

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

**Central State Hospital
26317 W. Washington Street
Building 113, Main Conference Room
Petersburg, Virginia 23803
April 13, 2007
8:30 a.m.**

Attendance:

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

Guests:

Charles Davis, M.D., CSH Facility Director; Ronald Forbes, M.D., CSH Medical Director; Jennifer Barker, Patient Rights Coordinator/CSH; Michael Curseen, Human Rights Advocate/Office of Human Rights; Carrie Flowers, Human Rights Advocate/Office of Human Rights; Jim Bell, CSH Forensics Unit Director; Dr. Baird, CSH Psychiatrist; and Rose Mitchell, Executive Secretary/Office of Human Rights.

Absent:

None

I. Call to Order: 8:37 am

II. Minutes of March 2, 2007, Meeting

The minutes were approved.

IV. Public Comment

The Committee expressed their appreciation to Ms. Isabel Vartanian, LHRC member for attending the SHRC/LHRC Appreciation Dinner on behalf of the CSH LHRC.

V. New Business

A. Monthly Variance Report for March 2007 – Presented by Jim Bell

Mr. Bell reported that there were no reportable incidents involving the four approved forensic variances during the month of March 2007.

Action: The Committee approved a motion to accept Mr. Bell'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 Summary: February 2007

Formal Human Rights Complaints – March 2007

Spit Guard Usage – March 2007

Review Case - A. A.

Reappointment of LHRC Member – Isabel Vartanian

(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 2007 – Presented by
Jennifer Barker

The Committee approved a motion to accept Ms. Barker's report.

C. Formal Human Rights Complaints – March 2007 – Presented
by Jennifer Barker

The Committee approved a motion to accept Ms. Barker's reports.

D. Spit Mask Usage – March 2007 – Presented by Michael
Curseen

Mr. Curseen stated that there was one reported incident in which the spit mask was applied during the month of March and that the spit mask appeared to be used appropriately.

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

E. Review of Ward Rules: Building 39 & Buildings 94/95 - Presented by
Jennifer Barker

Building 39 Ward Rules: Ms. Barker stated that the ward rules were developed with patient input. Examples: Clients requested that incidents of trading food with other clients be individually addressed by the treatment team instead of with an automatic level drop; clients also requested permission to bring a magazine with them to the treatment mall to read during the 15 minutes breaks. These requests were incorporated into the proposed revisions to the building 39 ward rules.

Discussion: The committee questioned why patients would not be permitted to display pictures on their bedroom walls. Mr. Curseen added that the CSH Safety Officer communicated that pictures could be hung on patient's bedroom walls with certain limitations to size and space utilized. The LHRC consensus is to for patients to have pictures in their bedroom to make the room more personal. Ms. Barker agreed to check with Colonel James Lowery, Forensic Security Director to see if this is feasible. The Committee also recommended a rewording of a sentence under Dining Room Expectations to read "encouraged not to".

The Committee approved a motion to accept the revisions to the Ward Rules for Building 39, with the new language added to the Dining Room section. The Committee also requested that the date of LHRC approval be included at the bottom of the ward rules.

Building 94/95 Ward Rules: Ms. Barker stated that these ward rules were also developed with patient input. Examples: Some language in old ward rules isn't clear; Clients requested that wanted shower times begin at 5:00 AM instead of 6:00 AM.

Discussion: The Committee agreed with the content of the ward rules but questioned the tone of some the language used to express the intent of the ward rules. Examples of the language questioned by the LHRC include, "*It is expected. . . Patients will . . . Patients must . . . our program*" Mr. Curseen agreed to help Ms. Barker to change the tone of the ward rules.

The Committee approved a motion to tentatively approve the ward rules with changes in the wording used. The Committee also requested that the date of LHRC approval is included at the bottom of the ward rules.

F. LHRC Reappointment for Membership: Ms. Isabel Vartanian

The Committee approved a motion to recommend Ms. Isabel Vartanian's reappointment application to the SHRC for their approval.

G. Review of A.A. – Presented by Dr. Forbes and Dr. Baird

Discussion: Dr. Ronald Forbes and Dr. R. Pryor Baird discussed the problem encountered by the treatment team concerning the excessive use of restraints with A. A. according to Dr. Forbes, this patient has consistently

threatened to strike and cause injury to other individuals if released from wrist to waist restraints. Dr. Baird explained the ongoing daily efforts of the treatment team to persuade A. A. to allow the restraints to be removed. Dr. Forbes has sought consultation with a company that manufactures restraints to discuss the development of a device that would allow A.A. to remove himself at will while providing the same reinforcing value of a traditional restraint device. Dr. Forbes explained that such a device would not be considered a restraint since A. A. would have the ability to remove himself at will. The team will also continue to explore other alternatives to fade the use of restraints for A. A.

The Committee approved a motion to accept Dr. Forbes and Dr. Baird's reports.

VI. Follow-up Business

1. LHRC Follow-up Request RE: Demonstration of Restraint Mittens – Presented by Mrs. Barker.

Mrs. Barker placed the restraint mittens on Ms. Clayborne, LHRC member to demonstrate to the committee that a patient could not pick at his/her body while wearing the mittens. Mrs. Barker further explained that certain patients actually experience a degree of comfort in wearing restraint mittens.

The Committee approved a motion to accept Mrs. Barker's demonstration.

2. LHRC Follow-up to Commissioner's Written Response Concerning Abuse Case # 703-2006-0080, J.S.

Chana Ramsey, Chair of the LHRC presented the draft of a letter from the Chair to the Commissioner and distributed this letter to the LHRC for their approval and signature. The Committee suggested a few minor changes in the wording of letter. Each LHRC member signed the letter.

The Committee approved sending the letter to the Commissioner with minor revisions.

3. SHRC Follow-up of LHRC's Request or Guidance – Abuse Case # 05-0107 at the March 9, 2007 SHRC Meeting

The SHRC Meeting was attended by Chana Ramsey, Jane Clayborne, LHRC members, Michael Curseen, Carrie Flowers, Human Rights Advocates and Jennifer Barker, Patient Rights Coordinator for CSH.

Discussion: According to Ms. Ramsey, Karen Walters, Office of

Attorney General's indicated that it was not her role to second guess any decision reached by the department's Investigations Manager, regardless of her personal feelings concerning the decision reached. Ms. Ramsey shared that the SHRC seemed to be more focused on what process was used by the CSH LHRC in addressing this issue and less focused on the apparent human rights violations that occurred resulting from staffs' failure to report an allegation of abuse. Mr. Curseen stated that the Commissioner planned to attend the next Quarterly Advocate's meeting on May 1, 2007 and planned to address issues and questions regarding the interpretation of D. I. 201. The Committee members who attended the SHRC meeting concerning this issue expressed dissatisfaction with the SHRC's response to the guidance requested by the CSH LHRC concerning the question of whether a staff's failure to report an allegation of abuse constitutes neglect.

The Committee approved a motion to accept the Chair's report.

VII. Director's Comments:

Dr. Davis stated that a letter was sent to all CSH employees at their home address, making them aware that CSH will become a tobacco free campus in October 2007. Dr. Davis stated that he anticipated some problems with the banning of tobacco products but shared that any employees caught using tobacco products would be cited. He further stated that no tobacco products would be allowed in the buildings, grounds or parking lots of CSH, Hiram Davis Medical Center or Southside Virginia Training Center.

VIII. Adjournment: 12:15 pm

Next Meeting Date: May 4, 2007

