

January 18, 2013



Speaking out for people with intellectual & developmental disabilities



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**Reminders:  
Help VOR Grow!**

**Challenge!  
Recruit 5 New  
VOR Members  
Today!**

**Make a Lasting  
Impact with a  
Will Bequest**

## VOR Weekly News Update

News and views for VOR Advocates

Reminder: [VOR's Nominating Committee seeks individuals interested in serving on the VOR Board. Please respond by January 25.](#)

*Did you receive this as forwarded e-mail? If so, someone thought you would benefit from VOR's information. Please consider [joining VOR](#) and receive this E-News Update publication weekly!*

### VOR and You

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**Quotable**, by Brian Tracy

### Mark Your Calendars!

1. VOR 2013 Annual Conference and

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Your one-stop  
advocacy  
resource

## Washington Initiative, June 8 – 12, 2012

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### Save the Date! June 8 – 12, 2013

Dear VOR Members and Friends,

2013 marks VOR's 30th Anniversary. For a group that began with just a few families around Marty Pratt's kitchen table in Illinois, we've come a long way. VOR's membership is still comprised primarily of families and friends of individuals with intellectual and developmental disabilities (I/DD), but we boast thousands of members.

VOR's Annual Conference (**Sunday, June 9, 2013**) and Washington Initiative (beginning **Monday, June 10, 2013**), will be the pinnacle event marking our 30th year, with presentations that celebrate the advocacy teamwork that brought us through 30 years and will carry us forward into the future. Richard Male, a nonprofit strategist and consultant, will be our keynote speaker. As our dinner keynote speakers, Rich will focus on "teamwork and enthusiasm" as essential ingredients of success for nonprofits like VOR. Our program will also feature a panel discussion relating to VOR's new Quality in the Community Initiative. "Mission Possible: Standardizing quality across all care settings," will include parent and provider representatives who will discuss and share best practices in ICF/MR and home and community-based service settings.

These and other presentations, along with a Legislative Briefing will include a reception and dinner to maximize the networking that past participants cite as the most meaningful aspect of VOR's conference. To that end, we will also feature State Reports and a Networking/Hospitality Reception the Saturday evening before the Conference (**Saturday, June 8, 2013**).

## Reminders: Help VOR Grow!

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2013 marks another change. This year, we will be hosting our Conference and all related VOR meetings at the **Hyatt Regency Washington on Capitol Hill**. Located directly across the street from the Liaison, where past conferences were held, the Hyatt is just as convenient to Capitol Hill, Union Station and other Washington, D.C. landmarks. Details regarding reservations and room rates will be circulated shortly and placed on VOR's website at <http://vor.net/events>.

Please join us and help us celebrate 30 years of choice and quality advocacy on behalf of our family and friends with I/DD. Together We Will.

Respectfully,

***Ann Knighton***

VOR President

**2. VOR State Coordinator and Member Free Webinar: All Members are welcome**

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### Save the Date! February 13, 2013

On Wednesday, **February 13, 2013** at 12:00 pm central / 1:00 pm eastern, VOR is hosting a free one-hour State Coordinator and VOR Member Overview and Training Webinar. The Webinar will feature an overview of the VOR State Coordinator program, touching on the role of these important VOR leaders and the tools that VOR has prepared to assist them and all members as they promote VOR's Mission and growth.

The Webinar will be hosted/moderated by consultant Rich Male of RMA, Inc., with the agenda developed in response to input by State Coordinators. Among other topics, an updated Advocacy Manual will be featured that will be made available to all members, including but not limited to State Coordinators, for use with their local, state, and VOR advocacy.

Please mark your calendars for February 13 at 12:00 pm central / 1:00 pm eastern. More

details will be shared in advance of the Webinar.

### **3. American Health Care Association hosts DD-Fly In; VOR members welcome**

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**Save the Date! March 6, 2013**

The American Health Care Association / National Center for Assisted Living (AHCA/NCAL) invites all developmental disabilities (DD) services providers and families to attend our fourth annual "DD Services Providers Congressional Fly-in" event on **Wednesday, March 6, 2013**, at our Washington, D.C. offices. The event includes an overview of current legislative issues affecting DD services providers and their clients, guest speakers, and the opportunity for afternoon visits to your legislators on Capitol Hill.

[Read More](#)

### **VOR Quality in the Community Initiative**

Quality in the news . . .

### **4. Florida: State Representative Mike Fasano Files Legislation to Reform Assisted Living Facilities**

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**Office of Rep. Mike Fasano \* Press Release \*  
January 14, 2013**

Representative Mike Fasano recognizes that Florida has some very well run assisted living facilities that provide a much needed service to its residents. However, he also recognizes that this important industry, which serves some very vulnerable members of our community, needs improvement. To help raise the standard of care and safety of residents in Florida's ALFs, Representative Fasano has filed legislation that will bring needed reforms to the state's assisted living facilities.

The legislation (HB 187) makes some key changes in quality of care and safety.

[Read press release](#)  
[Read the bill \(HB 187\)](#)

## **5. Safe at home: Feds, states take steps to prevent home-care crime**

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*Modern Health Care Magazine* \* January 12, 2013

They are rare events. But serious crimes against homebound patients by their caretakers do happen.

In Brunswick County, N.C., police charged former home health provider Lisa Veronica McGee McClain, 43, with stealing a 74-year-old patient's personal information. McClain, employed by a local home-care agency, allegedly removed \$260,000 from the patient's bank account between 2009 and 2011. She was arrested last year in Washington on a warrant for the thefts, but was erroneously released, leaving her still at large today, according to Brunswick County Sheriff's Office Detective Edward Carter.

As healthcare companies look toward aggressive growth in the most intimate of settings—patients' own homes—more Americans are asking how much they really know about the new home-care aide who walks through the front door.

They soon might learn more about these providers. Nationwide, many people who deliver home care will fall under a new program in the Patient Protection and Affordable Care Act that will pay for background checks for any nurse, therapist or aide who comes into contact with a long-term-care patient.

CMS officials say the program is voluntary for now, but that it might be prudent for state leaders to plan for a congressional mandate in the near future. The CMS recently made such background checks mandatory for hospice workers and is considering doing so for other providers.

The HHS' inspector general's office is studying the issue and will report later this year on how many home-health agencies employ workers with criminal backgrounds. An October report on such agencies found 92% employed at least one staffer with a criminal conviction.

The greater scrutiny of home-care worker backgrounds comes as the go-go home healthcare industry gears up for substantial growth in the coming decade. Home-care aide employment is expected to balloon by 70% between 2010 and 2020. The industry currently employs about 1.2 million people providing services to an estimated 8.6 million Americans per year, according to data from the Joint Commission and the Labor Department.

But the number of people cycling through those jobs will be far higher than the number of new positions since the industry is marred by high turnover. Wages for entry level home-care aides are among the lowest in healthcare. Moreover, “though they themselves are providing healthcare, they do not have health coverage,” says Hollis Turnham, the Midwest director of PHI, a home-health workforce development organization based in New York. “It's not just wages, it's the whole compensation package that makes these jobs unattractive and difficult to do.”

No national system exists to track crimes against home-health patients. As a result, researchers are unable to study the extent of the problem or whether wages, benefits, worker morale, rising employment or other factors are leading to an increase in crimes in home care.

Low morale and inadequate worker training drive much of the concern about patient safety. “There are people who come to this work with bad intentions and bad motives,” Turnham says. “There are also people who have not had the training and skills development to deal with

stressful situations, and they do bad things. But the overwhelming majority ... want to do the right thing, and want the skills to do the right thing.”

[Read more](#)

**See also, [Widespread Abuse, Neglect and Death in Small Settings Serving People with Intellectual Disabilities](#)**

## **6. Scrutiny of community mental health centers is scant in fraud-prone states: federal report**

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*Modern Health Care Magazine* \* January 15, 2013

Despite years of warnings, the **private** contractors hired by the government that monitor for problems in Medicare community mental health centers still aren't actively looking for problems in some the states most prone to fraud for those services, such as Louisiana and Texas, a [new review of 2010 data](#) by the U.S. Department of Health and Human Services' Office of Inspector General shows.

And when government officials did gather enough evidence to kick a community mental health center out of Medicare, it took an average of 42 weeks to be removed from the list of approved providers. Nine agencies in Florida received payments totaling \$2.5 million between when their exclusions were approved and when their bills ceased to be paid, the report says.

HHS auditors have said previously that community health centers may be particularly vulnerable to fraud, even though government contractors tasked to look for problems in the most fraud-prone areas report scant investigative activity in the area.

Nationally, 206 community mental health centers received \$219 million in 2010 to provide about 25,000 Medicare patients with intense outpatient health services designed to help

beneficiaries trying to avoid psychiatric institutionalization. But past HHS inspector general work has found about half of the community-based providers had submitted “questionable” bills in 2010, two-thirds of which hailed from eight cities in Florida, Louisiana and Texas.

The new report finds that the Medicare administrative contractors in Texas and Louisiana did no work to identify fraud in community mental health programs, while the cases reported by MACs in Florida resulted mainly from the work of a collaborative, targeted enforcement program called the South Florida High-Risk Provider Enrollment Project.

Among zone program integrity contractors, more than 90% of all the cases investigated were in Florida, even though past research has found high levels of questionable bills in Baton Rouge, La., and Houston, the report says.

HHS officials acknowledged the vulnerability to fraud in the program, but said recent efforts to screen providers in high-risk programs and the monitoring of Medicare bills in real time using predictive analytic technology would help address the problem.

[Read full article](#)

See also, [Widespread Abuse, Neglect and Death in Small Settings Serving People with Intellectual Disabilities](#)

### **State News**

#### **7. Irony alert: Now closed New York Developmental Center to reopen for senior housing later this year**

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*Queens Chronicle* \* January 17, 2013

It may be the only building in all of Howard Beach that was not badly affected by Hurricane Sandy. The former Fineson Developmental Center building at 155-55 Cross Bay Blvd. is being converted into a new senior citizens

housing development by Catholic Charities of Brooklyn and Queens, and the construction site was not badly affected by Sandy.

[Read more](#)

## **8. Virginia: Training-centers plan needs adjustments**

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**The News & Advance (Richmond, Virginia) \***  
**January 12, 2013**

Virginia's plan for closing its mental-health training centers is being designed as it moves forward, with some apparent flexibility for people who don't want to move out of the centers, according to a report given Friday to legislators.

The state plans to phase out its five institutions — including the Central Virginia Training Center in Madison Heights — by 2020 under an agreement with the U.S. Department of Justice.

James Stewart, commissioner of the Department of Behavioral Health and Developmental Services, told a special committee of six delegates and state senators that Virginia's waiver system, which pays for the care of disabled people, must be redesigned to finish the closures.

The current waivers aren't enough to help those with the most complex medical and behavioral needs to live in community housing, Stewart said. Right now, that lack of flexibility in waivers is costing Virginia taxpayers more money.

Sen. Janet Howell, D-Fairfax, asked Stewart what happens if a parent or guardian of a training-center resident doesn't want the resident moved to community-based housing.

Stewart replied the Justice Department agreement requires Virginia to plan for moving all the training-center residents to smaller group homes or family-type housing.

"It's not a plan that has to be executed: that's

the choice issue," Stewart said, apparently referring to a state law saying no one can be forced to leave a training center if they choose to remain in the institution.

Virginia's plan anticipates some residents may choose to move to another institutional home.

[Read more](#)

**Quotable**

*"The key to success is to focus our conscious mind on things we desire not things we fear." ~ Brian Tracy*

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