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RECIPIENT RIGHTS GUIDELINES: ASSESSMENT OF PRACTICAL INTERPRETATION

by

Patrick A. Wieszciecinski

A thesis submitted to the Graduate College in partial fulfillment of the requirements for the degree of Master of Arts Psychology Western Michigan University April 2019

Thesis Committee:

R. Wayne Fuqua, Ph.D., BCBA-D, Chair Stephanie Peterson, Ph.D., BCBA-D Denise Ross, Ph.D., BCBA-D

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Patrick A. Wieszciecinski

RECIPIENT RIGHTS GUIDELINES: ASSESSMENT OF PRACTICAL INTERPRETATION

Patrick Wieszciecinski, M.S.

Western Michigan University, 2019

Although the State of Michigan has passed legislation to ensure that the rights of mental health service recipients are protected, there has been no published research evaluating the accuracy and consistency with which these guidelines are applied in real world cases. Quite obviously, even well intentioned policy may fall short of its intended goal if it is not implemented consistently and with fidelity. The State of Michigan trains Recipient Rights Officers (RROs) who in turn provide training and oversight for local mental health service agencies (Community Mental Health Agencies and PIHPs) who are charged with educating practitioners and other service providers about these guidelines. The RROs are also charged with reviewing and resolving recipient rights complaints that are conveyed to the local RROs. In an effort to evaluate the consistency and accuracy with which policies are applied, this study developed a series of scenarios that depicted real work incidents, some of which represented a violation of Michigan Recipient Rights policy. RROs were invited to review a series of written case scenarios and indicate whether a violation of State policy had occurred and for those cases in which they indicated the presence of a violation, they were asked to identify which code (or codes) were violated in the scenario. In addition, RROs were asked to evaluate the realism of the scenarios and provide additional case examples. All case scenarios were reviewed by State-level experts in the Michigan State Office of Recipient Rights to verify that the case scenarios were valid and to identify whether a case constituted a code violation and, if so, which code(s) were violated. The results of this study indicated that RROs have higher levels of agreement with experts in regards of classifying a violation or nonviolation, but have fairly inconsistent levels of agreement with realism of that case example, and strong inconsistencies in categorizing the specific violation. This indicates that RROs have stronger training in identification of violations, but may need supplemental training in regard to scenarios that are not typical of their region, and may also need additional training in categorizing specific violations.

Ultimately, the results of this research will be used to provide training material that might be used to improve the consistency with which RROs interpret and apply state policy. In turn, the validated scenarios may be used to improve the understanding and consistent application by practitioners who are trained by local RROs.

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INTRODUCTION

Overview

In the United States, most states have laws and policies to protect the rights and wellbeing of mental health service recipients. This project will focus on the State of Michigan where the mission statement for The Michigan Department of Health and Human Services (MDHHS) states, "The mission of the MDHHS Office of Recipient Rights is to protect and promote the constitutional and statutory rights of recipients of public mental health services and empower recipients to fully exercise these rights" (Michigan Department of Health and Human Services [MDHHS], n.d.). According to the MDHHS Annual Report, in 2016 there were 10,683 allegations of recipient rights violations received, of which 9,084 of these allegations led to investigations by recipient rights officers. Out of all investigations by state-appointed Recipient Rights Officers (RRO's), 5,107 allegations were substantiated as constituting a violation of recipient rights policy and action was taken to correct the violation and/or to ensure no further violations would occur. The 2016 numbers are representative of the annual recipient rights allegations, investigations and substantiations since 2013.

Michigan has a strong recipient rights system, even in comparison to other states. Even with well-intentioned policy, there can be challenges that arise when applying the policy to the

efficacy and efforts to protect recipient rights. Given the stated mission of MDHHS (i.e. "to protect and promote the constitutional and statutory rights of recipients of public mental health services"), it is reasonable to ask what steps are being taken to reduce the number of recipient rights violations that result in accusation and ensuing investigation, and how these protections are being interpreted by different experts, to ensure that there is accuracy and consistency, as they have difficult decisions to make regarding interpreting these challenging situations without allowing violation or compromise of recipients rights to occur.

In Michigan, recipient rights policy is implemented through several integrated mechanisms. First, service providers (psychologists, direct care staff, etc.) are mandated to participate in a recipient rights training typically developed and provided by a recipient rights officer (RRO) in their county. While the exact content and delivery mode of recipients rights training varies across Michigan counties, each county is required to include information specified by the MDHHS. This mandatory information includes a review of: a) the Michigan Mental Health Code; b) staff actions that foster dignity and respect: c) functions of the Office of Recipient Rights; d) rights violations including abuse and neglect; e) procedures for local agencies; f) information regarding filling out critical incident report forms; and g) other mandated reporting requirements (MDHHS Training and Education document, 2012). To the degree that this mandated information is covered in each individual county, all service providers across the state acquire a standardized level of awareness of recipient rights protections and procedures. While the mandated content is an exemplary quality control standard, the method by which training is provided is not standardized. These county-orchestrated trainings can include any number of training components, including lectures, handouts, case studies, team learning activities, practice cases with feedback, and participant performance assessments and feedback.

Furthermore, there are no entrance and exit assessments or performance benchmarks that represent acceptable levels of knowledge and application by service providers who complete recipient rights training. Moreover, there have been no efforts to assess or ensure that recipient rights policy is interpreted and applied consistently across RROs and, by extension, across workers trained in different counties by different RROs. Thus, it is possible that understanding and practical application of recipient rights policy may vary across both RROs and across workers who are trained in different counties. The possibility of inconsistent training and the absence of standardized performance benchmarks may add to the challenge experienced by wellintentioned service providers as they attempt to provide effective mental health services with a range of individuals with unique behavioral, emotional, and living challenges. While it is beyond the scope of this research article, it is postulated that some efforts to standardize and ensure the accuracy with which recipient rights policy is applied will be an important first step in assuring that mental health services are delivered in a manner that does not violate or compromise recipient rights. There is also no guarantee that interpretation is consistent across counties, so training in one county may not indicate an individual is capable of providing adequate services while maintaining a recipient rights in another county.

State policies and legislation are often written by politicians or other state officials, with minimal input from practitioners or officials who are charged with interpreting and implementing that policy. Furthermore, the language in most policies and legislation is often dictated by the legal aspects of that policy and often refers to other laws and policies in different parts of the state mental health code. As a result, there may be some potential for practitioners, recipients, and policy enforcers to misinterpret policies and/or to interpret the policies inconsistently across these various constituent groups. Furthermore, there is no empirically defined benchmark to

determine when a person has demonstrated fluency and mastery of recipient rights guidelines, including their application to real world scenarios. As a result, we do not know to what extent individuals master the required content of mandated training and the degree to which state guidelines are interpreted and applied consistently across both service providers and recipient rights officers. A search of published research suggests that there have been no systematic empirical evaluation of RRO's skills in identifying "real world" violations and non-violations. This is significant because if the goal of recipient rights legislation and policy is to impact clinical practice in a manner that protects and enhances recipient rights, then there is a pressing need to evaluate the degree to which policies are accurately and consistently interpreted and applied by practitioners and state officials charged with dissemination and enforcement of legal and policy requirements. Furthermore, a search of published research on recipient rights yielded no peer-reviewed empirical research publications on the accuracy and consistency with which state recipient rights policies have been interpreted and implemented.

The absence of research on the accuracy and consistency with which recipient rights policies and laws are interpreted has important implications that extend to all states and jurisdictions that attempt to implement well-intentioned recipient rights policy. Many states have adopted recipient rights policies or laws but states have been inconsistent in mandating training and assuring mastery of recipient rights policies for its service providers. Furthermore, training models vary significantly across states with some states delegating training to advocacy agencies (e.g., the National Disability Rights Network or the National Association of Mental Illness), rather than taking direct responsibility for designing and delivering training program and investigation processes. In addition, some states delegate the protection of the recipient rights to different entities based on the diagnosis and age of the recipient (e.g., mental illness, youth, or

geriatric). This patchwork of training models suggests that there is not widely recognized "best practices" for training and insuring recipient rights. Thus, it is important to develop and systematically evaluate the efficacy of training and quality assurance models for recipient rights.

Recipient rights policies are often difficult to apply in real world practice settings because the policies are written at the generic, conceptual level but they must be applied to the detection of examples and non-examples of violations in real world settings. For example, when identifying the primary citation of a violation, RROs must determine whether or not the scenario could be a violation, they must determine the category of that violation, and then the specific citation within each category to label that violation. This can be difficult if there are common attributes in each citation that can be found in the scenario. Behavior analytic researchers have long recommended the incorporation of examples and non-examples into training programs, especially for skills that are involve concepts that must be applied to detect specific stimulus conditions (S+s) but not under other stimulus conditions (S-s) (Englemann 1969; Clark, 1971; Carnine, 1980; Brethower 2000; Foshay 2010). For example, Merrill et al. (1992) describe examples as objects, events, and instances that have one or more defining characteristics or quality of a concept. Merrill et al. (1992) also describe nonexamples as objects, events, and instances that do not have the defining characteristics or qualities of the concept. Research indicates that mastery is greatest when training includes both examples and nonexamples (Stark, Kopp, & Fischer, 2011, & Durkin & Rittle-Johnson 2012). Research in this area has occurred in various settings and with a range of concepts including math education (Yanuarto, 2016) and workplace safety (Taylor, Wirth, Olvina, & Alvero, 2016). It is important to train examples and nonexamples, because training programs that emphasize examples and nonexamples have been proven to be effective in reducing errors in stimulus control, such as overgeneralization and

failures to apply skills to specific situations (Carnine, 1980 & DiVesta & Peverly 1984). Examples and nonexamples are typically used to train stimulus-class discrimination which has been shown to assist in concept learning (Shimamune & Malott 1995 & Zentall, Galizio, Critchfield 2002). Skinner (1974) has defined a concept as a set of stimuli sharing more than one property with all members of that set controlling the same behavior (Skinner 1974 p. 105). Tiemann and Markle (1990) state that a concept can be developed by utilizing a rational set of examples will that satisfy all critical attributes and diverge on a variable attribute. Tiemann and Markle (1990) also state that the use of a nonexample item in a class can demonstrate what that concept does not include. Kame'enui and Simmons (1990) describe two different forms of concepts: basic concepts and abstract or higher order concepts. Basic concepts defining features (or sameness in certain features in all examples) are tangible and all of the defining features are shown in all examples. Basic concepts can be taught by just showing and naming examples. Abstract concepts have some defining features that are not tangible and each example may not show all of the defining features. To teach an abstract concept, you need to give a synonym of the new concept, give a verbal definition that explains all the defining features, and then show examples that all have the defining features and contracting nonexamples of the abstract concept.

The first step in developing and evaluating a concept formation training program for recipient rights, is to determine the extent to which current didactic training programs are producing accurate and reliable discriminations of real world examples. Thus, the purpose of this study was to develop and evaluate an assessment protocol including a variety of case examples. The study evaluated the accuracy and consistency with which recipient rights officers identified case examples of violations and nonviolations of recipient rights. More specifically, it

evaluated to what degree do officers agree or disagree when examining various case examples and non-examples of recipient rights violations?

The current study was designed to address the possible inconsistencies in recipient rights knowledge and skills for all individuals in the Michigan Community Mental Health system. The current study evaluated the face validity of an assessment the researcher created, while also attempting to empirically evaluate the level of consistency in RROs identification of violations and nonviolations across the state of Michigan to further determine elaborate regarding how RROs evaluate violations and nonviolations in the real-world. This project utilized modified real-world examples and nonexamples of violations in attempt to create an assessment of the concept of recipient rights. It is anticipated that the development and validation of a case-based assessment will allow: a) evaluation of the accuracy and consistency with which recipient rights policies are applied; b) identification of the strengthen and limitations of existing training programs and c) the development of performance benchmarks to evaluate and improve the efficacy of recipient rights training programs. The results of this study may be of practical benefit to the field of applied behavior analysis as well as the MDHHS, specifically in developing future trainings and assessments for service providers and recipient rights officers.

METHODOLOGY

Overview

This study went through HSIRB approval and was exempt from review (See Appendix F). The goal of the study was as follows:

Identify the degree to which participants agree on classification of a specific violation or nonviolation, by using case examples of violations and nonviolations while also evaluating the consistency of interpretation, and assessing the face validity of the assessment created.

Participant Recruitment

Participants were Recipient Rights Officers in the Community Mental Health system, who were recruited by email. All email addresses were supplied by the State Office of Recipient Rights. The researcher sent an email to each RRO inviting that person to participate in a study of recipient rights interpretation (See email script in Appendix A). RROs typically enforce recipient right law in Michigan and provide mandated recipient rights training for service providers in their district. The survey was emailed to 166 recipient rights officers, 24 initiated the survey, 0 were excluded based on exclusionary criteria, and 15 completed the entire survey. Nine participants who initiated the survey, failed to complete all survey questions and their answers were excluded from the data reported herein. The following results have been based on the 15 participants who completed the entire survey.

Setting and Materials

All data analyses were stored at Western Michigan University. The materials required for this study included the Qualtrics Survey program. The Qualtrics survey also contained a variety of case examples developed by the researcher. These case examples served as simulated scenarios of violations and nonviolations of recipients rights.

Data Collection

Data in this study included basic participant demographic information to assess difference between genders, racial ethnicities, educational level, years of experience, and an average quantity of violations that each participant investigates each year. Participants were asked to read 30 case examples and indicate whether each case example represented a violation or a nonviolation of a recipients rights using a 4 point scale. In addition, participants were asked to identify which specific code(s) was violated in those cases that included a recipient rights violation. Responses were collected for case examples utilizing a four point scale rating system, multiple choice responses, and some open-ended response opportunities (See Appendix D). All data were collected and analyzed through the Qualtrics survey program and transferred to a password-protected Excel file for further analysis. Throughout of the study, the participants were also asked to answer some questions to assess social validity of the case examples. This was done to see how realistic participants in the study believed the case examples were. At the end of the survey, participants were also able to provide supplementary case examples of violations and nonviolations. Survey data were collected anonymously, and the data were stored on the primary investigator's password-protected computer and transferred to a password protected flash drive at the end of the study.

Procedure

Upon opening the online Qualtrics survey, participants had access to the informed consent information (see Appendix B). Then, participants were allowed to ask questions about the survey to the primary investigator via e-mail or phone. All participants were assured of the confidentiality of individual survey data, especially the assurance that individual performance on the assessment would not be available to supervisors and thus would no bearing on their employee evaluation or their status of employment. All documentation relevant to the performance information did not contain any personal information. Individuals who participated in this research completed an online survey which took approximately 30 minutes to 1.5 hours to complete. Participants were allowed to leave the study at any time without any repercussions from their employer or the student researcher.

A comprehensive literature review of recipient rights was completed by the primary investigator to identify case examples of violations and nonviolations. Based on the literature that was reviewed the researcher created a variety of case examples of violations and nonviolations of recipient rights. These case examples contained similar quantities of information that RROs receive when completing the pre-investigation process, and thus were realistic in nature to the quantity of initial information that RROs receive. Case examples also were common in format and length, and the quantity of information related to the category of a violation varied based on the information required to determine whether or not a violation of that category occurred. These case studies were reviewed by state employees in the Michigan Office of Recipient Rights (hereafter referred to as "experts"). Scenarios were revised based on their suggestions and feedback. Two experts reviewed each of the case examples, and achieved 100% inter-observer agreement. These two experts described each example as a violation or nonviolation, and described the primary violation that occurred in each case example.

The participants were then recruited anonymously via email will complete a survey using the Qualtrics Survey program. Once participants clicked the Qualtrics link in the email, they were directed to the survey. Once participants opened the Qualtrics survey, the consent document information was available for them to review (Appendix B). Participants were then input the demographic information listed above. The first demographic question that they were asked was if they are currently a recipient rights officer. If the participants answer "No" to that question, their survey ended and they were excluded from the study based on the exclusionary criteria outlined in the consent document. Participants were then able to continue on to the case example section of the survey. Participants were asked to use a 4 point likert scale to indicate whether each case example was a violation or a nonviolation (1-Definite Violation, 2-Possible Violation, 3-Nonviolation, 4-Unsure.). Following each case example, the participants were asked if the case example was realistic (on a scale of 1-5: 1-Very Realistic, 2-Mildly Realistic, 3-Not Sure, 4-Mildly Unrealistic, 5-Very Unrealistic). Level of realism has been defined as the degree to which a RRO may come into contact with the case example or citation of violation in their work. A realism measure was captured to assist in the assessment of the validity of the case examples as they have been written. Participants were then asked to dictate what violations (if any) occurred by entering the category number of the specific violation in an open text box, using the category sheet that they are required use when categorize recipient rights violations in their work. Each participant was then able to provide optional commentary for each specific case example using an open ended response. At the end of the survey, participants were asked to identify additional case examples of violations and nonviolations that they have commonly seen

in their work setting. Each participant then saw a popup message at the end of the survey thanking them for their participation in the survey.

In data analysis, scores were averaged across the 15 respondents. Those case examples that averaged a 2 or lower on the 4 point likert case were deemed to be violations; whereas those cases that rated at 3 were deemed to be nonviolations. Any ratings of 4 did not count for either violation or nonviolation. Responses that required to be compared as accuracy to expert responses were calculated by taking the number of responses accurate to the expert responses and dividing it by all completed responses (i.e., AE = Accurate Responses / All Responses).

RESULTS

Results of this study are presented by evaluating each case example and all questions corresponding to each case example (i.e., violation or nonviolation evaluation, realism evaluation, specific category of violation evaluation, any feedback relevant to that particular case example, and any supplementary case examples provided by participants). Demographic information is first presented to identify any relevant participant background information. Expert recommendations are compared to the participants evaluation of the case examples. Additional discussion also describes any major differences between participants ratings.

Interobserver agreement was calculated between participants by dividing all responses in a specific response option by all completed responses. Interobserver agreement was calculated between participants and experts by comparing the total number of responses that corresponded to the expert response by all completed responses.

Table 1

Demographic Information

Gender	Male: 9			Female: 6	Female: 6					
Ethnicity	White: 14	nite: 14			African American: 1					
Years Served as an RRO	1-3 Years: 4	3-8 Years: 1		8-15 Years: 5		16+ Years: 5				
Education Level	Bachelors: 9		Masters: 5		Prefer N	Prefer Not to Answer: 1				
Average Annual	Less than 10: 1	11-50: 5	51-100: 3	101-150: 4	201-250: 1		201-250: 1		301+: 1	
Investigations										

Table 2

Case Example Violation Identification and Accuracy to Expert Responses

Key: DV: Definite Violation, PV: Potential Violation, NV: Nonviolation, U: Unsure, NR: No Response, AE: Accuracy to Experts

Case S	cenarios	DV	PV	NV	U	NR	AE
1.	Employee A was cleaning Consumer A's bedroom. While cleaning Consumer A's bedroom, Employee A found a plate that was property belonging to the home. Employee A took the plate into the kitchen and washed the plate. Employee A then went back and continued cleaning Consumer A's bedroom. Consumer A said thank you to Employee A!	0	0	14	1	0	93.3%
2.	Consumer A was told that they could not listen to their cd player during meal times. Home staff stated that Consumer A's dancing in their chair bothered other residents. Home staff took Consumer A's cd player during meal times and then gave it back at the end of the meal.	7	8	0	0	0	100%
3.	Consumer A has complained to the home staff that his room has bed bugs. The home checked Consumer A's room and found bed bugs. The home has moved all residents to a safe and clean environment outside of the home immediately after receiving the complaint. The home hired specialists to ensure that the home was safe for all resident's before bringing them back into the home. The home also took all residents to the doctor to ensure none of them had contact with the bed bugs.	2	4	9	0	0	60%
4.	Consumer A is a child who lives in a Child Caring Institution. Consumer A was hitting his head against a wall. Employee A put Consumer A in a manual hold to stop Consumer A from causing any damage to his head. Employee B called Consumer A's doctor to see if he would authorize the restraint to continue. The doctor did not authorize the restraint and asked staff to use a pillow between the wall and Consumer A's head instead. Employee A continued to physically restrain Consumer A because she felt that he had not yet calmed down from the self-injurious incident.	12	2	0	1	0	93.3%

5.	A case manager has had their caseload double within the past year from their standard quantity of cases. Due to this situation, Consumer A's service record has only been kept current through 8 months ago. The case manager is planning to update these files as soon as they catch up on all other responsibilities.	9	6	0	0	0	100%
6.	Ryan was working a 16 hour shift and was starting to get tired. It was third shift, and because all residents were sleeping in the home – Ryan went into the office and slept. Ryan woke up 4 minutes later and did all of his required bed checks. All residents were still sleeping and nothing bad happened, so Ryan laid down in the office again and set an alarm to do his next bed check. Ryan is the only staff in the home overnight and two residents require staff to be alert at all times due to safety skills.	12	3	0	0	0	100%
7.	The employees in the group home in which Consumer A lives decided to create an educational video documenting appropriate rules that other group homes should follow. Employee A obtained consent from almost all the consumers in the home to participate in the video, but forgot to obtain consent from Consumer A's legal guardian due to a time constraint, figuring that she would get consent for Consumer A's guardian after filming. Consumer A's guardian gave consent after the video was filmed, and they were excited that Consumer A was in the video.	9	4	1	1	0	86.6%
8.	Consumer A walked around the home singing his favorite song to the other residents in the group home and the staff. Employee A was tired of hearing the same section of the song and looked at the resident and said, "No one cares, retard." Consumer A kept singing, and Employee A continued to do his work.	15	0	0	0	0	100%
9.	Consumer A has had some recent trouble with the law and needs to speak with his attorney. He asks Employee A if his attorney can meet with him at the group home; however, Employee A responds that since there are only public rooms (shared bedrooms and shared living areas) in the house, that there is no appropriate place for residents to meet with those kind of visitors at the group home. Employee A said that Consumer A would need to find a more appropriate meeting location.	11	4	0	0	0	100%
10	. Consumer A stated that she was feeling sick and asked to go to the hospital. The home manger Employee A looked at Consumer A and smiled while saying "Are you sure you are feeling sick?" then walked away from Consumer A. Consumer A went into her room and went to bed for the night. Consumer A woke up the next day and said she was still feeling sick. Employee A then took her to the hospital, and Consumer A was perfectly healthy.	4	10	1	0	0	6.6%

11.	While at a doctor's appointment, the physician recommended that Consumer A receive electroconvulsive treatment for the behavioral issues she was having. Before the doctor could fully explain the procedure to Consumer A, Employee A requested Consumer A's consent to use the procedure. Employee A assured Consumer A that this was the best procedure for her. The Consumer gave consent without understanding the procedure fully.	15	0	0	0	0	100%
12.	Employee A was preparing to pass morning medications to Consumer A. Consumer A's medication sheet has a space where blood pressure needed to be taken and written on it each morning when medications were passed. Employee A forgot to test Consumer A's blood pressure before passing his medications. Consumer A did not show any signs to raise concerns. Employee A tested Consumer A's blood pressure later in the day, and Consumer A's blood pressure was in normal levels. Employee A knew that Consumer A had no medications linked to blood pressure.	7	7	1	0	0	93.3%
13.	In order to get some legal advice, Consumer A sought out his family's lawyer. Consumer A gave his lawyer information related to their legal concern. In trying to answer his questions appropriately and as best he could, Consumer A's lawyer discussed Consumer A's situation with a colleague of his in detail to see if she could help give advice to Consumer A as well.	1	2	12	0	0	80%
14.	Residents in the home have requested Employee A to not open their doors at night. They state that they hate being woken up by staff. Employee A agrees because he believes that residents deserve the right to sleep without their door being opened and being woken up by the light from the hallway! All of the residents have told staff that they like Johnny and appreciate that he doesn't wake them up every night with the bright light. Employee A said that he listens outside of the residents door to see if he can hear breathing when doing his required bed checks.	4	5	4	2	0	60%
15.	Consumer A enjoys gardening and tending to the yard at the group home in which he lives. In the past, Employee A has paid Consumer A an hourly minimum wage for the work that he does at the house; however, because Employee A wants to spend less of the group home budget paying consumers, he recently decided to cut back Consumer A's hourly wage to \$4 an hour. Consumer A still gets to buy all of their favorite things, and the home saves money.	10	4	0	1	0	93.3%

16.	Consumer A and Consumer B both live in the same group home and have a history of using sharp objects to cut their forearms. For the safety of themselves, Employee A has restricted them from entering or spending time in the kitchen at the group home as there are sharp knives in the kitchen and it this restriction has been put into their treatment plan. Consumer C, who has never shown any signs of self harm, was also told by Employee A that he was not allowed in the kitchen in order to keep the rules of the home the same for everyone.	11	4	0	0	0	100%
17.	Consumer A has recently moved into a group home. Employee A takes Consumer A on a tour of the house before bringing her upstairs to show her which room Consumer A would be sleeping in. Consumer A takes a look at her bed and her room before asking Employee A where she could store her clothes and other personal belongings, to which Employee A responds, "Your personal property will be kept in a locked cabinet in the living room. You can ask us to access it when you would like."	4	6	5	0	0	66.6%
18.	Consumer A enjoys watching television when he gets back from his community outings. Today one of his house mates was watching MTV. Consumer A wants to watch TV, but the home staff say that he can't watch tv until his house mates show ended.	1	1	11	2	0	73.3%
19.	Consumer A has a behavior plan indicating that staff should have positive interactions with him every 10-minutes. Consumer A is Employee A's favorite resident, and Employee A spends lots of time with Consumer A. Employee A does not think Consumer A needs these frequent positive interactions. Employee A does not interact with Consumer A unless he comes to her for attention, which happens every thirty minutes.	15	0	0	0	0	100%
20.	Consumer A wants to file a recipient rights complaint on Employee A because Employee A called him stupid. Consumer A asks Employee A to sit with him and help him write the recipient rights complaint because he is the only staff working. Employee A says that he won't sit with Consumer A and write the complaint, but that he can ask Employee B when she gets to the home and she can help Consumer A write the complaint.	11	4	0	0	0	100%

21.	Consumer A recently bought a pack of cigarettes. Employee A, one of the new staff to the home, knew about the house rules regarding smoking. The house rule indicated that residents could not have tobacco in the home. Employee A took Consumer A's cigarettes and stated that he could have them when he left the home. Consumer A asked for the cigarettes and Employee A gave them to him and told him he had to leave the property if he wanted to smoke. Consumer A did leave the property and gave the cigarettes back once he finished smoking.	4	5	5	0	0	60%
22.	Yesterday, Consumer A was found by Employee A trying to cut herself with a sharp knife. Very concerned about her behavior, Employee A physically held Consumer A in a bear hug for 10-minutes while Employee B removed the knife and cleared the room of sharp objects that Consumer A could harm herself with. The treatment plan says to not use a wrap on the recipient due to her recent back surgery.	13	2	0	0	0	100%
23.	Consumer A realized that when went to open the mail he had received today, that it had already been opened. Employee A announced that from now on, all mail delivered to the group home would be inspected to ensure that all residents were notified of important mail.	14	1	0	0	0	100%
24.	Consumer A got back from his outing and Employee A was watching Comedy Central. Consumer A asked to watch his favorite show. Employee A did not acknowledge Consumer A's request. Consumer A sat on the couch, and eventually Employee A left the living room. Employee A did not change the channel, and Consumer A watched Comedy Central.	10	5	0	0	0	100%
25.	Employee A who is male was working with Consumer A who is female and in a wheelchair. Employee A had to take Consumer A to the bathroom and had to assist Consumer A in toileting. Employee A grabbed Consumer A's wrist and assisted her onto the toilet Employee A then assisted Consumer A off the toilet by the wrists, and then took her back to the living room. Staff did not use the techniques they were taught to transfer Consumer A.	12	3	0	0	0	100%
26.	Consumer A (A small child) was playing outside at a park with Employee A. Consumer A ran into the parking lot, which had many cars driving through it. Employee A frantically chased Consumer A as they ran through the parking lot. Employee A picked up Consumer A and brought them back to the park. Consumer A continued playing on the slide.	1	6	6	2	0	40%

27.	Two days ago was a very nice day that brought sunny skies and a calm weather forecast. Wanting to sit outside and read a book, Consumer A asked Employee A if she could sit in the garden to read. Employee A told her, "Since I have to keep an eye on you, and I don't want to go outside today, you'll have to read in the living room or in your room instead." Other Employee's don't mind when Consumer A goes outside, as there is no restriction of movement in Consumer A's behavior plan.	15	0	0	0	0	100%
28.	Employee A calls all of the residents in the home sweetie. Consumer A has asked Employee A numerous times to call her by her name. Employee A always says, "Oh sweetie, I can do that no problem!" and then continues to call Consumer A and the other residents in the home sweetie.	bloyee A if she could sit in the garden to read. Employee and I don't want to go outside today, you'll have to read er Employee's don't mind when Consumer A goes in Consumer A's behavior plan.13000100sweetie. Consumer A has asked Employee A numerous residents in the home sweetie.141000100the hospital and has received orders to follow the BRAT ell her that she cannot have candy due to the discharge who still do not give her the candy that Consumer A15000100es in a group home got into a fist fight on Saturday onsumer A was locked in the basement of the group enjoyed lots of snacks. Consumer A was monitored affe.15000100	100%				
29.	Consumer A has recently been discharged from the hospital and has received orders to follow the BRAT diet. Consumer A really enjoys candy, but staff tell her that she cannot have candy due to the discharge orders. Consumer A gets upset and yells at staff who still do not give her the candy that Consumer A bought.	1	6	7	1	0	46.6%
30.	Consumer A and Consumer B who are roommates in a group home got into a fist fight on Saturday evening. To prevent any more of this behavior, Consumer A was locked in the basement of the group home Saturday night, where he watched TV and enjoyed lots of snacks. Consumer A was monitored through a camera in the group home and was safe.	a book, Consumer A asked Employee A if she could sit in the garden to read. Employee I have to keep an eye on you, and I don't want to go outside today, you'll have to read or in your room instead." Other Employee's don't mind when Consumer A goes is no restriction of movement in Consumer A's behavior plan.14100all of the residents in the home sweetie. Consumer A has asked Employee A numerous y her name. Employee A always says, "Oh sweetie, I can do that no problem!" and call Consumer A and the other residents in the home sweetie.14100ecently been discharged from the hospital and has received orders to follow the BRAT really enjoys candy, but staff tell her that she cannot have candy due to the discharge A gets upset and yells at staff who still do not give her the candy that Consumer A1500Consumer B who are roommates in a group home got into a fist fight on Saturday mt any more of this behavior, Consumer A was locked in the basement of the group ght, where he watched TV and enjoyed lots of snacks. Consumer A was monitored in the group home and was safe.1500	0	100%			
verag	ge Participants Accuracy to Expert Responses	I	I	I	1	1	84.87%

Table 3

Participant Identification of Realism of Case Example

Key: VR: Very Realistic, FR: Fairly Realistic, U: Unsure, MU: Mildly Unrealstic, VU: Very Unrealistic, NR: No Response

Case I	Example	VR	FR	U	MU	VU	NR
1.	Employee A was cleaning Consumer A's bedroom. While cleaning Consumer A's bedroom, Employee A found a plate that was property belonging to the home. Employee A took the plate into the kitchen and washed the plate. Employee A then went back and continued cleaning Consumer A's bedroom. Consumer A said thank you to Employee A!	0	9	1	2	3	0
2.	Consumer A was told that they could not listen to their cd player during meal times. Home staff stated that Consumer A's dancing in their chair bothered other residents. Home staff took Consumer A's cd player during meal times and then gave it back at the end of the meal.	5	10	0	0	0	0
З.	Consumer A has complained to the home staff that his room has bed bugs. The home checked Consumer A's room and found bed bugs. The home has moved all residents to a safe and clean environment outside of the home immediately after receiving the complaint. The home hired specialists to ensure that the home was safe for all resident's before bringing them back into the home. The home also took all residents to the doctor to ensure none of them had contact with the bed bugs.	6	7	0	2	0	0
4.	Consumer A is a child who lives in a Child Caring Institution. Consumer A was hitting his head against a wall. Employee A put Consumer A in a manual hold to stop Consumer A from causing any damage to his head. Employee B called Consumer A's doctor to see if he would authorize the restraint to continue. The doctor did not authorize the restraint and asked staff to use a pillow between the wall and Consumer A's head instead. Employee A continued to physically restrain Consumer A because she felt that he had not yet calmed down from the self-injurious incident.	5	5	4	1	0	0
5.	A case manager has had their caseload double within the past year from their standard quantity of cases. Due to this situation, Consumer A's service record has only been kept current through 8 months ago. The case manager is planning to update these files as soon as they catch up on all other responsibilities.	7	8	0	0	0	0

6.	Ryan was working a 16 hour shift and was starting to get tired. It was third shift, and because all residents were sleeping in the home – Ryan went into the office and slept. Ryan woke up 4 minutes later and did all of his required bed checks. All residents were still sleeping and nothing bad happened, so Ryan laid down in the office again and set an alarm to do his next bed check. Ryan is the only staff in the home overnight and two residents require staff to be alert at all times due to safety skills.	11	4	0	0	0	0
7.	The employees in the group home in which Consumer A lives decided to create an educational video documenting appropriate rules that other group homes should follow. Employee A obtained consent from almost all the consumers in the home to participate in the video, but forgot to obtain consent from Consumer A's legal guardian due to a time constraint, figuring that she would get consent for Consumer A's guardian after filming. Consumer A's guardian gave consent after the video was filmed, and they were excited that Consumer A was in the video.	6	6	1	2	0	0
8.	Consumer A walked around the home singing his favorite song to the other residents in the group home and the staff. Employee A was tired of hearing the same section of the song and looked at the resident and said, "No one cares, retard." Consumer A kept singing, and Employee A continued to do his work.	12	3	0	0	0	0
9.	Consumer A has had some recent trouble with the law and needs to speak with his attorney. He asks Employee A if his attorney can meet with him at the group home; however, Employee A responds that since there are only public rooms (shared bedrooms and shared living areas) in the house, that there is no appropriate place for residents to meet with those kind of visitors at the group home. Employee A said that Consumer A would need to find a more appropriate meeting location.	4	6	1	4	0	0
10.	Consumer A stated that she was feeling sick and asked to go to the hospital. The home manger Employee A looked at Consumer A and smiled while saying "Are you sure you are feeling sick?" then walked away from Consumer A. Consumer A went into her room and went to bed for the night. Consumer A woke up the next day and said she was still feeling sick. Employee A then took her to the hospital, and Consumer A was perfectly healthy.	6	9	0	0	0	0

ble	3 Continued						
11.	While at a doctor's appointment, the physician recommended that Consumer A receive electroconvulsive treatment for the behavioral issues she was having. Before the doctor could fully explain the procedure to Consumer A, Employee A requested Consumer A's consent to use the procedure. Employee A assured Consumer A that this was the best procedure for her. The Consumer gave consent without understanding the procedure fully.	3	5	2	5	0	0
12.	Employee A was preparing to pass morning medications to Consumer A. Consumer A's medication sheet has a space where blood pressure needed to be taken and written on it each morning when medications were passed. Employee A forgot to test Consumer A's blood pressure before passing his medications. Consumer A did not show any signs to raise concerns. Employee A tested Consumer A's blood pressure later in the day, and Consumer A's blood pressure was in normal levels. Employee A knew that Consumer A had no medications linked to blood pressure.	7	8	0	0	0	0
13.	In order to get some legal advice, Consumer A sought out his family's lawyer. Consumer A gave his lawyer information related to their legal concern. In trying to answer his questions appropriately and as best he could, Consumer A's lawyer discussed Consumer A's situation with a colleague of his in detail to see if she could help give advice to Consumer A as well.	3	2	4	5	0	1
14.	Residents in the home have requested Employee A to not open their doors at night. They state that they hate being woken up by staff. Employee A agrees because he believes that residents deserve the right to sleep without their door being opened and being woken up by the light from the hallway! All of the residents have told staff that they like Johnny and appreciate that he doesn't wake them up every night with the bright light. Employee A said that he listens outside of the residents door to see if he can hear breathing when doing his required bed checks.	3	10	1	1	0	0
15.	Consumer A enjoys gardening and tending to the yard at the group home in which he lives. In the past, Employee A has paid Consumer A an hourly minimum wage for the work that he does at the house; however, because Employee A wants to spend less of the group home budget paying consumers, he recently decided to cut back Consumer A's hourly wage to \$4 an hour. Consumer A still gets to buy all of their favorite things, and the home saves money.	2	6	4	3	0	0

16.	Consumer A and Consumer B both live in the same group home and have a history of using sharp objects to cut their forearms. For the safety of themselves, Employee A has restricted them from entering or spending time in the kitchen at the group home as there are sharp knives in the kitchen and it this restriction has been put into their treatment plan. Consumer C, who has never shown any signs of self harm, was also told by Employee A that he was not allowed in the kitchen in order to keep the rules of the home the same for everyone.	7	7	1	0	0	0
17.	Consumer A has recently moved into a group home. Employee A takes Consumer A on a tour of the house before bringing her upstairs to show her which room Consumer A would be sleeping in. Consumer A takes a look at her bed and her room before asking Employee A where she could store her clothes and other personal belongings, to which Employee A responds, "Your personal property will be kept in a locked cabinet in the living room. You can ask us to access it when you would like."	3	2	4	6	0	0
18.	Consumer A enjoys watching television when he gets back from his community outings. Today one of his house mates was watching MTV. Consumer A wants to watch TV, but the home staff say that he can't watch tv until his house mates show ended.	5	9	0	1	0	0
19.	Consumer A has a behavior plan indicating that staff should have positive interactions with him every 10- minutes. Consumer A is Employee A's favorite resident, and Employee A spends lots of time with Consumer A. Employee A does not think Consumer A needs these frequent positive interactions. Employee A does not interact with Consumer A unless he comes to her for attention, which happens every thirty minutes.	7	7	1	0	0	0
20.	Consumer A wants to file a recipient rights complaint on Employee A because Employee A called him stupid. Consumer A asks Employee A to sit with him and help him write the recipient rights complaint because he is the only staff working. Employee A says that he won't sit with Consumer A and write the complaint, but that he can ask Employee B when she gets to the home and she can help Consumer A write the complaint.	4	8	2	1	0	0

21.	Consumer A recently bought a pack of cigarettes. Employee A, one of the new staff to the home, knew about the house rules regarding smoking. The house rule indicated that residents could not have tobacco in the home. Employee A took Consumer A's cigarettes and stated that he could have them when he left the home. Consumer A asked for the cigarettes and Employee A gave them to him and told him he had to leave the property if he wanted to smoke. Consumer A did leave the property and gave the cigarettes back once he finished smoking.	4	9	0	1	0	1
22.	Yesterday, Consumer A was found by Employee A trying to cut herself with a sharp knife. Very concerned about her behavior, Employee A physically held Consumer A in a bear hug for 10-minutes while Employee B removed the knife and cleared the room of sharp objects that Consumer A could harm herself with. The treatment plan says to not use a wrap on the recipient due to her recent back surgery.	5	5	2	3	0	0
23.	Consumer A realized that when went to open the mail he had received today, that it had already been opened. Employee A announced that from now on, all mail delivered to the group home would be inspected to ensure that all residents were notified of important mail.	3	9	0	3	0	0
24.	Consumer A got back from his outing and Employee A was watching Comedy Central. Consumer A asked to watch his favorite show. Employee A did not acknowledge Consumer A's request. Consumer A sat on the couch, and eventually Employee A left the living room. Employee A did not change the channel, and Consumer A watched Comedy Central.	4	9	1	0	0	0
25.	Employee A who is male was working with Consumer A who is female and in a wheelchair. Employee A had to take Consumer A to the bathroom and had to assist Consumer A in toileting. Employee A grabbed Consumer A's wrist and assisted her onto the toilet Employee A then assisted Consumer A off the toilet by the wrists, and then took her back to the living room. Staff did not use the techniques they were taught to transfer Consumer A.	4	10	0	1	0	0
26.	Consumer A (A small child) was playing outside at a park with Employee A. Consumer A ran into the parking lot, which had many cars driving through it. Employee A frantically chased Consumer A as they ran through the parking lot. Employee A picked up Consumer A and brought them back to the park. Consumer A continued playing on the slide.	6	6	2	0	0	1

27.	Two days ago was a very nice day that brought sunny skies and a calm weather forecast. Wanting to sit outside and read a book, Consumer A asked Employee A if she could sit in the garden to read. Employee A told her, "Since I have to keep an eye on you, and I don't want to go outside today, you'll have to read in the living room or in your room instead." Other Employee's don't mind when Consumer A goes outside, as there is no restriction of movement in Consumer A's behavior plan.	6	9	0	0	0	0
28.	Employee A calls all of the residents in the home sweetie. Consumer A has asked Employee A numerous times to call her by her name. Employee A always says, "Oh sweetie, I can do that no problem!" and then continues to call Consumer A and the other residents in the home sweetie.	8	7	0	0	0	0
29.	Consumer A has recently been discharged from the hospital and has received orders to follow the BRAT diet. Consumer A really enjoys candy, but staff tell her that she cannot have candy due to the discharge orders. Consumer A gets upset and yells at staff who still do not give her the candy that Consumer A bought.	6	7	0	1	0	1
30.	Consumer A and Consumer B who are roommates in a group home got into a fist fight on Saturday evening. To prevent any more of this behavior, Consumer A was locked in the basement of the group home Saturday night, where he watched TV and enjoyed lots of snacks. Consumer A was monitored through a camera in the group home and was safe.	4	4	2	5	0	0

Table 4

Category Selection

Key: NR: No Response

Case Example	Expert Response	# of Participants Accurate to	Other Pa	articipant Respo	nses					IOA
		Experts								
1	0000	15								100%
2	7286	1	7281: 12	7441: 1	7080: 1	NR: 1				6.67%
3	0000	9	7080: 1	7081: 1	7082: 4					60%
4	72222	10	7080: 1	7400: 4	NR: 1					62.5%
5	7122	2	7080: 11	7121: 4	NR: 1					11.11%
6	72271	10	7080: 1	7081: 3	72261: 1	NR: 1				66.67%
7	7241	11	7481: 1	Confidentiality: 1	0000: 1	NR:1				78.6%
8	7223	10	1708: 4	72223: 1	72271: 1	NR: 1				62.5%
9	7261	6	7262: 10	7263: 1	NR: 1					35.3%
10	0000	1	72271: 6	7080: 6	1708: 2	72261: 1	72261: 1	72272: 1	NR: 1	5.8%
11	7003	9	1708: 1	7170: 4	7241: 2	NR: 1				56.25%
12	72271	7	7080: 7	72261: 1	0000: 1	NR: 2				43.75%

13	0000	11	7481:	0001: 2						73.3%
14	72271	6	2 1708:	7080: 3	72261: 1	0000: 4	NR: 2			40%
			1							
15	7360	12	7080: 1	NR: 3						92.3%
16	7441	11	7080: 2	Freedom of Movement: 1	NR: 2					78.6%
17	7281	5	7282:	7286: 2	7441: 1	7080: 1	0000: 5	NR: 1		33.3%
18	0000	12	7267: 2	0001: 1	NR: 1					80%
19	7080	13	NR: 2							100%
20	72272	0	1708: 6	7760: 10	7780: 1	NR: 2				0%
21	7281	5	7286: 1	7441: 1	0000: 6	NR: 2				38.46%
22	72222	10	72221:	7284: 1	72261: 1	7080: 2	NR: 2			62.5%
23	7266	10	7263: 3	NR: 2						76.9%
24	1708	10	7080: 5	7267: 6	NR: 1					47.62%
25	72222	1	7080: 5	7081: 1	72261: 1	72271: 6	7003: 1	7400: 1	NR: 2	6.25%
26	0000	6	7081: 1	72271: 3	72222: 1	NR: 3				54.54%
27	7441	10	1708: 3	7080: 1	NR: 2					71.43%
28	1708	13	NR: 2		1					100%

29	7286	0	7281: 5	7281: 5	72261: 1	0000: 7	NR: 1		0%
30	7420	12	7080: 1	7081: 1	7241:4	72223: 1	1708: 1	NR: 1	60%

Table 5

Participant Feedback on Current Case Examples and Additional Case Examples

Case Example Number	Feedback, transcribed verbatim from survey			
1	• The only potential violation would be if the Staff was conducting a search for the plate without the permission of the person whose bedroom it is.			
	• Might be helpful to clarify whether plate was in plain sight.			
2	perhaps should be in BTP if issue			
	• More detail would be helpful to ensure it's a violation. EX. Did the consumer say it was okay to take the CD player away?			
3	Happens frequently			
	• Bedbugs are not a disease vector. A medical exam is overkill.			
	• I am reading each scenario as a complaint that is filed. In that respect I would have to call this one a possible violation even though the complaint says that everything? If the feedback included a misspelled item insert "sic" to indicate "copied verbatim" is addressed. If it was sent in to ORR on an incident report then there would be no possible violation.			
	• Unfortunately providers rarely react to this issue with this level of intervention.			
	• The salient fact is that there were bed bugs in the recipient's bed. What the home did to remedy after this fact was established is irrelevant to determining whether there was or was not a violation of the individual's right to a sanitary enviornment.			

4	 You can restrain is Child Caring Institutions, but was it an approved method? We do not call this type of intervention a "restraint" but rather "physical intervention." Also, a physician cannot authorize or prevent physical management.
5	 It is the Agency's responsibility to ensure it has enough staff to provide services. Could be other categories, depending on services that should have been documented in the record, like mental exams, status changes etc
6	• There are homes where third shift is designated as "sleep staff" and are allowed to nap on their shift. In all other cases this is neglect.
7	 easily handled by intervention This is a clear violation, but under the circumstance would probably not generate a complaint initiating an investigation. example should be revised as house rules are prohibited in group homes pursuant to recent federal regulations If no one outside of the home saw the video before consent was obtained, no violation.
9	 Most providers would not block the meeting and allow the person's attorney to recommend a different venue. Not many recipients living in a group home would have means to hire an attorney!

1.0	
10	• unless there is specific reasons to belive employee failed to act
	• The context would be key in determining if this is a violation. I would normally consult with a RN.
	• The details really matter in determining the possible violation.
	• There are factors that are missing from the scenario that would drive the category desicion.
	• we would have to see if the staff violated the policy of the company, as some of them have policies on when and how to check a client out, like take temp, bp, etc. If they did not follow procedure, they could still have violated the clients right to meidcal attention.
11	• I've investigated/reviewed thousands of complaints in my career and have never had this type of alleged violation happen
	• Explain who Employee A is, and why he or she was in the physician appointment with the recipient.
	• Very realistic in reference to informed consent for all things but infrequent for ECT
12	• Why is the blood pressure check in the med sheet? If it is medically necessary, then this would be neglect.
	• If there is an order for it, might be neglect

13	• Lawyers are bound by the cannons of their profession and outside my jurisdiction unless employed by or contracted with our agency.
	• Attorney is not subject to the MHC
	• could be an allegation of a rights violation (attorney-client privilege), but it is not an allegation of a recipient rights violation unless the attorney worked for a public mental health provider
	• Legal matters by lawyers are not covered by the MHC
	• Lawyers not bound by the Mental Health Code.
14	Need info on the plans of service
	• not enough inforamtion as to requirements of bed checks
	• Why the bed checks are required would determine if this is a violation.
	• Needs to be in writing, in the Tx plan or other place, if tehy are deviating from a policy or standard of care.
	• Whether or not this is a violation would depend on specifics of bedcheck protocol.
16	• The restriction must be put in the treatment and Consumer C should be allow to use sharp objects
17	• <i>it hasn't happened yet</i>
	• This would also violate AFC Licensing Rules.
	• Not enough detail to understand what is really going on here.
	• It is not a violation because they did not actually do it. It would be a violation if she was living there, however.

8	• This would very likely not be a violation.
	• consumer-consumer issues not covered by MHC
20	• The violation is calling a recipient, "stupid," not the refusing to help with a complaint. Direct care staff are not obligated by the MHC to assist recipients with a complaint (the ORR is, however). Many agencies require this in policy though.
	• very hard to force someone to fill out a comlpaint on themselves, but technically it is a violation. Much more reasable to have staff B fill it out.
1	House Rules are no longer allowed.
	• Currently, there can be no house rules due to Home and Community Based Rules, so if the person cannot hold on to his own cigarettes it must be in his IPOS>
	• there are no house rules anymore, per HCBS complaince, in AFCs that contract with CMHs
	• House Rules not permitted per HCBS Guidelines. Staff can't take cigs away without behavior plan authorizing removal of personal property.
2	• tough call
	• Need more information. There is a standard of care not to wrap the consumer. If imminent danger still present after trying other techniques, I'm not sure what I would do.
3	• opening people mail is a federal offense
	• email is not technically covered by the MHC, but possible limitation.

Table 5 Continued	
24	 Why is staff watching television on shift? Didn't specify if this was a home and then the TV belongs to the home. I would call that Dignity and Respect. 7281 if the TV was the individuals. I put 7080 because i would also look at what the staff member was not doing and sould have been when watching TV.
25	• Depending on how far from the proper transfer technique staff deviated this could rise to neglect. Also, there needs to be a consent in the chart authorizing a male staff to assist the female resident with toileting.
	• If not transferring recipient per instructions put recipient at risk of harm, 72271
26	• The determining factor would be the monitoring requirments in the child's plan of service.
28	• Once the request is made and not respected, it becomes a violation.
29	• There are a lot of details missing in this - is there a BSP with restrictions, is the candy the indivdual's or the home's
Additional Case Examples	 Two consumers were having sex in the clubhouse bathroom while staff prepared daily for group activities This case was substantiated against three clubhouse staff because they were not providing supervision at the clubhouse as required CLS worker takes recipient into the community for an outing. While in the community she and the recipient meets up with her boyfriend, and the three of them go to a movie together. (Potential confidentiality issue)

Demographic Information

The survey consisted of 15 individuals who practice within the field of recipient rights in the State of Michigan. The participants were all RROs within the Community Mental Health System. The participants were first asked which gender they aligned the most with. Participants were then asked which ethnicity they most closely identified with. Participants were then asked how many years they have served as a recipient rights officer. Participants were then asked about their current educational level. For the final demographic question, participants were asked to estimate the average number of annual investigations that they personally conduct each year. Table 1 above displays the responses to these questions.

Violation or Nonviolation Information

As can be seen from analysis of Table 2, many of the scenarios produced 100% accuracy with expert rating on the presence or absence of a violation. There were however, a handful scenarios that produced significant disagreement, including 3 scenarios where accuracy to expert responses fell below 50%.

Questions discussed in this section of the results are related to the questions and answers identified in Table 2. This section of the survey identified a participants capabilities of identifying a violation or nonviolation when they were provided a brief scenario. Thirty case examples were provided to participants and were assessed across participants and against the "gold standard" answers provided by experts by dividing the number of participants who provided a response that corresponded to the experts answer by all responses (AE = N Responses Corresponding to Experts/All Responses). Out of all thirty case examples, participants only had 100% agreement in three of the examples when it came to the determination of plausibility of a violation. Participants did reach agreement that there was either a definite violation or possible

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violation in sixteen out of thirty case examples. Participants and experts achieved highest levels of agreement in case examples that were deemed violations and 100% participant accuracy to expert responses in case examples of nonviolations. Average accuracy to expert responses in determination of plausibility of a violation or nonviolation between participants and experts was 84.87% (with the lowest level of agreement being 6.6% and the highest level of agreement being 100%). This was calculated by dividing all percentages of accuracy to expert responses by the number of case examples evaluated (Average AE = Sum of All % of AE/30).

Realism Information

Questions discussed in this section of the results are related to the questions and answers identified in Table 3. As these questions have been developed by modifying real world case examples, this section of the survey involved having the participants identify the level of realism for each case example. The thirty case examples were provided to participants and were assessed across participants. However, participants did not often agree to the same degree of level of realism. Out of all thirty case examples, participants highest level of agreement regarding the level of realism was 80% for one of the examples. Feedback from these case examples can be utilized to improve upon these case examples and also provide additional case examples to assess in the future.

Category Information

Questions discussed in this section of the results are related to the questions and answers identified in Table 4. This section of the assessment identifies a participants capabilities of identifying a category of a violation when they are provided a brief scenario. Thirty case examples were provided to participants and were assessed across participants and against the gold standard answers provided by experts. Agreement with experts regarding the specific

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category of a violation varied significantly (with the lowest level of agreement being 0% and the highest level of agreement being 100%). There were a large number of scenarios that produced significant disagreement, including 12 scenarios where agreement fell below 50%.

Feedback and Supplementary Case Examples

Participants were then allowed to provide feedback on current case examples and additional case examples. All of the participants responses have been outlined above in Table 4. The feedback in these case examples may provide benefit to modification of the case examples to ensure more accurate assessment and the additional case examples can be extended to allow for future use as assessment of examples of violations that are occurring most frequently throughout the state.

DISCUSSION

To my knowledge, this is one of the first empirical studies to evaluate the consistency and accuracy with which recipient rights policies are applied to real world cases. The data reported herein indicate a fairly high level of agreement between respondents on the presence or absence of a recipient rights violation for many of the scenarios and agreement between the respondent ratings and expert ratings. There were however some notable areas of disagreement in which scenarios received variable ratings and where the highest ratings differed from experts. This information can be helpful in targeting supplemental training focusing on the themes of the scenarios that occasioned significant disagreements between RROs and between RRO's and experts. It is hoped that focusing training on scenarios and policies that proved to be "challenging" (as indicated by the elevated levels of disagreement) might be an efficient and effective means of improving state level training.

The participants in the study however, did not have reliable agreement regarding the level of realism of a case example. Which, makes sense as many of these participants work in different areas throughout the state. This indicates that the violations that participants are exposed to may vary across the state. However, these scenarios were derived from actual cases. This suggests that RROs might be unaware of cases that are emerging outside of their own jurisdiction and that some disseminating of these cases and their policy level analysis might be

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helpful in making RROs aware of the range of cases that emerge and also help them improve their analysis of each case, including those that are typically outside of their typical experience.

The area that provided the largest inconsistencies was evaluation of the category of a violation or nonviolation. There was varying level of agreement throughout all of the case examples, some of which had high levels of agreement, and some of which had low levels of agreement. The participants also had low levels of agreement with the experts in many of the case examples provided. This indicates that improving analysis of the specific policy of a violation is an area that needs improvement, as specific policies can lead to differential consequences for the employee and the recipient of services. The inconsistencies found in the survey indicate that the training for RROs in certain policies is being misapplied.

The results of this study indicate that RROs tend to have generally high level of agreement when interpreting whether or not a violation has occurred. Furthermore, most RROs classify cases accurately regarding the presence or absence of a code violation when compared to experts. This is a very good level of performance, as it ensures that RROs will evaluate a violation of a recipients right correctly in terms of occurrence. But note again that some scenarios produced significant disagreement with the gold standard.

However, the results of the study also indicate that the agreement did not remain as consistent in evaluating which type of violation actually occurred. There was a higher level of disagreement across participants and when compared against the expert answers. This is more problematic, as different violations of recipient rights can lead to different consequences. This indicates that further training may be needed in ensuring that there is consistent interpretation of these rights. These trainings should utilize evidence-based training methods and should occur on a more frequent basis.

Limitations

The results reported above should be interpreted cautiously, in light of several methodological limitations. First, the level of participation was relatively low, with only 15 out of the 166 possible participants completing the entire survey. A larger sample of the population may have produced different results, and allowed for a more comprehensive review of the results and ensured a quality measurement beyond face validity of the assessment.

Secondly, it must be noted that all participants completed the survey online through selfreporting measures. These reports may not align with how RROs evaluate case examples of violations and nonviolations of recipient rights. For example, in a typical recipient rights case, the RROs would have the opportunity to request supplemental information from those involved and this supplemental information might yield higher levels of agreement and greater accuracy on the classification of cases and the identification of which policies were implicate in each violation. Obviously, this survey did not allow for supplemental questioning so its results should be extrapolated cautiously to the daily work of RROs. Nevertheless, it does provide some evidence of scenarios and policies that might be classified as challenging (based on high levels of disagreement between RROs and/or discrepancies between the RRO evaluation and that of the experts). Furthermore, the development of an expert validated set of scenarios might be incorporated into ongoing training for both RROs and for direct service providers and be used as a benchmark to document the completion and mastery of recipient rights training programs.

Future Directions

Michigan has one of the highest standards of protections of recipient rights. The author recommends developing more frequent trainings to ensure that RROs are able to maintain high levels of agreement across counties and with the guidelines proposed by MDHHS

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representatives. The results from this study can provide case examples in which the MDHHS system can assess a RROs ability to interpret a violation or nonviolation, and then further evaluate the category of that violation. This can be done by finding the critical features that must be trained to understand each category and citation and creating modules for each of the categories of violations to teach the major concepts all the way down to small discriminations that must be made.

Future research in this field could also focus on utilizing the contents of this survey to repeat the assessment with service providers throughout the state. The primary purpose of this would be to evaluate the level of consistency in training and evaluation of recipient rights violations for service providers throughout the state to ensure that each county is consistently applying protections regarding the rights of individuals.

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Participant Recruitment Email

Attention all Recipient Rights Officers:

The following email and research has been endorsed by members of the MDHHS Office of Recipient Rights. Recipients Rights are protected by law. I am contacting you as someone who has been identified as an expert in the topic of recipient rights. There have been no validated assessment of violations and nonviolations of recipient rights. As a part of my thesis project, I am conducting a research study evaluating an assessment of violations and nonviolations of recipient rights. The purpose of the study is to evaluate identification of examples and nonexamples of recipients rights violations. The study includes a survey which will take 30 minutes to 1.5 hours of you time. This survey will be completed in one session. The study is voluntary, and your responses will remain anonymous. If you wish to learn more about the study and participation criteria, contact Patrick Wieszciecinski at

Patrick.a.wieszciecinski@wmich.edu.

Link (To be determined)

Thank you in advance for your time and input in this study.

Appendix B

Consent Document

Please read this consent information before you begin this survey.

Past and present Michigan Recipient Rights Officers. You are invited to participate in a research project entitled "*Recipient Rights Interpretation*" designed to evaluate an assessment created utilizing violations and nonviolations of recipient rights. This study is being conducted by Dr. Richard Wayne Fuqua and Patrick Wieszciecinski from Western Michigan University, Department of Psychology. This research is being conducted as a part of the thesis requirements for Patrick Wieszciecinski and has been endorsed by members of the MDHHS Office of Recipient Rights.

This survey is comprised of case examples that will be rated on a Likert scale, evaluation of those case-examples, multiple choice responses, check-box responses, as well as opportunities for open-ended responses. The survey will take approximately 30 minutes to 1.5 hours to complete.

Your replies will remain anonymous. When you begin the survey, you are consenting to participate in the study. If you do not agree to participate in this research project, simply exit now. If, after beginning the survey, you decide that you do not wish to continue, you may stop at any time. You may choose to not answer any question for any reason. If you have questions prior to or during the study you may contact Richard Wayne Fuqua at 269-387-4474, Patrick Wieszciecinski at 989-315-3341, Western Michigan University Department of Psychology, the Human Subjects Institutional Review Board (269-387-8293) or the vice president for research (269-387-8298).

Participating in this survey online indicates your consent for the use of the answers you provide.

Appendix C

Test Bank

Below is a test bank containing all of the case examples that will be used in the survey. These questions have been created by the researcher utilizing information found throughout the Michigan Mental Health Code. They have been separated into categories based on answers provided by the experts.

Nonviolation

1. Employee A was cleaning Consumer A's bedroom. While cleaning Consumer A's bedroom, Employee A found a plate that was property belonging to the home. Employee A took the plate into the kitchen and washed the plate. Employee A then went back and continued cleaning Consumer A's bedroom. Consumer A said thank you to Employee A!

Answer: 0000

2. Consumer A (A small child) was playing outside at a park with Employee A. Consumer A ran into the parking lot, which had many cars driving through it. Employee A frantically chased Consumer A as they ran through the parking lot. Employee A picked up Consumer A and brought them back to the park. Consumer A continued playing on the slide.

Answer: 0000

3. In order to get some legal advice, Consumer A sought out his family's lawyer. Consumer A gave his lawyer information related to their legal concern. In trying to answer his questions appropriately and as best he could, Consumer A's lawyer discussed Consumer A's situation with a colleague of his in detail to see if she could help give advice to Consumer A as well.

Answer: 0000

4. Consumer A stated that she was feeling sick and asked to go to the hospital. The home manger Employee A looked at Consumer A and smiled while saying "Are you sure you are feeling sick?" then walked away from Consumer A. Consumer A went into her room and went to bed for the night. Consumer A woke up the next day and said she was still feeling sick. Employee A then took her to the hospital, and Consumer A was perfectly healthy.

Answer: 0000

5. Consumer A has complained to the home staff that his room has bed bugs. The home checked Consumer A's room and found bed bugs. The home has moved all residents to a safe and clean environment outside of the home immediately after receiving the complaint. The home hired specialists to ensure that the home was safe for all resident's before bringing them back into the home. The home also took all residents to the doctor to ensure none of them had contact with the bed bugs.

Answer: 0000

6. Consumer A enjoys watching television when he gets back from his community outings. Today one of his house mates was watching MTV. Consumer A wants to watch TV, but the home staff say that he can't watch tv until his house mates show ended.

Answer: 0000

Personal Property

1. Consumer A was told that they could not listen to their cd player during meal times. Home staff stated that Consumer A's dancing in their chair bothered other residents. Home staff took Consumer A's cd player during meal times and then gave it back at the end of the meal.

Answer: 7286

2. Consumer A has recently moved into a group home. Employee A takes Consumer A on a tour of the house before bringing her upstairs to show her which room Consumer A would be sleeping in. Consumer A takes a look at her bed and her room before asking Employee A where she could store her clothes and other personal belongings, to which Employee A responds, "Your personal property will be kept in a locked cabinet in the living room. You can ask us to access it when you would like."

Answer: 7281

3. Consumer A recently bought a pack of cigarettes. Employee A, one of the new staff to the home, knew about the house rules regarding smoking. The house rule indicated that residents could not have tobacco in the home. Employee A took Consumer A's cigarettes and stated that he could have them when he left the home. Consumer A asked for the cigarettes and Employee A gave them to him and told him he had to leave the property if he wanted to smoke. Consumer A did leave the property and gave the cigarettes back once he finished smoking.

Answer: 7281

4. Consumer A has recently been discharged from the hospital and has received orders to follow the BRAT diet. Consumer A really enjoys candy, but staff tell her that she cannot have candy due to the discharge orders. Consumer A gets upset and yells at staff who still do not give her the candy that Consumer A bought.

Answer: 7286

Suitable Services

1. While at a doctor's appointment, the physician recommended that Consumer A receive electroconvulsive treatment for the behavioral issues she was having. Before the doctor could fully explain the procedure to Consumer A, Employee A requested Consumer A's consent to use

the procedure. Employee A assured Consumer A that this was the best procedure for her. The Consumer gave consent without understanding the procedure fully.

Answer: 7003

2. Consumer A got back from his outing and Employee A was watching Comedy Central. Consumer A asked to watch his favorite show. Employee A did not acknowledge Consumer A's request. Consumer A sat on the couch, and eventually Employee A left the living room. Employee A did not change the channel, and Consumer A watched Comedy Central.

Answer: 1708

3. Employee A calls all of the residents in the home sweetie. Consumer A has asked Employee A numerous times to call her by her name. Employee A always says, "Oh sweetie, I can do that no problem!" and then continues to call Consumer A and the other residents in the home sweetie.

Answer: 1708

4. Consumer A has a behavior plan indicating that staff should have positive interactions with him every 10-minutes. Consumer A is Employee A's favorite resident, and Employee A spends lots of time with Consumer A. Employee A does not think Consumer A needs these frequent positive interactions. Employee A does not interact with Consumer A unless he comes to her for attention, which happens every thirty minutes.

Answer: 7080

Abuse and Neglect

1. Consumer A is a child who lives in a Child Caring Institution. Consumer A was hitting his head against a wall. Employee A put Consumer A in a manual hold to stop Consumer A from causing any damage to his head. Employee B called Consumer A's doctor to see if he would authorize the restraint to continue. The doctor did not authorize the restraint and asked staff to use a pillow between the wall and Consumer A's head instead. Employee A continued to physically restrain Consumer A because she felt that he had not yet calmed down from the self-injurious incident.

Answer: 72222

2. Employee A who is male was working with Consumer A who is female and in a wheelchair. Employee A had to take Consumer A to the bathroom and had to assist Consumer A in toileting. Employee A grabbed Consumer A's wrist and assisted her onto the toilet.. Employee A then assisted Consumer A off the toilet by the wrists, and then took her back to the living room. Staff did not use the techniques they were taught to transfer Consumer A.

Answer: 72222

3. Yesterday, Consumer A was found by Employee A trying to cut herself with a sharp knife. Very concerned about her behavior, Employee A physically held Consumer A in a bear hug for 10-minutes while Employee B removed the knife and cleared the room of sharp objects that Consumer A could harm herself with.. The treatment plan says to not use a wrap on the recipient due to her recent back surgery.

Answer: 72222

4. Consumer A walked around the home singing his favorite song to the other residents in the group home and the staff. Employee A was tired of hearing the same section of the song and looked at the resident and said, "No one cares, retard." Consumer A kept singing, and Employee A continued to do his work.

Answer: 7223

5. Employee A was preparing to pass morning medications to Consumer A. Consumer A's medication sheet has a space where blood pressure needed to be taken and written on it each morning when medications were passed. Employee A forgot to test Consumer A's blood pressure before passing his medications. Consumer A did not show any signs to raise concerns. Employee A tested Consumer A's blood pressure later in the day, and Consumer A's blood pressure was in normal levels. Employee A knew that Consumer A had no medications linked to blood pressure.

Answer: 72271

6. Consumer A wants to file a recipient rights complaint on Employee A because Employee A called him stupid. Consumer A asks Employee A to sit with him and help him write the recipient rights complaint because he is the only staff working. Employee A says that he won't sit with Consumer A and write the complaint, but that he can ask Employee B when she gets to the home and she can help Consumer A write the complaint.

Answer: 72272

7. Residents in the home have requested Employee A to not open their doors at night. They state that they hate being woken up by staff. Employee A agrees because he believes that residents deserve the right to sleep without their door being opened and being woken up by the light from the hallway! All of the residents have told staff that they like Johnny and appreciate that he doesn't wake them up every night with the bright light. Employee A said that he listens outside of the residents door to see if he can hear breathing when doing his required bed checks.

Answer: 72271

8. Ryan was working a 16 hour shift and was starting to get tired. It was third shift, and because all residents were sleeping in the home – Ryan went into the office and slept. Ryan woke up 4 minutes later and did all of his required bed checks. All residents were still sleeping and nothing bad happened, so Ryan laid down in the office again and set an alarm to do his next bed check.

Ryan is the only staff in the home overnight and two residents require staff to be alert at all times due to safety skills.

Answer: 72271

Treatment Planning

1. A case manager has had their caseload double within the past year from their standard quantity of cases. Due to this situation, Consumer A's service record has only been kept current through 8 months ago. The case manager is planning to update these files as soon as they catch up on all other responsibilities.

Answer:7122

Photographs, Fingerprints

1. The employees in the group home in which Consumer A lives decided to create an educational video documenting appropriate rules that other group homes should follow. Employee A obtained consent from almost all the consumers in the home to participate in the video, but forgot to obtain consent from Consumer A's legal guardian due to a time constraint, figuring that she would get consent for Consumer A's guardian after filming. Consumer A's guardian gave consent after the video was filmed, and they were excited that Consumer A was in the video.

Answer: 7241

Communication and Visits

1. Consumer A realized that when went to open the mail he had received today, that it had already been opened. Employee A announced that from now on, all mail delivered to the group home would be inspected to ensure that all residents were notified of important mail.

Answer: 7266

2. Consumer A has had some recent trouble with the law and needs to speak with his attorney. He asks Employee A if his attorney can meet with him at the group home; however, Employee A responds that since there are only public rooms (shared bedrooms and shared living areas) in the house, that there is no appropriate place for residents to meet with those kind of visitors at the group home. Employee A said that Consumer A would need to find a more appropriate meeting location.

Answer: 7261

Money

1. Consumer A enjoys gardening and tending to the yard at the group home in which he lives. In the past, Employee A has paid Consumer A an hourly minimum wage for the work that he does at the house; however, because Employee A wants to spend less of the group home budget

paying consumers, he recently decided to cut back Consumer A's hourly wage to \$4 an hour. Consumer A still gets to buy all of their favorite things, and the home saves money.

Answer: 7360

Freedom of Movement

1. Consumer A and Consumer B who are roommates in a group home got into a fist fight on Saturday evening. To prevent any more of this behavior, Consumer A was locked in the basement of the group home Saturday night, where he watched TV and enjoyed lots of snacks. Consumer A was monitored through a camera in the group home and was safe.

Answer: 7420

2. Consumer A and Consumer B both live in the same group home and have a history of using sharp objects to cut their forearms. For the safety of themselves, Employee A has restricted them from entering or spending time in the kitchen at the group home as there are sharp knives in the kitchen and it this restriction has been put into their treatment plan. Consumer C, who has never shown any signs of self harm, was also told by Employee A that he was not allowed in the kitchen in order to keep the rules of the home the same for everyone.

Answer: 7441

3. Two days ago was a very nice day that brought sunny skies and a calm weather forecast. Wanting to sit outside and read a book, Consumer A asked Employee A if she could sit in the garden to read. Employee A told her, "Since I have to keep an eye on you, and I don't want to go outside today, you'll have to read in the living room or in your room instead." Other Employee's don't mind when Consumer A goes outside, as there is no restriction of movement in Consumer A's behavior plan.

Answer: 7441

Appendix D

Sample Qualtrics Format

Below you will find a sample of the survey format for the Qualtrics questions. These questions have been divided into three separate sections: The Exclusionary Criteria Question, Demographic Questions, and Specific Case Example Questions. The format for each case example is the same and the only content that varies throughout the survey is the case example. The questions are depicted in *bold italics*. Each of these questions utilized either a checkbox, fill-in circle, or an open-ended response option which has been indicated in the brackets next to the question for your reference (i.e., *question* [Response Option])

Exclusionary Criteria Question:

Are you currently or have you ever been a recipient rights officer? [Fill-in Circle] Yes No

Demographic Questions:

What is your gender? [Fill-in Circle] Male Female Non-Binary / Third Gender Prefer Not to Answer

Please select the ethnicity that fits you best. [Fill-in Circle]

White Latino or Hispanic Black or African-American Native American or American Indian Asian / Pacific Islander Other Prefer Not to Answer

What is your current education level? [Fill-in Circle]

High-School Graduate Associates Degree Bachelors Degree Masters Degree Doctorate

How long have you served as a recipient rights officer? (Or if past officer: How many years did you serve as a recipient rights officer) [Fill-in Circle] Less than 1 year

1 – 3 years
3 – 8 years
8 – 15 years
16+ years
Prefer Not to Answer

What is an average estimation of the recipient rights violations that you personally investigate each year? (Or if past officer: How many violations did you investigate on average each year) [Fill-in Circle]

Less than 10 11-50 51-100 101-150 151-200 201-250 251-300 301+ Prefer Not to Answer

Case Example Questions:

Employee A was cleaning Consumer A's bedroom. While cleaning Consumer A's bedroom, Employee A found a plate that was property belonging to the home. Employee A took the plate into the kitchen and washed the plate. Employee A then went back and continued cleaning Consumer A's bedroom. Consumer A said thank you to Employee A! Is this an example a apparent or suspected allegation of a rights violation? [Fill in Circle]

Definite Violation Possible Violation Nonviolation Unsure *How realistic is the case example described above.* [Fill-in Circle] Very Realistic Fairly Realistic Unsure Mildly Unrealistic Very Unrealistic

If the case example above is a violation or could possibly violation please enter the corresponding violation number using the categories sheet. [Open-ended Response Option]

Optional: Do you have any feedback for this specific case example? [Open-ended Response Option]

Appendix E

HSIRB Approval Letter

WESTERN MICHIGAN UNIVERSITY



Institutional Review Board FWA00007042 IRB00000254

Date: December 13, 2018

- To: Wayne Fuqua, Principal Investigator Patrick Wieszciecinski, Student Investigator for thesis
- From: Amy Naugle, Ph.D., Chair My augu

Re: IRB Project Number 18-12-27

This letter will serve as confirmation that your research project titled "Recipient Rights Guidelines: Assessment of Practical Interpretation" has been **approved** under the **exempt** category of review by the Western Michigan University Institutional Review Board (IRB). The conditions and duration of this approval are specified in the policies of Western Michigan University. You may now begin to implement the research as described in the application.

Please note: This research may **only** be conducted exactly in the form it was approved. You must seek specific board approval for any changes to this project (e.g., **you must** *request a post-approval change to enroll subjects beyond the number stated in your application under "Number of subjects you want to complete the study"*). Failure to obtain approval for changes will result in a protocol deviation. In addition, if there are any unanticipated adverse reactions or unanticipated events associated with the conduct of this research, you should immediately suspend the project and contact the Chair of the IRB for consultation.

Reapproval of the project is required if it extends beyond the termination date stated below.

The Board wishes you success in the pursuit of your research goals.

Approval Termination:

December 12, 2019

Office of the Vice President for Research Research Compliance Office 1903 W. Michigan Ave., Kalamazoo, MI 49008-5456 prose, (269) 387-8293 10, (269) 387-8276 wtbitte, wmich.edu/research/compliance/bailto

convectors: Rosen 251 W. Walwood Halk