



ILLINOIS DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE REGULATION
DEVELOPMENTALLY DISABLED FACILITY ADVISORY BOARD MEETING
February 7, 2018 • 10:00 AM – 12:00 PM

APPROVED MINUTES

I. CALL TO ORDER AND INTRODUCTIONS

Darlene Harney facilitated the meeting in Connie Jensen's absence due to inclement weather. The meeting was called to order at 10:06 a.m. and introductions were made.

MEMBERS PRESENT: Deborah Kennedy, Michael (Mike) Bibo, Jeff Stauter, Dr. Geunyeong Pyo, Lois Sheaffer-Kramer, Anne Fritz, Dale Simpson, Fabricio Balcazar and Susan Fonfa

MEMBERS NOT PRESENT: Nancy Andrade

IDPH REPRESENTATIVES: Darlene Harney, George Logan, Sean Dailey, Daniel Levad, Kevin Fargusson, Sherry Barr, Lisa Griffith, Dennis Schmitt, Elaine Huddleston, Connie Jensen, Jody Gudgel, and Tena Horton

GUESTS: Bill Bell, and Marie Rucker.

A quorum was established.

II. APPROVAL OF MEETING MINUTES

The drafted meeting minutes for November 7, 2017 were reviewed. A motion was made to approve the minutes as presented, 2nd and motion was unanimously carried.

III. MEMBERSHIP UPDATE

- A. Membership vacancies:
 - (1) Physician Member
 - (1) Resident Advisory Council Member

- B. Expired terms – N/A

Darlene Harney asked if knew of anyone who may be interested in serving in one of the vacant positions to have them contact Tena Horton for an application.

IV. OLD BUSINESS

- A. **Rulemaking – (77 IAC 350 SSNs, 77 IAC 390 SSNs):**
 - Sean Dailey reviewed status of the rulemaking on Parts 350 and 390
 - a) Rules for both Parts have been proposed.
 - b) The first notice for Part 390 has expired. There were no comments. Staff is preparing to move to second notice.
 - c) The first notice for Part 350 will expire early March and will be sent to second notice at that time.

B. Rulemaking – (77 IAC 395 Ratios):

1. Sean Dailey advised the Board that the first notice for Part 395 expired. Lisa Griffith sent the second notice a couple of weeks ago and it should be on the JCAR agenda in February or March 2018.

C. Informed Consent (IC) for Psychotropic Medication Form:

1. Darlene Harney stated any that comments/recommendations were to be sent by 12/29/17. The Department did receive comments/recommendations which are included with the attachments.
2. Darlene Harney opened for discussion. Board members shared their questions and concerns with the form.
 - a) Dr. Geunyeong Pyo indicated that she preferred Deborah Kennedy's version of the IC. It is much easier and would be more customer friendly.
 - b) Fabricio Balcazar asked were there any considerations for training the customers on how to complete the form. Deborah Kennedy indicated that the question should be is there training for both the customer and staff. Lois Sheaffer-Kramer had concerns about patients who have multiple disorders and their ability to refuse consent even with guardianship.
 - c) Deborah Kennedy indicated that the form should be simplified as the Board wants to get it finish. There was a brief discussion on other concerns regarding a customer's refusal of medications.
 - d) Mike Bibo asked is it an assumption that in the middle of the first page if it is a "black box" statement regarding the possible side effects. Has concerns with Food and Drug interaction and who would complete the information on the form. Deborah Kennedy indicated that it would be staff completing the form. Mike Bibo disagreed with the process. Anne Fritz expressed that a physician or provider should complete the side effects section.
 - e) Mike Bibo indicated the Wisconsin's has some examples of their consent forms on their website. The example would be made available at the next Long Term Care Advisory Board meeting. Mike indicated that the Department will need to develop a rule designating a standardized consent form with "black box" medication listing separate from the IC on website pursuant to 210 ILCS 2-106.1. Brief discussion on the interpretation of the Act.
 - f) Deborah Kennedy stated that the Department would have to develop an individualized review. IC should be rephrased to say "My physician has explained the possible side effects". Dr. Pyo had concerned that if the IC is too long patients would have the tendency to throw it away. Again, the IC should be simple. Jeff Stauter indicated that just because the IC is complicated does not mean the consumer does not have the right as everyone else.
 - g) George Logan asked if there was a protocol set up for the Wisconsin IC. He agreed with Mike Bibo that a protocol will have to be developed. It was noted that 2.106-1 has not been updated since 1996.
 - h) Bill Bell asked if the Department is planning on having one (1) IC or will there be different ICs. Darlene indicated that it is best to have only one (1) form. DD is proposing a new form for their own Board. The Department will review to ensure they are following the statutes and then make recommendations.
 - i) Fabricio Balcazar recommended changing the verbiage to read "I have read and understand the consequences or side effects of this medication..." and whether they agree or disagree.
 - j) Lois Sheaffer-Kramer also wanted to address the issue of food eaten being contraindicated. How would this issue be addressed and what type of intervention is in place? Jeff Stauter stated the plan would be updated for a particular patient to ensure no harm is caused. Sue Fonfa stated that the patient should recognize what they can and cannot eat. But, it is their choice to eat or not to eat.
 - k) Pertaining to the Wisconsin IC discussion, Darlene Harney informed the Board members that some Boards members are at a disadvantage as they were not provided a copy of the Wisconsin IC. She advised that the Wisconsin IC be sent to the other Board members for their review. Recommended a motion to vote; Mike Bibo motioned to vote; Jeff Stauter seconded. Voted unanimously to have the

Wisconsin IC be shared with the other Board members.

- l) Deborah Kennedy stated she would share a link to a website that lists all the possible medications. The link will be sent to Tena Horton for distribution to the Board members.
- m) Darlene informed the Board that there were two (2) other IC forms submitted by Dr. Maurer for the Board's review. No comments/ recommendations were made.

V. New Business

A. Emergency and Non-emergency Restraint Rules:

- 1. Sean Dailey indicated that he is working on the Emergency and Non-emergency Restraint Rules and is trying to incorporate the Federal requirements. These rules will be sent to Legal Services soon.

B. Identified Offender Rules:

- 1. Sean Dailey indicated that the Identified Offender Rules are still being drafted. These rules were first added in the Nursing Home Care Act in 2005 when the DD/MCDD facilities were under this Act. There were problems with the initial language and requirements and were revamped a year later. Sean gave a brief history regarding the rules. He advised the Board that the Department was unaware that the Identified Offender Rules had been added to the MC/DD Act. Screen requirements which are mandated and have been added to the rules. However, the rules will not be filed as an emergency rule unless JCAR has concerns.
- 2. Mike Bibb indicated that the statute must be changed. George Logan indicated that IDPH cannot be a sponsor that possibly Mike's community could perhaps become the sponsor.

No recommendations/comments/objections were made.

Meeting was adjourn at 10:53 a.m.

Videoconference locations
122 S. Michigan Ave., Room 711, Chicago
525 W. Jefferson St., 4th floor, Springfield
5415 N. University St., Peoria