



Annual QA Report

Welcome to the third DDS **Quality Assurance Brief**:

Protection & Affirmation of Rights



Ensuring that individuals' rights are protected and affirmed is one of the most basic outcomes for evaluating the quality of services and supports provided by DDS. Achieving this outcome is dependent upon a number of factors including the following:

Outcome I: PEOPLE UNDERSTAND AND PRACTICE THEIR HUMAN AND CIVIL RIGHTS

- PEOPLE EXERCISE THEIR RIGHTS IN THEIR EVERYDAY LIVES**

Outcome II: PEOPLE EXPERIENCE RESPECT FOR THEIR HUMAN AND CIVIL RIGHTS

- PEOPLE ARE TREATED WITH RESPECT**
- PEOPLE ARE TREATED EQUALLY**
- PEOPLE'S PRIVACY IS RESPECTED**

Outcome III: PEOPLE'S RIGHTS ARE PROTECTED

- PEOPLE'S RIGHTS ARE PROTECTED REGARDING THE USE OF RESTRAINTS**
- PEOPLE CAN GET HELP TO PROTECT THEIR RIGHTS**

A FEW REMINDERS ON HOW TO LOOK AT THE DATA:



The data that form the basis for the QA Briefs are drawn from a wide variety of quality assurance processes in which DDS is routinely engaged. These quality assurance processes allow for the timely review, intervention and follow-up on issues of concern. The information from these processes is integrated to provide a more complete or “holistic” picture of the quality of supports within the DDS system and to help identify areas that may become the focus for quality improvement initiatives and activities. In years past with the guidance of stakeholders, DDS established a set of **OUTCOMES** that represent system expectations and that form the basis for evaluating service quality.

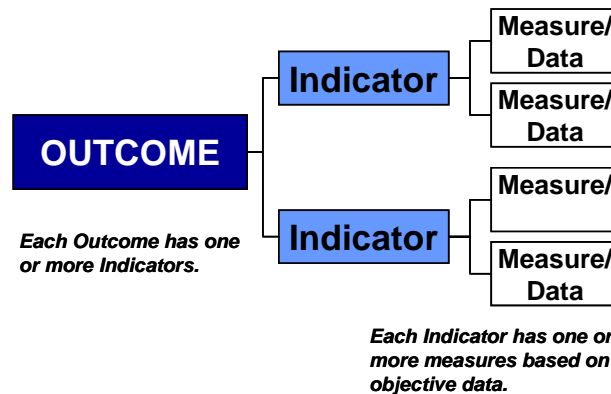
The DDS Quality Outcomes:

- **Health:** People are supported to have the best possible health.
- **Protection from Harm:** People are protected from harm.
- **Safe Environments:** People live and work in safe environments.
- **Practice Rights:** People understand and practice their human and civil rights.
- **Rights Protected:** People’s rights are protected.
- **Choice and Decision Making:** People are supported to make their own decisions.
- **Community Integration:** People use integrated community resources and participate in everyday community activities, and, people are connected to and are valued members of their community.
- **Relationships/Family Connections:** People gain/maintain friendships and relationships.
- **Achievement of Goals:** People are supported to develop and achieve goals.
- **Work:** People are supported to obtain work.
- **Qualified Providers:** People receive services from qualified providers.

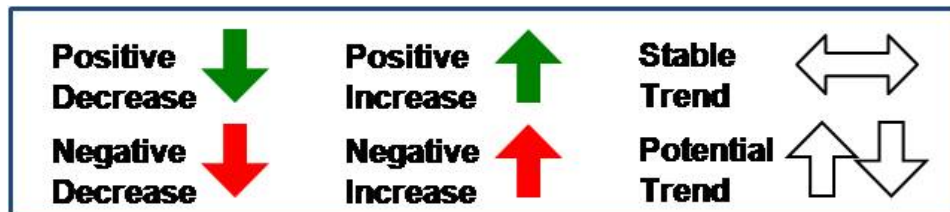
A Few Reminders *(continued)*

Outcomes, Indicators, and Measures

To help evaluate each of the **OUTCOMES**, DDS has established a series of related **INDICATORS** as a way to know if the outcome is being achieved. Each indicator has a set of **MEASURES**, or specific **DATA** that are used to evaluate progress and trends over time. The relationship between outcomes, indicators and measures is illustrated below:



Much of the data that are included in the Briefs has been tracked over the past four to five years and therefore allows a direct comparison of the current report year with prior years. To help understand these trends, summary data tables for each major indicator include **COLORED ARROWS**. Arrows pointing up indicate an increase. Arrows pointing down indicate a decrease, and arrows pointing left or right indicate a stable trend (no meaningful change). Green arrows indicated a positive trend (i.e. desired or “good”). Red arrows or indicate a negative trend (i.e., not desired or “bad”).



For purposes of standardization, positive and negative trends are only identified when the year to year change is statistically significant.

Special Note: Readers are cautioned to use the information contained in this report as only one method for conducting a thorough assessment of quality and progress toward systems improvement. More in-depth analyses should always be conducted and probative questions explored before drawing any definitive conclusions with respect to patterns and trends.

SOME KEY FINDINGS

OUTCOME I: PEOPLE UNDERSTAND AND PRACTICE THEIR HUMAN AND CIVIL RIGHTS

- More people in DDS-reviewed programs **exercised their rights** in their everyday lives in FY10 (99%) compared to FY09 (97%).
- In FY08-09, about 1 out of every 3 people surveyed **participated in a self-advocacy** event.

OUTCOME II: PEOPLE EXPERIENCE RESPECT FOR THEIR HUMAN AND CIVIL RIGHTS

- Almost all people in DDS-reviewed programs in 2008-10 **experienced respectful interactions** with staff and others.
- Almost all people (95%) said they can **use the phone and internet** when they want.
- Almost all people surveyed in employment programs are **treated the same** as other employees.
- Most people feel they have **enough privacy** at home (88-90%).
- In community-based residences, about 1 out of every 10 people said their **mail was opened without their permission**. For people who live in their own home independently or with their parents, about 2 out of every 10 people said their mail was opened without their permission.
- A small proportion of people (about 1 in every 10) reported that other **people enter their home without their permission**.
- About 15% of people reported that other people **enter their bedroom without their permission**.
- All people surveyed who live at home independently reported that they can be **alone with visitors** in their home. For people living in community-based residences, about 8 out of every 10 people said they did not have restrictions on being alone with visitors.

OUTCOME III: PEOPLE'S RIGHTS ARE PROTECTED

- Most people had **less intrusive interventions** used before more restrictive ones for FY 2006 - 2010. In FY 2010, a larger proportion of people had less intrusive interventions used than in FY 2009.
- **Informed consent** was given for the use of any **restrictive interventions** in 93% of situations, which was significantly higher than the proportion with consent in FY 2009.
- About 1 in 20 people (5.5%) were **restrained** in facilities and a similar proportion were restrained in community settings (5.2%).
- In community settings, the **average number of restraints per person restrained** was just under 4 in FY 2009 and FY 2010. The average number of restraints per person is slightly higher in facilities at 6.5 than in 2009.
- Almost all people in DDS-reviewed programs (99%) **know how to file complaints**.

OUTCOME I: People understand and practice their human and civil rights


Indicators:

- I. People exercise their rights in their everyday lives.

RESULTS:

In comparison to FY2009, Survey and Certification findings show a significant increase in the percent of people in DDS-reviewed programs who are exercising their rights in FY2010.


Table 1
Summary of Trends for Protection from Harm Indicators and Measures FY2009

OUTCOME	Indicator	Measure	Change FY09-FY10
PRACTICE RIGHTS <i>People understand and practice their human and civil rights</i>	I. People exercise their rights in their everyday lives	Percent Exercise Rights	
		Proportion participated in a Self-Advocacy event	<i>1st yr of data</i>

Measure I: Percent of Individuals Who Exercise Their Rights

What Is This? These data come from survey and certification reviews by DDS of providers residential and/or day/employment services. These data tell us the percentage of individuals who exercise their rights.

Table 2
No. and Percentage of Persons Who Exercise Their Rights FY 2006 - 2010

Exercise Rights	2006	2007	2008	2009	2010	Type of Change
No. Applicable	3,081	2,743	1,890	1,074	969	
No. Exercising Rights	2,997	2,674	1,866	1,044	959	
Percent Exercising Rights	97%	97%	99%	97%	99%	

What Does This Mean? The extent to which people were seen as exercising their rights in their everyday lives based on Survey and Certification reviews remained extremely high (97% and 99%) for 2009 and 2010. A significantly higher proportion of people exercised their rights in FY2010 compared to 2009.

Measure II: Proportion of people who participated in a Self-Advocacy event

What is it? This is a measure of the percent of people who have participated in a self-advocacy group meeting, conference, or event in the past year. This information is gathered from a sample of consumers as part of the National Core Indicators (NCI) project. The NCI data are based on face to face interviews with individuals receiving supports.

**Table 3
Percentages of People Who Participated in a Self-Advocacy Event FY 2008 - 2009**

Self-Advocacy	MA DDS	National Average
People living in:		
Community-based residences	33%	36%
Their own home independently	30%	32%
Their parent’s home	25%	27%
Overall	29%	32%

What Does This Mean? This is the first year this indicator is being reported in this QA report. The percent of people who participated in a self-advocacy event was within the national average. In FY08-09, about 1 out of every 3 people surveyed participated in a self-advocacy event.

OUTCOME II: People Experience Respect for their Human and Civil Rights

Indicators:

1. People are treated with respect
2. People are treated equally
3. People’s privacy is respected

RESULTS:

Over time there has been very little change in the Survey and Certification findings regarding the extent to which people in DDS-reviewed homes and day supports are treated with respect by staff and others, as shown in Table 4.

Table 4
Summary of Trends for Protection from Harm Indicators and Measures

OUTCOME	Indicator	Measure	Change FY09-FY10
PEOPLE EXPERIENCE RESPECT FOR THEIR HUMAN AND CIVIL RIGHTS	1. People are treated with respect	Percentage experiencing respectful interactions	↔
		Percentage who use phone and internet when they want	<i>1st yr of data</i>
	2. People are treated equally	Percentage who receive same treatment as others at work	↔
	3. People’s privacy is respected	Proportion who feel they have enough privacy at home	<i>1st yr of data</i>
		Percentage of people whose mail is only opened with their permission	<i>1st yr of data</i>
		Proportion whose home is entered without permission	<i>1st yr of data</i>
		Proportion whose bedroom is not entered without permission	<i>1st yr of data</i>
		Proportion can be alone with visitors	<i>1st yr of data</i>

OUTCOME II, INDICATOR 1: People Are Treated With Respect

Measure I: Percentage of people who experience respectful interactions

WHAT is it? Survey and Certification reviews gather information from individuals in residential and day settings licensed by DDS to determine whether they experience respect from staff at the day and residential programs. Similarly, the National Core Indicators project asks a sample of people whether staff are usually nice and polite in three different places: day programs, work and at home.

**Table 5
Percentage of Persons Experiencing Respectful Interactions
2006 – 2010**

Respectful Interactions	2006	2007	2008	2009	2010	Type of Change
MA Day & Residential	<99%	99%	99%	98%	>99%	↔

Source: Survey & Certification data

**Table 6
Percent of People Reporting that Staff is Nice and Polite by Setting
FY 2008 - 2009**

Staff are Nice and Polite	MA DDS			National Average		
	At Home	At Work	At Day Program	At Home	At Work	At Day Program
People living in:						
Community-based residences	94%	91%	95%	93%	94%	95%
Their own home independently	89%	80%	99%	94%	92%	95%
Their parent’s home	94%	91%	93%	97%	95%	95%
Overall	93%	88%	94%	94%	95%	94%

Source: NCI data

What Does This Mean? Survey and Certification reviews during 2009 and 2010 found that almost all people in settings/programs reviewed were found to experience respectful interactions with staff and others. Interestingly these results are slightly higher than those obtained in the National Core Indicators evaluation. Massachusetts is similar to the average of all states surveyed in the National Core Indicators. Slightly fewer people feel that staff members at work are usually nice and polite than in other settings and the national average for work settings. A slightly smaller proportion of people (about 4 out of every 5 people) who live in their own home independently reported that staff members are usually nice and polite at work than was reported nationally.

Measure II: Percentage of people who use phone and internet when they want

What Is This? These data represent the percent of people who are allowed to use phone/internet when they want to. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table 7
Percent of People Who Can Use the Phone and Internet When They Want
FY 2008 - 2009

Use of Phone and Internet	MA DDS	National Average
People living in:		
Community-based residences	97%	91%
Their own home independently	100%	97%
Their parent's home	91%	87%
Overall	95%	91%

What Does It Mean? Almost all people (95%) said they can use the phone and internet when they want. The percent was highest for people who live in their own home independently and slightly lower for people who live in their parent's home. A significantly larger proportion of people in Massachusetts reported this access compared to the national average.

OUTCOME II, INDICATOR 2: People Are Treated Equally

Measure I: Percentage of people who receive the same treatment as other employees at work

What Is This? The Survey and Certification process reviews the extent to which individuals within DDS employment settings are treated in the same manner as other employees.

**Table 8
No. and Percentage of Persons Who Receive the Same Treatment as Other Employees (Employment Programs Only) FY 2006 - 2010**

Treated Same as Other Employees	2006	2007	2008	2009	2010	Type of Change
No. Reviewed	1,285	1,160	843	385	322	
No. Treated Same	1,247	1,133	822	378	321	
Percent Treated Same	97%	98%	97%	98%	>99%	↔

What Does This Mean? As can be seen below in Table 8, reviews demonstrate the presence of a stable trend, with almost all people surveyed treated in the same manner as other non-disabled employees during FY 2009 and 2010, about the same level as previous years.

OUTCOME II, INDICATOR 3: People’s privacy is respected
Measure I: Proportion who feel they have enough privacy at home

What Is This? The percent of people who report satisfaction with the amount of privacy they have at home. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table 9
People Who Feel They Have Enough Privacy at Home

Enough Privacy at Home		
	MA DDS	National Average
People living in:		
Community-based residences	88%	92%
Their own home independently	95%	94%
Their parent’s home	90%	89%
Overall	90%	90%

What Does It Mean? Most people interviewed (90%) felt they had enough privacy at home. A slightly higher proportion of the people who lived in their own home independently felt they had enough privacy, compared to people living in community-based residences or in their parent’s home. The findings for Massachusetts are within the national average.

Data Measure II: Percentage of people whose mail is opened without permission

What Is It? This is the percent of people who report that their mail is opened without their permission. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table 10
People Whose Mail is Opened Without Their Permission

Mail Privacy		
	MA DDS	National Average
People living in:		
Community-based residences	13%	10%
Their own home independently	19%	12%
Their parent’s home	21%	13%
Overall	17%	12%

What Does It Mean? For people living in community-based residences, about 1 out of every 10 people said their mail was opened without their permission. For people who lived in their own home independently or with their parents, about 2 out of every 10 people said their mail was opened without

their permission. It is interesting that the percentage of people living independently report their mail being opened more frequently than those living in staffed residencies. In Massachusetts, a larger proportion of people living in their parent’s home and in their own home independently reported their mail is opened without their permission than the national average.

Measure III: Percentage of people whose home is entered without permission

What Is It? The percent of people who report that other people enter their home without their permission. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table II
People Whose Home is Entered Without Their Permission

Home Entry		National Average
People living in:	MA DDS	
Community-based residences	15%	14%
Their own home independently	8%	6%
Their parent’s home	7%	6%
Overall	12%	12%

What Does It Mean? A small proportion of people (about 1 in every 10) reported that other people enter their home without their permission. A slightly higher proportion of people reported this in community-based residences than in other settings. The findings for Massachusetts were similar to the national average.

Measure IV: Percentage of people whose bedroom is entered without permission

What Is It? The percent of people who report that other people enter their bedroom without their permission. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table 12
People Whose Bedroom is Entered Without Their Permission

Bedroom Privacy	MA DDS	National Average
People living in:		
Community-based residences	16%	18%
Their own home independently	9%	10%
Their parent’s home	14%	21%
Overall	15%	19%

What Does It Mean? About 15% of people surveyed reported that other people enter their bedroom without their permission. A slightly lower proportion of people who live in their own home independently reported entry into their bedroom without their permission. The findings for Massachusetts were similar to the national average for people living in community-based residences and in their own home independently, and are lower than the national average for people living in their parent’s home.

Data Measure V: Percentage of people who can be alone with visitors at home

What Is It? The percent of people who report that they do not have restrictions on whether they can be alone with visitors at their home. This information is gathered from a sample of consumers as part of the National Core Indicators project.

Table 13
People Who Can Be Alone with Visitors

Alone with Visitors	MA DDS	National Average
People living in:		
Community-based residences	84%	85%
Their own home independently	100%	92%
Their parent’s home	71%	81%
Overall	85%	84%

What Does It Mean? All of the people who live at home independently reported that they can be alone with visitors in their home. For people living in community-based residences, about 8 out of every 10 people said they did not have restrictions on being alone with visitors. People living in their parents’ home were slightly more likely to have restrictions on visitors. About 7 in 10 people said they could be alone with visitors. The overall findings for Massachusetts were within the national average.

OUTCOME III: People’s Rights Are Protected





Indicators:

1. People’s rights are protected regarding the use of restraints
2. People can get help to protect their rights

RESULTS:

In comparison to FY2009, a significant increase was observed in the percent of situations where a less intrusive intervention was used before a more restrictive one was used, and the percent of times consent was obtained for restrictive interventions. There was a stable trend in the percent of people who know how to file a complaint.

Table 14
Summary of Trends for Rights are Protected Indicators and Measures
FY 2007 – 2010

OUTCOME	Indicator	Measure	Change FY09-FY10
Rights Protected <i>People’s rights are protected</i>	1. People’s rights are protected regarding the use of restraints	Percent - Less intrusive interventions are used before implementing a restrictive intervention	
		Percent - Individuals consent is required for restrictive interventions	
		Proportion of people restrained	N/A
		Average number of restraints per person	
	2. People can get help to protect their rights	Percent - People know where and how to file a complaint	


INDICATOR 1: People’s rights are protected regarding the use of restraints

Measure I: Less intrusive interventions are used before implementing a restrictive intervention

WHAT is it? These data come from survey and certification reviews by DDS of providers of residential and/or day/employment services. DDS standards require that providers utilize the least intrusive methods

prior to implementing an intervention that restricts an individual’s’ rights. These data tell us the percentage of individuals who have had less intrusive interventions tried before a more restrictive intervention was used.

Table 15
Persons with Less Intrusive Interventions Used First
FY 2006 – 2010


Less Intrusive Interactions	2006	2007	2008	2009	2010	Type of Change
No. Reviewed	2,612	2,210	1,709	1,070	966	
Less Intrusive Interventions Used First	2,563	2,162	1,660	1,022	948	
Percent Less Intrusive Intervention Used First	98%	98%	97%	95%	98%	

WHAT does it tell us? Survey and Certification reviews regarding the use of less intrusive interventions show most people have less intrusive interventions used for FY 2006 – FY 2010. In FY 2010, a significantly higher proportion of people had less intrusive interventions used than in FY 2009.

Measure II: Individuals consent is required for restrictive interventions

WHAT is it? These data come from survey and certification reviews by DDS of providers of residential and/or day/employment services. DDS standards assure that informed consent is obtained from either the individual or his/her guardian as a pre-condition to implementing a restrictive intervention. This data tells us the percentage of individuals who provide informed consent for the use of restrictive interventions.

Table 16
Persons with Restrictive Interventions Who Provided Informed Consent
FY 2006 – 2010

Consent for Restrictive Interventions	2006	2007	2008	2009	2010	Type of Change
No. Applicable	1,498	1,195	851	523	513	
No. with Consent	1,338	987	747	445	479	
Percent with Consent	89%	83%	88%	85%	93%	

WHAT does it tell us? During the Survey and Certification process, a review is conducted to determine whether informed consent was given for the use of any restrictive interventions. This review includes an

analysis as to whether a full explanation is provided regarding the risks and benefits of a procedure and the presence of an appropriate explanation of a person’s rights to withdraw that consent at any time. Survey and Certification reviews in FY 2009 indicate that 89% of persons with restrictive interventions had all appropriate processes followed with respect to obtaining informed consent, an increase from levels present in prior years. This percentage was 93% in FY 2010, which was significantly higher than the proportion with consent in FY 2009.

Measure III: Proportion of people restrained

WHAT is it? These data come from DDS’s information on restraints reported by state operated and provider agencies licensed to provide community-based services and DDS operated developmental centers. These data tell us the number and percentage of individuals served by DDS who experience emergency restraint.

Table 17
Restraint Utilization for Persons in Facilities and Community Settings
FY 2006 – 2010

Restraints		2006	2007	2008	2009	2010	Type of Change
No. People Served¹	Facility	1,013	994	903	866	795	
	Community	12,773	12,547	13,209	13,108	16,105	
	Combined	13,786	13,541	14,112	13,974	16,900	
No. People Restrained	Facility	48	59	53	51	44	
	Community	729	758	762	736	832	
	Combined	777	817	815	787	876	
Percent Restrained	Facility	4.7%	5.9%	5.9%	5.9%	5.5%	↔
	Community	5.7%	6.0%	5.8%	5.6%	5.2%	N/A
	Combined	5.6%	6.0%	5.8%	5.6%	5.2%	N/A

¹ In 2010 and 2011, the service groupings used by DDS underwent substantial reorganization. A detailed review was conducted to ensure that all service codes in which a reported restraint could occur was included in the base population. As a result, the base population from 2011 is used to calculate the percent restrained, and this population is more inclusive than the definition used in prior years. These changes limit the comparability of 2010 data to prior years.

WHAT does it tell us? In 2010, 5.5% or about 1 out of every 20 people residing in facilities was restrained. This proportion was similar to previous years. In community residential settings, the proportion of people restrained was 6.3% or about 1 out of every 15 people. This proportion is significantly higher in 2010 than in 2009 and 2008.

Measure IV: Average number of restraints per person

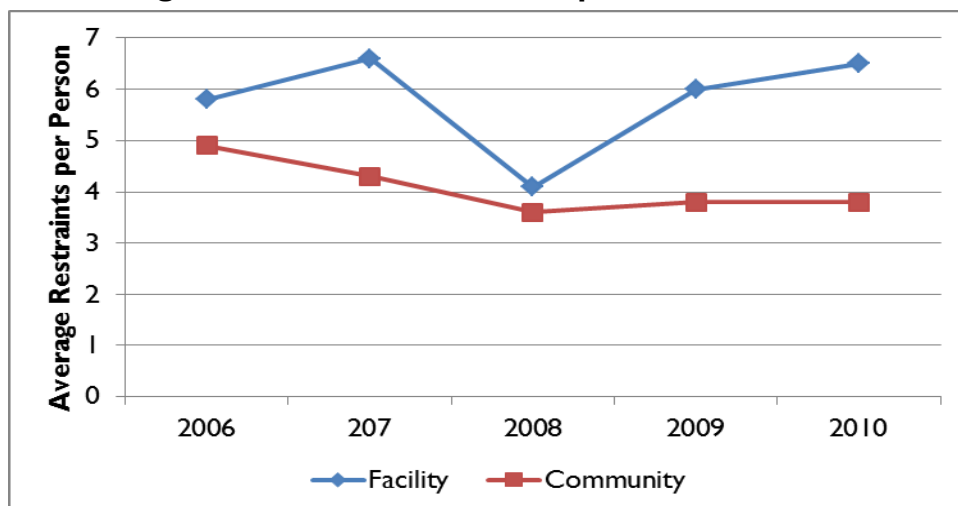
WHAT is it? These data come from DDS’s information on restraints reported by state operated and provider agencies licensed to provide community-based services and DDS operated developmental centers. These data tell us the average number of restraints used per person restrained.

Table 18
Average Annual No. of Restraints per Person Restrained, FY 2006 – 2010

Avg. Restraints per Person		2006	2007	2008	2009	2010	Type of Change
Facility		5.8	6.6	4.1	6.0	6.5	↑
Community		4.9	4.3	3.6	3.8	3.8	↔
Combined				3.6	3.9	4.0	↔

WHAT does it tell us? Table 18 and Figure 1 show the average number of restraints that each person restrained experienced during the fiscal year. In community settings, the average number of restraints was just under 4 in FY 2009 and FY 2010. This average is similar to other years. The average number of restraints per person is slightly higher in facilities at 6 and 6.5 during this time period. While this average is higher than 2008 levels, it is similar to the average seen in 2006 and 2007.

Figure 1
Average Annual No. of Restraints per Person Restrained



OUTCOME III, INDICATOR 2: People can get help to protect their rights
Measure I: People know where and how to file a complaint

WHAT is it? These data come from licensure and certification reviews by DDS of providers of residential and/or day/employment services. These data tell us the percentage of individuals who know where and how to file complaints.

These data only reflect the settings that are reviewed by the DDS survey and certification process. It should not be used to evaluate services and supports provided or funded by DDS that are not part of this formal review process.

Table 19
No. and Percentage of Persons Who Know How to File Complaints
FY 2006 - 2010

Know How to File a Complaint	2006	2007	2008	2009	2010	Type of Change
No. Applicable	3,081	2,743	1,881	1,062	964	
No. Who Know How to File Complaint	3,039	2,711	1,845	1,049	952	
Percent Who Know How to File Complaint	99%	99%	98%	99%	99%	↔

What Does This Mean? Almost all individuals reviewed in the Survey and Certification process know how to file complaints. Reviews suggest that this quality measure has been extremely stable over the past five years.

WHAT'S HAPPENING?

DDS Activities to Support and Protect Rights

There are a number of initiatives underway to address some of the issues identified in this Quality Assurance Brief. They include:

1. **Quality Improvement Initiative:** The goal of this initiative is to change the way DDS supports individuals by incorporating Positive Behavioral Supports into the Department's culture. Towards this end, DDS has recently published a document entitled "***Strategic Direction for Clinical Supports and Standards: Implementing Positive Behavioral Supports***" which describes the Department's vision for change. The document outlines both short term and long term goals for behavioral supports.

In the short term, the Department plans to:

- Develop technical standards for the creation and approval of behavior plans,
- Eliminate the use of prone restraint,
- Develop a new classification system for restraints, and
- Further clarify the role of peer review and Human Rights Committees as an element of a robust quality assurance system

Longer term goals include:

- Promotion and support for a behavioral support system that is focused on understanding the communicative value of behavior with a corresponding decrease in the use of restrictive interventions for the purpose of managing behavior,
- Early recognition and intervention to support individuals with behavioral challenges through assessment of the environmental context,
- A clear focus on prevention rather than reaction to problem behaviors,
- Promotion of a range of interventions and strategies,
- Refinement of the way individuals are supported to receive psychiatric and other treatment modalities in a more holistic fashion which views the person in an integrated manner,
- Promotion of a culture that supports opportunities for learning and practicing new skills which will directly assist individuals' efforts to realize their dreams and improve their quality of life.

The Commissioner has established a Positive Behavioral Supports Advisory Council to guide the activities around this important initiative.

2. **Phase out of Level III Interventions:** The Department has recently published revisions to the regulations (115 CMR 5.14) pertaining to a category of aversive treatment interventions, termed "Level III" interventions. Level III interventions involve contingent application of physical contact including hitting, slapping, pinches, slaps and contingent skin shock. Level III also includes time outs longer than 15 minutes. As of October 31, 2011, no level III interventions may be initiated or



employed in any program licensed by the Department unless the interventions were previously part of a court approved behavior plan.

3. **Elimination of Prone Restraints:** The Department's Restraint Curriculum Review Committee has reviewed all approved curricula to assure that they do not include the use of prone restraints.
4. **Emphasis on Informed Consent for Restrictive Interventions:** As part of the Department's review of providers for purposes of licensure and certification, surveyors review whether all required processes were utilized to obtain informed consent for restrictive interventions. While this report details findings up to and including 2010, recent data reviewed for 2011 shows that there was an increase in compliance with following all required consent procedures.