

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

**Central State Hospital
26317 W. Washington Street
Building 39, Main Conference Room
Petersburg, Virginia 23803
April 2, 2010
8:30 am Regular Meeting**

Attendance:

Jane Clayborne, Chair; Violet Hite, Vice-Chair; William Lightfoot, Member; Hannibal Tuck, Member and Isabel Vartanian, Member.

Guests:

Charles Davis, M. D., Hospital Director, Ronald, Forbes, M. D., Medical Director; Jennifer Barker, Director of Patient Relations & Training; Reta Martin, SW, Patient Relations, James Bell, Forensic Director; Michael Curseen, Region IV Human Rights Manager/ OHR; and M. Ansley Perkins, Human Rights Advocate/OHR

Absent:

Jillian Taylor, Member, Linda Masri, Member

I. Call to Order: 8:35 am

II. Minutes of March 5, 2010 Meeting

Action: The minutes for the March 5, 2010 meeting were approved.

III. Public Comment: None

IV. New Business

A. Monthly Variance Report for March 2010 – Presented by Jim Bell, Forensic Director

Mr. Bell reported that there were no reportable incidents involving the four approved forensic variances during the month of March 2010. Mr. Curseen informed the Committee and hospital representatives that the forensic variances would need to be reviewed by the LHRC no later than the October 1, 2010 LHRC meeting in order to ensure that the variances may be added to the State Human Rights Committee's October 29, 2010 meeting agenda for review and approval.

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 – February 2010
Formal Human Rights Complaints – March 2010
Spit Guard Usage – March 2010
LHRC Follow-up RE: Formal Complaints

(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: February 2010 – Presented by Jennifer Barker, Director of Patient Relations

Action: The Committee approved a motion to accept Mrs. Barker's reports.

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

The Committee reviewed a complaint in which a patient alleged That his psychiatrist used illegal criteria as a basis to attain a civil transfer. Mr. Bell provided a written response to this complaint.

Action: The Committee approved a motion to allow the patient an opportunity to responds to Mr. Bell's comments before proceeding. The committee also approved a motion to accept Mrs. Barker's reports.

D. Seclusions & Restraint Data Summary; Comparisons of S/R Incidents and Totals for March 2010 & March 2009- Presented by Charles Davis, Hospital Director

Dr. Davis shared that the recording of physical restraint holds has increased the restraint totals and commented that while CSH is committed to reducing the use of seclusion and restraints, excessive reductions to seclusion and restraint could result in injuries to staff and shared that S/R episodes greater than 100 but less than 200 appears to be an acceptable range. Dr. Davis also shared that CSH has not used bed restraints since December 2008. Dr. Davis also commented that

the restraint chair is no longer used at CSH due to a design flaw involving the belt clamp.

Action: The Committee approved a motion to accept Dr. Davis' report.

E. Spit Guard Usage- Presented by Michael Curseen, Human Rights Advocate/ OHR

Mr. Curseen shared that there was one reported use of the spit mask for March 2010 and that the documentation submitted appeared to indicate that the spit mask was used according to hospital policy.

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

V. Follow-up Business:

1. LHRC Follow-up RE: A) Nurse's Assessment Concerning the Need for Cultural Diversity Training on the Complainant's Living Area; B) Patient's Request to See a Private Optometrist ~ Presented by Jennifer Barker, Director of Patient Relations and Staff Development

Ms. Barker reported that the Nursing Director has reviewed the complaint in which a white patient alleged experiencing prejudice and disrespect by black staff as well as accusing black staff of displaying a non-professional attitude against white patients such as himself. The CSH Nursing Director's finding was that this was not a cultural diversity issue but rather a supervisory issue that would be addressed.

Ms. Barker reported that the patient received a new pair of eyeglasses from HWDMC. Mr. Curseen reminded the LHRC that the patient had requested to see a private optometrist in the community and would be willing to pay for the visit and inquired whether the patient's right to have her preferences honored was violated. Ms. Barker acknowledged that she used the patient's preference as a motivational tool to encourage the patient to achieve a higher level of privileges but shared that in the future, patient's preferences would be honored to the extent it is possible.

Action: The Committee approved a motion to accept Ms. Barker's follow-up report.

2. CSH Compliance with the Reporting Requirements for Use of Physical Restraint. - Presented by Jennifer Barker, Director of Patient Relations and Staff Development

The Committee had requested that CSH address the use of brief physical holds for instances that do not involve physical injections at the March 5, 2010 LHRC meeting. Ms. Barker shared that the data base for capturing physical restraint data is still in testing..

Action: The LHRC approved a motion to review a follow-up report from the hospital concerning the implementation of the physical restraint policy at the June 4, 2010 LHRC meeting.

3. Review of Suggested Changes to Policy Concerning Management of Suspected Rape & Incidents of Patient Related Sexual Activity- Presented by Ronald Forbes, M. D., Medical Director

Dr. Forbes discussed changes to the policy as well as training that has been provided to staff and reported that the James House has provided two in-service trainings for all levels of CSH staff. Dr. Forbes shared that the trainings were positively received and commented that Ms. Chana Ramsey, Executive Director of the James House, has offered to provide training the trainer classes for additional CSH staff.

Action: The committee accepted Dr. Forbes' report and the policy.

VI. Hospital Director's Comments:

Dr. Davis shared that the budget situation for the department does not look impressive and that budget cuts will continue to be made. Dr. Davis also commented on the higher costs of newer medications and shared that the hospital will utilize more of the older classes of medications.

VII. Adjournment: 10:31 A.M.

Next Meeting Date: May 7, 2010. Meeting will be held in the Main Conference Room in the Forensic Unit of Building 96 at 8:30 A.M.