

DRAFT

CENTRAL STATE HOSPITAL LOCAL HUMAN RIGHTS COMMITTEE MEETING MINUTES

**Central State Hospital
26317 W. Washington Street
Building 113, Main Conference Room
Petersburg, Virginia 23803**

March 7, 2008

8:30 am Regular Meeting

Attendance:

Violet Hite, Chair; Member; Jane Clayborne, Vice-Chair; Linda Masri, Member; Chana Ramsey, Member; and Isabel Vartanian, Member.

Guests:

Dr. Charles Davis, CSH Hospital Director; Jennifer Barker, CSH Director of Patient Relations; Michael Curseen, Human Rights Advocate/Office of Human Rights; Ann Bailey, CSH Risk Manager; Dr. Sriram, CSH Psychiatrist; and Rose Mitchell, Executive Secretary/Office of Human Rights.

Absent: None

I. Call to Order: 8:30 am

II. Minutes of February 1, 2008 Meeting

The minutes were amended as follows (page 4, item H):

Mrs. Barker told the Committee that CSH has accepted all of the committee's recommendations. Also, on January 29, 2008, the findings were discussed with A.T. and Ms. Flowers was present at this meeting. Mrs. Barker stated that all staff will be given training on how to properly mark thru items in a patient's record and all employees will receive orientation from their supervisors on the importance of initialing and dating any changes made to existing records documentation. To further emphasize this, Mrs. Barker and Ms. Parham, Director of Nursing, will conduct random chart reviews to check on the on-going progress of this implementation. Ms. Flowers shared that A. T. may appeal the LHRC's decision and request an appeal before the State Human Rights Committee.

Action: The minutes were approved with the above amended correction.

III. Public Comment:

Ms. Ann Bailey, CSH Risk Manger, addressed the Committee concerning a SAMSA grant that CSH had received. The grant funding will be used to implement strategies for reducing seclusion and restraints. Ms. Bailey invited members of the CSH LHRC to participate on the advisory panel to provide oversight to those individuals involved in the implementation of the restraint reduction strategies. Ms. Bailey stated that the advisory panel would meet quarterly and requested that anyone interested in serving on the advisory panel to please contact her.

Mr. Curseen told the LHRC that the Annual Volunteer Luncheon will be held on April 1st and invited up to three LHRC members to attend this luncheon, if possible. Ms. Vartanian stated that she would check her schedule and would like to attend if available.

IV. New Business

A. Monthly Variance Report for February 08 – Presented by Jennifer Barker, Director of Patient Relations

Mrs. Barker reported that there were no reportable incidents involving the four approved forensic variances during the month of February 2008.

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

(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 – January 2008

Formal Human Rights Complaints – February 2008

Aggression Management Plans

Spit Guard Usage – February 08

(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: January 2008 – Presented by Jennifer Barker

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

C. Formal Human Rights Complaints – February 2008 – Presented by Jennifer Barker

Action: The Committee approved a motion to accept Mrs. Barker’s report.

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

Mrs. Barker told the Committee that the Aggression Management Plan (AMP) checklist for seclusion and restraint is filled out by a treatment team member and the client is aware of the AMP.

After discussion by the Committee the following motion was made:

Action: The Committee approved a motion to accept Mrs. Barker’s report Requested responses to the following questions:

1. Last time AMP was implemented for inactive cases;
2. Reviewer who filled out the report and the date;
3. Strike thru RE: E. P. without initials on AMPS needs to be redone
4. When staff actions indicate a ‘no’ what is the follow-up action?

E. Spit Mask Usage – February 2008 – Presented by Michael Curseen

Mr. Curseen reviewed the spit mask data and reported that the spit masks appeared to be used appropriately during the month of February 2008.

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

F. Research Proposals: (1) “The Utility of Brief Psychiatric Rating Scale for Predicting Aggression in Forensic Inpatients”; (2) “Length of Restoration And Unrestorable Incompetent Defendant” – Presented by Dr. Sriram

Research Proposal # 1: This proposal is being conducted by Dr. Torres and Dr. Stredney. The research utilizes comparative data between aggressive versus non-aggressive patients using the Brief Psychiatric Rating Scale (BPRS). No patient names are listed in the research proposal.

Research Proposal # 2: This proposal is being conducted by Dr. Greg Wolber.

This study is a literature review and does not involve patient participation. This study attempts to identify how long it takes to determine whether a person is unrestorably incompetent and utilizes an opinion survey of other treatment professional.

The Committee expressed concerned about the personal information of the psychologists contained in the proposals. Dr. Sriram will look into this concern.

Action: The Committee approved a motion to accept Dr. Sriram's reports.

V. Follow-up Business

1. LHRC Follow-up: Update Regarding the Implementation of the Hospital's Satisfaction Survey RE: Inadequate Housekeeping Services Provided in the Forensic Unit – Building 39 – Presented by Mrs. Barker

Mrs. Barker presented the Committee with graphs on the individual wards and how well the patient rated each ward on cleanliness. Mrs. Barker stated that the graphs seemed to indicate that the patients feel that CSH neither improved nor declined in the area of housekeeping.

Mrs. Barker further stated that it is difficult to get patients involved in this survey. According to Ms. Barker, she explains to each patient the purpose of the satisfaction survey, however, a majority of patients refuse to participate.

Ms. Masri requested to know whether FMHT staff still conducts environmental checks? Mrs. Barker agreed to check with Joyce Grecco, Assistant Director of Nursing and report back to the committee

Action: Committee approved a motion to accept Mrs. Barker's report and to review this again in 3 months (June). Ms. Barker will also check with Joyce Grecco, Assistant Director of Nursing to determine whether FMHT staff still conduct environmental checks and report this information back to the committee.

VI. Director's Comments:

Dr. Davis told the Committee that Dr. Reinhard, Commissioner, visited building 96 for a kick-off of the SSAMA Seclusion/Restraint Grant. Staff and patients participated in this kick-off breakfast meeting. This grant will be on-going for a couple of years. Dr. Davis further stated that he believes there is a change in staff attitudes (fewer ultimatums; fewer restrictions). Dr. Davis said that CSH continues to use seclusion and restraints for new admissions who are experiencing a heightened crisis state as well as for patients who insist on being placed in restraints while threatening physical harm to self or others if staff refuses to comply with their request.

Adjournment: 10:30 A.M.

Next Meeting Date: April 4, 2008