing Program (CSS) was an essential component of the successful closure of Agnews Developmental Center. When the closure of Lanterman DC was announced in 2010, DDS promised both families and legislators that the CSS Program would be similarly implemented, and this was authorized in the Budget Trailer Bill of that year.

However, more than three years into the Lanterman closure Process, not a single Lanterman employee has been hired through that program.

**Benefits of the Community State Staffing Program** – The CSS allows state employees working at the Developmental Center to accept employment with private Service Providers, while still retaining their benefits and retirement packages from the state. This ensures that their professional expertise will be retained within the service system for individuals being transferred from state care to private care.

The CSS Program is therapeutically important because many DC employees have worked with this level of profound disability for decades. They have personal relationships with the clients they work with, and can properly interpret the many subtleties of non-verbal communication. They are also familiar with the most effective behavioral intervention strategies for their clients, which are often unique to a particular individual.

Additionally, many Agnews' families have reported that CSS employees were essential in providing guidance and training for other non-CSS employees who were hired to work in the same Group Home.

**Barriers to CSS Employment at Lanterman DC** – Despite its promise to implement the CSS Program as part of the Lanterman closure progress, DDS has knowingly imposed (or agreed to) a number of modifications to the program that now make it prohibitively unattractive to potential applicants. These barriers include:

- A two-year “sunset” date to the CSS Program, effective upon the final closure of Lanterman.
- There is no longer a “right to return” to state employment at Lanterman (or elsewhere) if either the employee or the new private employer feels that the hiring is not a good fit.
- Even after accepting private employment through the CSS Program, an employee can still be unilaterally terminated as part of the Lanterman lay-off process, even if both the employee and the new private employer wish to continue that employment.

**Failure of the CSS Program at Lanterman DC** – When Agnews Developmental Center closed in 2009, there were 109 Agnews' employees actively participating in the CSS Program. But three years into the Lanterman closure, there are **no** Lanterman employees working in community homes, despite the fact that nearly 200 clients have already been moved into the community.

The Parents Coordinating Council at Lanterman has raised the CSS issue at every opportunity. We have initiated dialogues with DDS, the participating Regional Centers, Lanterman DC, and the employee Labor Unions. Each party blames another for the failure of the Program. We have brought our concerns to various legislative committees, only to have DDS intervene with the promise to provide an update sometime in the future. We have even contacted the identical agencies who successfully implemented the CSS Program at Agnews, only to be told that their experience and expertise has not been sought out or utilized by their constituent agencies at Lanterman.

**Summary** – It is our belief that DDS never intended to implement the CSS Program at Lanterman, despite their statements to the contrary. The evidence and result after three years does not support any other conclusion, except incompetence.

This should not be viewed as a “labor” issue. It is a commitment to the safety and well-being of our profoundly disabled citizens. Unless immediate changes are made to the CSS Program, this vital component to the Agnews closure will be irrevocably lost to Lanterman residents, and individuals who will be impacted by future DC closures.

**Recommendation** – We ask this committee to instruct DDS to immediately remove all of the “barriers” to CSS employment (as described above). We further ask that the committee mandate DDS to determine a realistic projection of what can be accomplished with a certain number of state staff participants, along with an immediate timeline for implementation.

Submitted by

**Anna Agopian and Dorothy Fulco**  
**Co-Presidents of the Parents Coordinating Council**

## STATEMENT MADE BY PCC REGARDING THE DECLINING CARE AT LANTERMAN

Good afternoon.

My name is Anna Agopian, and I am the Co-President of the Parents Coordinating Council at Lanterman Developmental Center. The PCC has included two Position Papers in your Briefing Materials, which I hope you will review carefully. But for the purpose of my three minutes, here's what this committee needs to know:

This committee needs to know that Stephanie is dead. Stephanie resided in Lanterman's skilled nursing facility, but was placed into a Group Home that did **NOT** meet the level of care required by SB-962 or SB-853. She died less than three weeks after her placement. Another resident of the same group home was hospitalized for dehydration during the same time. Despite repeated requests, neither DDS nor Inland Regional Center have provided any written explanation of what measures or corrective actions have been taken to insure this doesn't happen again. DDS did send a letter to the PCC Co-Presidents at 7:39 p.m. last night. I have not had time to review and evaluate the content.

This committee needs to know that David is dead. He died this past Sunday. Even though he was in a wheelchair, David was reported AWOL from his Unit last week. He was later found outdoors, badly bruised, after having fallen out of his wheelchair. He died a week later.

Another resident named David died earlier in the year. It is our understanding that he was breathing irregularly during the day and he died later that evening at Lanterman.

This committee needs to know that Chris is dead. In January, while still residing at Lanterman, Chris was found to have massive and unexplained bruising around his abdomen. He died a few days later. Despite repeated requests, neither DDS nor Lanterman have provided any real or satisfactory explanation to Chris's family.

Families have not been given adequate explanations to feel any sense of closure in the death of their loved ones. I don't want to be here again to discuss any more deaths in the community or at Lanterman. Please don't disregard families who have lost loved ones and those who are scared that their loved one will be next.

I would be happy to answer questions about setting a closure date, or the development of community housing, or the complete failure of the State Staffing Program. But my obligation is to represent Lanterman families, and Lanterman families want this committee to know that Stephanie is dead, and three young men are dead (Chris, David and David). They died with NO explanation, and NO accountability.

DDS can no longer be allowed to write its own Report Card. Lanterman families **beg** this committee to immediately impose some kind of meaningful and independent oversight for the Lanterman closure. We ask that this committee implement an office of Inspector General for oversight of the Developmental Centers as recommended by the LAO.

Thank you for your time and allowing me to participate on this panel. Since I am the first to speak, I am confident that you will allow me to comment on anything that may be brought up by the other panelists that I feel PCC would like to make a statement about.

Thank you again for your time.

Respectfully Submitted,  
Anna Agopian  
Co-President of the Parents Coordinating Council

**RESPONSE LETTER FROM NANCY BARGMANN, DEPUTY DIRECTOR,  
DDS, COMMUNITY SERVICES - ON THE DEATH OF STEPHANIE**

STATE OF CALIFORNIA--HEALTH AND HUMAN SERVICES AGENCY

EDMUND G. BROWN, JR, Governor

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1600 NINTH STREET, Room 320, MS 3-9  
SACRAMENTO, CA 95814  
TDD 654-2054 (For the Hearing  
Impaired) (916) 654-1958

April 10, 2013

Anna Agopian, Co-President  
Dorothy Juarez-Fulco, Co-President  
Parents Coordinating Council  
P.O. Box 4408  
Diamond Bar, CA 91765

Dear Anna and Dorothy,

There are many people and processes involved in ensuring the health and safety of the residents of Lanterman Developmental Center (LDC) once they move into the community. As we have discussed with you and other families at previous Parents Coordinating Council (PCC) meetings, a number of processes have been put into place to ensure safe transitions for individuals who are moving from LDC. This letter acknowledges your request to capture those discussions in writing to enable distribution to PCC members that may not have been able to attend past meetings.

Every situation brought to the Department's attention is taken seriously. The Department, Regional Centers, Department of Social Services (DSS), Regional Project and providers maintain collaboration to review best practices and will continue to evaluate transition needs on an individualized basis. Safety of individuals in the community is a top priority.

We understand that questions remain regarding the death of an individual who transitioned to a residential home in the Inland Regional Center (IRC) catchment area from LDC. Due to privacy laws, many of the details about the consumer's condition and care cannot be released. A general overview is provided below:

- An IRC consumer moved from LDC into Chateau Battiste on August 16, 2012. This move entailed an extensive transition process tailored to address the consumer's individual needs. Unfortunately, despite receiving timely and intensive hospital care and treatment, the consumer passed away on September 16, 2012.
- Chateau Battiste is an Adult Residential Facility for Persons with Special Health Care Needs (ARFPSHN) licensed to provide 24-hour health care and intensive support services in a homelike setting for up to 5 adults with developmental disabilities. All licensing requirements, operational regulations and guidelines for the development and operation of the facility were, and continue to be, strictly followed. The home's staff includes: two (2) registered nurses (RN), eight (8) Licensed Vocational Nurses and six (6) additional caregivers.

Follow up and oversight activities to the consumer's passing were conducted by a number of different entities. The Department's nurse conducted two on-site home visits, one of which occurred within three days of the consumer's death. To ensure enhanced oversight, IRC's nurse made daily visits to the home. Licensing staff conducted an on-site home review and the quality assurance staff from IRC has been conducting reviews of the home every two weeks. Although there were opportunities for improvement,

after reviewing reports, responses and the coordination of efforts among all parties involved, it was determined that no corrective actions were needed. Both IRC and the Department continue to make announced and unannounced visits to the home on an ongoing basis, as needed.

Once individuals from LDC move into the community, state staff provides follow-up at 5 days, 30 days, 60 days, 90 days, 6 months, and 12 months after the move, and onsite training to the service provider as needed to address the individual's service needs. When individuals from LDC move into an ARFPSHN home, they benefit from enhanced oversight over licensure requirements. As required by statute, Regional Center nurses visit 853 homes monthly and more often if needed. The Department conducts semi-annual reviews and the Regional Resource Development project maintains regular contact.

Additionally, the Department recently hired a full-time RN to oversee the ARFPSHN homes located in Southern California. Jaimie formerly worked at Fairview Developmental Center and started with the Department on April 2, 2013. She is responsible for monitoring regional center and service provider compliance with ARFPSHN statute and will conduct on-site visits to each licensed ARFPSHN. She is a liaison for the Department with Regional Centers, licensing staff, residential service providers and physicians related to consumer health care in the community. She will also be providing nursing consultation and technical assistance on issues related to the unique characteristics and health care needs of consumers living in ARFPSHN homes. Jaimie is based in Southern California, allowing for local access and immediate Department response to any ARFPSHN home.

In an abundance of caution, for oversight and to support consumers and providers, the Department remains deeply committed to working collaboratively with all interested parties and continuously reviewing current policies and practices to ensure safe, comfortable, satisfying community living arrangements for all residents who transition from LDC to the community. We appreciate the opportunity to partner with you and the other LDC families to ensure the best possible outcomes for all individuals moving from LDC.

If you have further questions, please don't hesitate to contact me or any member of our executive team.

Sincerely,

*Original signed by*  
NANCY BARGMANN

Deputy Director  
Department of Developmental Services  
Community Services Division

cc: Terri Delgadillo, DDS  
Carol Fitzgibbons, Inland Regional Center  
Patricia Flannery, DDS  
Amy Wall, DDS  
Cheryl Bright, Lanterman Developmental Center  
Danette McCarns, Lanterman Regional Project

# INLAND REGIONAL CENTER

...valuing independence, inclusion and empowerment

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April 9, 2013

Anna Agopian and Dorothy Fulco  
Co-Parents of Parents Coordinating Council and Friends  
PO Box 4408  
Diamond Bar, CA 91765

Dear Families and Friends:

Inland Regional Center (IRC) would like to provide families and friends and other members of the Parent Coordinating Council with information regarding the living environments for those persons moving from Lanterman Developmental Center into the community. This is a challenging time for you as the plans for closure of Lanterman move along. Thus, we understand that incorrect and incomplete information may have been provided to you and want to offer the following information to assist with clarity and understanding.

The Lanterman Developmental Disabilities Services Act was implemented by parents who had the strong hope, desire and need for community services to exist so that their children and adults with developmental disabilities were able to reside in their home communities with family and friends. Thus, in the 1960's design efforts began of the many ways that people could be part of their communities and not have to live many miles away from their families. Over these years, community resources have been developed to meet the very needs of those who today have been living at Lanterman Developmental Center.

With the commitment of legislators and guidance of parents, professionals and other state agencies, DDS and the Regional Centers developed community resources to fully implement the Lanterman Act as written. This was to meet the vision that individuals with developmental disabilities are able to access resources so that they may live in the least restrictive environment within their community and gain independence, empowerment, and inclusion.

Inland Regional Center has been a forerunner in developing and sustaining the resources required to support individuals and their families in their home community. The creation of resources starts with knowing the person and the family well. Learning about the community providers who are interested and committed to offering and providing the services that will enable the person to enjoy their community is the next step. When these two forces come together, success is achieved. IRC's role is to ensure the services are of quality, meet laws and regulations and match the person's needs and desires.

Today, the individuals who are living at Lanterman Developmental Center have very significant needs. Living environments have been developed that offer 24-hour health care with intensive support services to insure successful living in their home community. As needed for the people served by Inland Regional Center and through the use of a Request for Proposal process and team choice the most qualified provider to develop a community home was selected. The home, specifically the Adult Residential Facility for Persons with Special Health Care Needs, is licensed to serve no more than five adults with developmental disabilities who have significant health care and support needs as specific to serving consumers in the Acute and Continuing Medical Care Unit, Program 1 at Lanterman Developmental Center. The provider chosen to open this home has extensive experience and expertise delivering care for individuals with the same level of health care challenges as the people residing in the home today. *Also note:* IRC prefers to retain the home with 4 residents, but it is not possible in all situations, thus there is a vacant spot for someone who may need the same level of care and is currently living in the community and wishes to remain close to their family. All licensing requirements, operational regulations and guidelines as stated in California Health and Safety Code Licensing requirements, California Welfare & Institutions Code, California Code of Regulations- Title 17 for Regional Centers to follow in the development and operation of any vendor facility and California Code of Regulations – Title 22 which governs Community Care Licensing division were used and strictly followed to establish the home and for ongoing support for the individuals who choose to live at this home.

Prior to the home opening for the individuals, as listed above there is considerable participation of all responsible state agencies. A wide variety of tasks must be completed by Department of Developmental Services, Department of Social Services and the Division of Community Care Licensing, Department of Fire and Safety, local Fire Marshall, local Regional Center, Day Services, Transportation, and other community resources in the development of this home. As you are aware, there are visits made to the location to view the physical plant of the home, evaluate furnishings including those items that would allow for increased mobility & accessibility of the home, assess accessibility to community resources; and most importantly training proficiency for staff. It is also critical that an up to date comprehensive assessment has been completed for anyone moving to their home community. IRC has worked closely with the Lanterman Developmental Center staff to ensure data is current and outlines the person's capabilities as well as their overall care needs. These reports are current and updated as needed.

In early September, one of the individuals who chose to move from Lanterman Developmental Center with the support of her IPP team, began to experience health issues that required admittance into a hospital. The person received treatment over the course of many days but passed away while in the hospital despite their best efforts. All involved in the process of supporting this consumer's move to the community home were very satisfied with the care, supervision and treatment that were provided during that individuals' time at the home. The IPP team agreed that was the right environment for the person to be living in and the consumer appeared happy living in their new home.

IRC chose to increase its observation and analysis time by its trained professionals to assure a smooth transition and stability within the home for all the consumers. Those professionals included a Registered Nurse, Dietician, Occupational & Physical therapist. The consumer(s) primary physician is actively involved with the consumers as well. These practitioners meet with IRC and residential licensed staff to review any health issues and determine a plan to move forward and decrease the potential of a similar situation from occurring. After 6 months of increased, specialized oversight, IRC professional team has determined that some of these supports may be reduced based on the skills and practices of the staff. Access by the provider to these resources will not diminish.

IRC is committed to supporting a smooth closure of the large state owned and operated developmental centers as dreamed when the Lanterman Developmental Services Act was written and passed in the early 1960's. Our commitment is demonstrated by ensuring that Health and Safety provisions are in place and monitored; community services, homes and the individuals are monitored closely by the talented and experienced providers along with their trained, skilled staff and IRC's professional and clinical staff; any concerns are discussed with providers and swift action taken to modify or correct any

concerns with guidance from the entire team (providers' own consultants and staff along with IRC and other professionals); information is shared with families and the individual, DDS, LDC, other regulatory agencies.

*Again*, all involved in the process of supporting this consumer's move to the home were very satisfied with the care, supervision and treatment that were provided within the ARFPSHN home. We look forward to our ongoing working relationship with the families, consumers and the provider/s to provide the needed support as people make their moves from Lanterman Developmental Center.

We are available to talk with you and share information.

Sincerely,



Carol A. Fitzgibbons  
Executive Director

Copy: Terri Delgadillo, DDS

### ROUND TABLE DISCUSSION HOSTED BY RYAN GABRIELSON

On April 3, 2013 several families attended a Round Table Discussion on Lanterman hosted by Ryan Gabrielson of California Watch. Mr. Gabrielson is the Pulitzer Prize winning reporter who uncovered many instances of abuse at Sonoma DC, and the subsequent lack of investigation on the part of DDS. The PCC first contacted him when a former Lanterman resident died shortly after her placement in a Group Home in Inland Regional Center.

Many families (and staff) shared their personal experiences of both Lanterman DC and community homes, and offered their perspectives on DDS's handling of the current closure process. Mr. Gabrielson found the discussion to be enlightening, and promised to follow up with many of the families personally.

The PCC would like to thank Jerra Letrich for helping organize this discussion.

### REMEMBERING DAVID MEYERS

David's memorial service was held on Friday, April 19. Juan Pablo presided over the beautiful services. David's sister, Dian Allison, spoke about how pleased she and her family were with the good care David had received over the past 60 plus years he lived at Lanterman.

Since David had been at Lanterman for many years on different units there were numerous staff members that spoke on how much David would be missed and they thanked Dian for sharing her brother with them.

### UPCOMING PCC ELECTIONS

**Elections are coming in June 2013** - It is time for elections for new Officers and Board Members for the Parents Coordinating Council for 2013-2014. If anyone would like to run for the office of President, Vice President, Recording Secretary or Treasurer, or join the board, please contact the Nominating Committee, Dorothy Diamond and Elaine McKay at (909) 444-7572 **by May 1, 2013.**

## Highlights from Lanterman

"Highlights from Lanterman" is a communication tool that we hope will serve in keeping the Parents Coordinating Council, families and friends informed of activities and events throughout the Center. This first edition in the series is a summary of survey activity that has taken place since January 2013.

### **February 25, 2013: Medi-Cal Audit and April 8, 2013: Medicare Audit**

This auditing activity involved record reviews to ensure compliance with state and federal requirements in the areas of payeeship responsibilities and physicians billing. Overall, the findings were very positive.

### **March 4 – March 8, 2013: Environmental Health Survey**

A Staff Environmental Scientist with the State of California, along with Lanterman's Health and Safety Officer, surveyed all environments throughout Lanterman to ensure that safe working environments were evidenced, while also assessing the Center's readiness for the upcoming annual Licensing and Re-Certification surveys.

### **April 8 – April 16, 2013: Fundamental ICF Survey**

The Department of Public Health conducted the annual ICF fundamental survey. In every annual recertification survey, fundamental requirements are reviewed. Client Protection, Active Treatment Services, Client Behavior and Facility Practices, and Health Care Services are four of the eight Conditions of Participation that are reviewed during the recertification process. Surveyors evaluate services to see that individualized training is provided on a continuum throughout the day and that staff demonstrate knowledge of the clients and their program plans. The survey includes observations, interviews and record reviews, to identify if there are any issues relative to laundry storage, food storage, administration of medications, implementing individualized training, equipment maintenance, fire drills, reporting and reviewing incidents, IPP documentation and data collection, Human Rights Committee participation and consents. Although the findings are subject to the DPH Supervisor's review, all Conditions of Participation are expected to be met.

### **April 12, 2013: Medical Waste Inspection**

The Department of Public Health, Medical Waste Management Program, conducted a medical waste inspection. The Inspector is provided with Lanterman's current Medical (Bio-hazard) Waste Management Plan and Large Quantity Medical Waste Generator certificate. The Inspector reviewed two years of Medical Waste Tracking Forms and toured a variety of areas on campus. The Inspector commented that she was impressed by the pristine looking, calm and home-like environment. The

clinics and collections points were clean and organized. No deficiencies were indicated in our policies or procedures for disposal of medical waste.

### **April 16 – April 18, 2013: ICF Life Safety Code Survey**

The Department of Public Health began the annual ICF Life Safety Code Survey which is expected to continue through April 18. The Surveyors toured the campus with Lanterman's new Firefighter, Andrew Marques, and they are conducting an inspection, testing alarms and reviewing documentation. Survey results are sent to the Center ten days after the completion of the survey.

### **April 18 – 19, 2013: CARF Recertification Survey**

The Commission on Accreditation of Rehabilitation Facilities (CARF) is currently conducting a triennial survey to ensure that our Center's Vocational Services' program meets standards of quality. The surveyors interview consumers, their families and staff, conduct observations of facility practices, review documentation and provide recommendations for improving operations and service delivery. After the survey, CARF submits a report making their recommendation for accreditation.

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### **Upcoming Campus Events**

Saturday, April 20, 2013 – Special Olympics Track Meet at Cal Poly, Pomona.

Monday, April 22, 2013 – Movie shown in De Bell Auditorium at 3:00 pm.

Wednesday, April 24, 2013 – Rising Stars therapeutic riding program in Alta Loma.

Wednesday, April 24, 2013 – "After Hours" band, dance in De Bell Auditorium at 7:00 pm.

Thursday, April 25, 2013 – Spring craft in the gym at 3:00 pm.

Friday, April 26, 2013 – Arbor Day activity in De Bell Auditorium at 3:00 pm.

Monday, April 29, 2013 – *EARTH DAY*. Cooking Class in the Foster Grandparent/Senior Companion Clubhouse at 3:00 pm.

For staff members, Supporting Choices Training continues with classes on April 23 and 30 at 7:00 am in the Conference Room on Residence 27.

Lanterman Regional Project has moved to Residence 27. Hopefully many of you were able to visit the Regional Project's new home at their Open House on April 17, 2013.



**Parents Coordinating Council & Friends  
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www.lantermanpcc.org**

**The PCC welcomes** interested residents, families and Lanterman staff to attend all meetings. Contact the PCC office for information on meeting dates and times.

**The Contact, PCC Post, and the Website --** The Parents Coordinating Council communicates regularly with all Lanterman families and others who have shared their contact information with us, regardless of whether or not they are PCC members. We honor the privacy of all families and do not share any contact information given to us. The Communication Committee greatly appreciates everyone who helps us with the following methods we use to distribute information:

**The PCC POST** is a one-page emailed update sent out on most Fridays that gives condensed information on what has happened in the past week and what is coming up. This format allows us to get information out on a regular (and inexpensive) basis without waiting for the Contact to be published. People who do not have email or who do not get the **PCC POST** by email receive the past issues with their mailed **Contact**.

**The Contact** newsletter is mailed every 4 to 6 weeks. It contains articles and information on prior and upcoming meetings, important issues facing Lanterman, and updates on resident activities. It is designed to help family members who may not be able to visit Lanterman or attend meetings regularly keep in touch with what is going on.

[www.lantermanpcc.org](http://www.lantermanpcc.org) is our website address, where past issues of the Contact and the PCC POST may be found, along with meeting minutes, family resources, important links, newspaper articles, etc.

**Parents Coordinating Council & Friends at Lanterman Developmental Center**

**OFFICERS**

<b>Co-President</b>	<b>Anna Agopian</b>
<b>Co-President</b>	<b>Dorothy Juarez Fulco</b>
<b>Vice President</b>	<b>Dorothy Diamond</b>
<b>Secretary</b>	<b>Tom Emerson</b>
<b>Treasurer</b>	<b>Terry DeBell</b>

**The PCC is a 501 (c) 3 non-profit organization. Financial statements are provided upon request.  
The PCC newsletter is meant to educate families. All articles herein are the opinion of the authors.**