

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

**Central State Hospital
26317 W. Washington Street
Building 113, Main Conference Room
Petersburg, Virginia 23803
August 1, 2008
8:30 am Regular Meeting**

Attendance:

Jane Clayborne, Chair; Violet Hite, Vice-Chair; Linda Masri, Member; Isabel Vartanian, Member; and Randi Key, Member

Guests:

Dr. Charles Davis, CSH Hospital Director; Ronald Forbes, M. D., Medical Director; Jennifer Barker, CSH Director of Patient Relations; Jim Bell, CSH Forensic Director; Michael Curseen, Human Rights Advocate/OHR; Carrie Flowers, Human Rights Advocate/ OHR; Ansley Perkins, Human Rights Advocate/OHR; Gloria Morman, CSH RNCB; Michael Shelton, CSH Training Instructor; Jillian McNeil, LHRC applicant; and Rose Mitchell, Executive Secretary/OHR.

Absent:

None

I. Call to Order: 8:33 am

II. Minutes of June 6, 2008 Meeting

Action: The minutes of the June 6, 2008 meeting were approved.

III. Public Comment: None

IV. New Business

A. Monthly Variance Report for June & July, 08 – 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 June & July, 2008.

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

Mr. Curseen reminded the Committee that the 4 CSH Variances needed to be approved by the Committee and then go to the SHRC for their 2 year

approval. Mr. Bell stated that the Commissioner had already approved the variances and he would go before the SHRC Committee in October, 2008, for their approval.

Action: The Committee approved a motion to recommend renewal of the four Forensic Variances to the State Human Rights Committee and for Mr. Bell to proceed with SHRC approval. Also, the Committee members would like to review the contraband items that have been found at CSH at their October meeting.

(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 – May & June 2008**
- Formal Human Rights Complaints – June & July 2008**
- Aggression Management Plans**
- Update: 6 Month Progress of Aggression Management Plans**
- Spit Guard Usage – June & July 08**
- LHRC Applicant for Membership: Ms. Jillian McNeil**

(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: May & June 2008 – Presented by Jennifer Barker**

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

- C. Formal Human Rights Complaints – June & July 2008 – Presented by Jennifer Barker**

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

- D. Seclusion & Restraint Data Summary: Comparison of S/R Incident and Totals for July 2008 & July 2007: Presented by Dr. Charles Davis**

Dr. Davis reported that the S/R data in forensics are gradually going down and civil side is higher because of a self-injurious patient. Also, reported that the number of bed restraints is down sufficiently. CSH is now using the restraint chair, instead of bed restraints.

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

E. Update Review of Aggression Management Plans - Presented by Jennifer Barker

The committee reviewed the data presented on the 8 aggression management plans Mrs. Barker told the Committee that the number would change to 7, as one patient was transferred to the civil side. The Committee suggested including the behaviors prompting the plan to the aggression management plans and that the forms are filled out completely.

Action: The Committee approved a motion to accept Mrs. Barker's report, and requested that the target behavior being addressed by the AMP be attached to all plans being presented for review before the Committee.

F. Spit Mask Usage – April & May 2008 – Presented by Michael Curseen

Mr. Curseen reported that the spit mask seemed to have been used appropriately.

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

G. LHRC Applicant for Membership: Ms. Jillian McNeil

The committee interviewed Ms. McNeil and submitted its recommendation to Mr. Curseen for submission to the State Human Rights Committee.

V. Follow-up Business:

1. LHRC Follow-up RE: Six Month Progress Update of Aggression Management Plans: Presented by Jennifer Barker

Ms. Barker reported on the total number of active/inactive AMPs; number of AMPs developed during the past 6 months; number of AMPS discontinued during the past 6 months; and the issues resulting from patient's review of AMP. Mr. Curseen shared that he had previously discussed a question with Dr. Davis concerning whether the manufacturers labeling of the camisole restraint device suggested that its intended use to be in conjunction with a bed or chair as opposed to being used as a solitary device. Dr. Davis stated that he had researched this issue and was satisfied that the camisole restraint could be safely used as a solitary restraint device.

Action: The Committee approved a motion to accept Mrs. Barker's report. The Committee also approved a motion to receive quarterly updates of the Aggression Management Plans with the next report to be presented at the

November 7, 2008 LHRC meeting.

2. LHRC Follow-up RE: Demonstration of Spit Mask, Camisole and Ambulatory Restraints: Presented by Mrs. Jennifer Barker, Mr. Michael Shelton and Ms. Gloria Morman.

Ms. Clayborne, Chair volunteered to be placed in the 4 point ambulatory restraints. The Committee was able to see that Ms. Clayborne could still move around in them, but striking out at another person would be difficult while in these restraints. Ms. Clayborne also demonstrated wearing the spit mask. When a patient is wearing the spit mask they cannot spit at the staff but are able to breathe unobstructed thru this mask.

Mr. Curseen volunteered to have the camisole restraint put on him. While in the camisole restraint, a patient is unable to move or use their arms or hands.

Mrs. Barker stated that patients are monitored closely with a 1:1 staff whenever they are in a 4 point ambulatory restraint, a camisole restraint or are wearing a spit mask (non-restraint). Mrs. Barker explained that each of these items require a doctor's orders, renewable every 4 hours.

Action: The Committee thanked Ms. Barker, Mr. Shelton and Ms. Morman for demonstrating and answering questions concerning these devices.

3. LHRC Follow-up RE: Concerning Forensic Housekeeping Satisfaction Survey, Environmental Checks: Presented by Mrs. Barker

Mrs. Barker presented data graphs to the Committee measuring patients satisfaction regarding the overall cleanliness of each living area environment.

Action: The Committee approved a motion to accept Mrs. Barker's report. The Committee will plan to review the Forensic Housekeeping Satisfaction Survey and Environmental Checks at the November 7, 2008 LHRC meeting.

VI. Director's Comments:

Dr Davis shared that a SAMHSA Consultant visited CSH on July 21 and 22nd, 2008 to tour of the hospital and was very much impressed with what CSH had accomplished, especially in its dementia program. Dr. Davis further stated that the SAMHSA consultant was impressed with the caring attitude

displayed by staff and praised CSH's treatment malls.

Adjournment: 11:35 A.M.

Next Meeting Date: October 3, 2008