

**CENTRAL STATE HOSPITAL
LOCAL HUMAN RIGHTS COMMITTEE MEETING
MINUTES**

**Central State Hospital
26317 W. Washington Street
Petersburg, Virginia 23803
Building 39, Forensic Unit
Visitation Room
October 1, 2010
8:30 am Regular Meeting**

Attendance:

Jane Clayborne, Chair; Violet Hite, Vice-Chair; Linda Masri, Member, Hannibal Tuck, Member; William Lightfoot, Member; Jillian Taylor, Secretary

Guests:

Vicki Montgomery, Acting Director; Ronald Forbes, CSH Medical Director; Jennifer Barker, Director of Patient Relations & Staff Development; Reta Martin, CSW, Patient Relations & Staff Development; James Bell, Forensic Director; J. B., Patient; S. S., Patient; G. M., Patient; Michael Curseen, Region IV Human Rights Manager/ OHR

Absent: None

I. Call to Order: 8:30 am

II. Minutes of September 3, 2010 Meeting

Action: The draft minutes for the September 3, 2010 meeting were approved.

III. Public Comment:

Public comments were received from Mr. G. M.; Mr. J. B. and Mr. S. S.

Mr. G. M. shared the following verbal and written comments:

1. That CSH develops an honor ward with increased privileges for forensic patients who consistently comply with treatment plans, ward rules and staff directions.
2. To have two phones on every ward.
3. To have meetings at least every 3 months with Hospital Director, Medical Director, Forensic Director etc.
4. More variety of food selections
5. To have access to a legal assistant who is available to provide answers to patient's common legal questions.
6. Richmond-Times Newspapers for each ward.

7. Access to medical specialists such as dermatologists to address patient's special medical needs.
8. To be permitted to shower after using the gymnasium.
9. To be allowed to read our medical record.
10. To no longer use evaluators who purposely restrict patients' freedom without a valid justification.
11. To insure that all complaints raised against physicians or staff are thoroughly investigated.
12. To refrain from retaliation following an allegation or a complaint.
13. Since I have been a model patient free from delusions or hallucinations for over 10 years, the hospital should recommend a new evaluator and new attorneys for my case. CSH should be doing everything in its power to facilitate my discharge.
14. Access to canteen foods when requested.
15. Access to the internet.
16. The hospital should provide weight management programs to include special diets and diet pills for patients desiring to control their weight.
17. To have confidential access to attorneys and other legal professionals upon request.
18. To have 24 hour access to pen inserts and to be allowed to keep them on our person if requested.
19. For each patient to be permitted to use the hospital's telephone line once a month for free.
20. To enjoy the same privileges as inmates and prisoners who are permitted to access adult magazines and calendars.
21. To be able to order take-out foods once per month.
22. To permit patients to clean their own living areas over and above what the housekeeping department cleans.

Mr. J. B. shared the following verbal comments:

1. To place a mattress in each seclusion room to keep patients from being forced to lay on the cold concrete floors.
2. To correct the discrepancies between posted ward rules and staff practices. As an example, a physician may write an order permitting a patient to take keep eyeglasses in his bedroom but the security staff won't allow it.
3. Wants a clear explanation with concrete examples for why he has been unable to progress through the forensic system.

Mr. S. S. shared the following verbal and written comments:

1. Requests access to all public records of LHRC meetings.
2. Requests access to all LHRC monthly meeting minutes.
3. Requests that only initials are used to identify patients and that patient's identifying information is redacted.
4. Requests that computer scanners are made available to all patients during computer usage.
5. Requests that the hospital, in conjunction with patient's input, develops a template for responding to patient's complaints.

6. Requests that the LHRC seeks an opinion from the Office of Attorney General regarding the legality of the NGRI Manuel.
7. Requests that CSH provide a means for forensic patients to participate in State Board Meetings upon request.
8. Requests that Michael Curseen, Region IV Human Rights Manager and Jennifer Barker, Director of Patient Relations and Staff Development provide Protected Health Information and Public Information requested by S. S.
9. S. S. requests a Writ of Habeas Corpus
10. Requests an advisory opinion from the LHRC Chair to address
 - The applications of subsection 37.2-400; subsection 19.2-182.4 and 12 VAC 35-115 to the NGRI Manuel
 - Removing the CSH informal complaint process (12 VAC 35-115-170) from the Office of Patient Relations to the Office of Nursing.
 - VITA's compliance with their process.
 - All LHRC's access to Protected Health Information and the legal purposes for such application.
 - That the CSH LHRC seek information on how to follow FOIA (Freedom of Information Act) and bridge the applicable requirements that fragment under Chapter 37 of Title 22
 - Reality-based television
 - Pittsburg, Pennsylvania
 - Rachel Leigh Cook
 - Rolling Valley Elementary School
 - That Michael Curseen, Region IV Human Rights Manager fails to comply with sections 12 VAC 35-115-170 (complaint resolution process) and 12 VAC 35-115-180 (LHRC Hearing and Review Procedures)
 - Submitted a written derogatory remark concerning the LHRC Chair.
 - Why an emergency LHRC hearing by S. S. was denied.

IV. New Business

- A. Monthly Variance Reports for September 2010 – Presented by Jim Bell, Forensic Director

Mr. Bell reported that there were no reportable incidents involving the four approved forensic variances during the months of September 2010.

Action: The Committee approved a motion to accept Mr. Bell's reports.

(Executive Session)

The committee approved a Motion to move into Executive session pursuant to VA Code 2.2-3711 (A), Paragraph 15, for the protection of the privacy of individuals and their records in personal matters not related to public business.

The following subject matters were discussed in Executive Session:

Monthly Abuse Summaries – August 2010
Formal Human Rights Complaints – September 2010
Spit Guard Usage – September 2010
Biannual summary of Aggression Management Plans

(Return to Open Session)

Upon reconvening in open session, the Central State Hospital Local Human Rights Committee certified that to the best of each member's knowledge, only public business matters lawfully exempt from statutory open meeting requirements, and only public business matters identified in the motion to convene the closed session were discussed in closed session

- B.** Monthly Abuse Summary: August 2010 – Presented by Jennifer Barker, Director of Patient Relations and staff Development

Ms. Barker presented the abuse data covering August 2010

Action: The Committee accepted the abuse data reports presented by Ms. Barker for August 2010.

- C.** Formal Human Rights Complaints – September 2010 – Presented by Jennifer Barker, Director of Patient Relations and Staff Development

Action: The committee requested follow-up concerning the complaint regarding P. T. The Committee approved a motion to accept Mrs. Barker's reports.

- D.** Seclusions & Restraint Data Summary; Comparisons of S/R Incidents and Totals for September 2010 & September 2009 ~ Presented by Vicki Montgomery, Acting Director

Ms. Montgomery commented that almost ½ of the seclusion/restraint occurring during this reporting period was incurred by two patients. Ms. Montgomery also shared that there have been no bed restraints at CSH for approximately two years.

Action: The Committee approved a motion to accept Ms. Montgomery's report.

- E.** Spit Guard Usage- Presented by Michael Curseen, Region IV Human Rights Manager / OHR

Mr. Curseen shared that there were no reported uses of the spit mask for September 2010.

Action: The Committee approved a motion to accept Mr. Curseen's report.

F. Request for CSH LHRC Review and Approval of Next Friend Appointment RE: D. P.

The Committee conducted a telephonic interview with Ms. P. G. in response to her request to be designated as the next friend authorized representative for D. P. Ms. G. has known the patient and the patient's parents for 20 years until they became deceased and now serves as the court appointed trustee for this patient's special needs account. Ms. G. has a working knowledge of the patients history of mental illness and has provided emotional support to D. P. for several years. The hospital produced a signed statement from D. P. indicating his agreement for P. G. to serve as his designated next friend authorized representative. The Committee explained the role of the authorized representative to Ms. G. and she indicated her willingness to perform of the duties and Responsibilities as authorized representative.

Action: The Committee approved a motion to recommend the appointment of Ms. P. G. as the authorized representative next friend for D. P.

V. Follow-up Business:

1. LHRC Follow-up Discussion RE: Request for CSH LHRC to Serve as the LHRC for the VCBR ~ Presented by Jane Clayborne, Chair

In a letter from the LHRC Chair to Margaret Walsh, State Human Rights Director dated October 1, 2010, the LHRC agreed to temporarily serve as the LHRC for VCBR for a period not to exceed six months and requested a 90 day progress update from VCBR regarding their efforts to create their own LHRC. The CSH LHRC requested to review all allegations of abuse, neglect and exploitation as well as all formal human rights complaints for the calendar month prior to the date of the next scheduled CSH LHRC meeting. The Committee also requested that the VCBR Director or designee and the Human Rights Advocate/OHR attends every scheduled LHRC meeting. The Committee also agreed to conduct fact-finding hearings should a formal complaint be appealed to the LHRC.

Action: The Committee accepted the Chair's correspondence to the State Human Rights Director.

2. LHRC Follow-up RE: Update Concerning Compliance with the Reporting Requirements for Use of Physical Restraints ~ Presented by Vicki Montgomery, Acting Director

Ms. Montgomery reported that the hospital has requested best practices from other facilities for capturing data for physical restraint holds for non-medical restraints and continues to wait for the DBHDS to develop a departmental policy to guide facilities in the appropriate methods for capturing and recording non-medical physical restraint holds. Ms. Montgomery shared that CSH currently counts escorting patients to seclusion or restraints as part of the actual seclusion or restraint total time and also reported that a new data base is under development.

Action: The Committee accepted the Acting Director's update and requested a follow-up update at the December 3, 2010 LHRC meeting.

VI. Acting Director's Comments:

Ms. Montgomery commented that the department can expect additional budget cuts this year and huge budget cuts in the future and that hospital wards could be closed in order to accommodate the budget shortfall. Ms. Montgomery also shared that there have been significant personnel cuts and that there is a large court-ordered waiting list for patient admissions to CSH. While the waiting list has reduced, if the hospital is forced to eliminate patient beds, the waiting list would likely become frozen. Ms. Montgomery also reported that CSH recently experienced a 48 hour period without seclusion or restraints.

VII. Other Business

The Chair requested an update from the Acting Director concerning progress made to improve the procedures for responding to patient's dental issues at Central State Hospital following the investigation of dental services and procedures at Hiram Davis Medical Center.

Action: Ms. Montgomery agreed to provide the Committee with the requested update.

VIII. Adjournment: 10:35 A.M.

Next Meeting Date: November 5, 2010. The meeting will be held in the Main Conference Room of Building 113 at 8:30 A.M.