

**CATAWBA HOSPITAL
CATAWBA, VIRGINIA**

MINUTES

COMMITTEE NAME: Local Human Rights Committee

MEETING DATE: February 15, 2006

MEETING TIME: 3:00 PM

PLACE: Building 24 Conference Room

MEMBERS PRESENT: Reba Keen, Chairperson; Dr. Martin Ham, Vice Chairperson; Rena Ferguson; Louise Garman; Carolyn Heldreth; Thayer Walker

MEMBERS ABSENT: Courtney Hewitt; Valarie Robinson

STAFF PRESENT: Jack L. Wood, Facility Director/CEO; Walton Mitchell, Vice President of Patient Care Services; Don Obenshain, Corporate Compliance Officer

OHR STAFF PRESENT: Sonia Smith, MSW

GUESTS: None

MEETING AGENDA – MAIN POINTS DISCUSSED:

1. **Review of Minutes:** The minutes from the December 14, 2005 meeting were approved as distributed.

Review Date: No further review

2. **Restraint and Protective Restraint:** Restraint and protective restraint hour graphs for November 2005 to January 2006 were reviewed by the Committee. It was noted that the facility has been experiencing a full census the past several months, which may increase hours. Mr. Wood and Mr. Mitchell explained how treatment teams in conjunction with consultation from occupational and physical therapy evaluate the risks and benefits for protective restraints to determine the least restrictive treatment option.

Review Date: No further review

3. **Informal Complaints:** The informal complaints for December 2005 and January 2006 were reviewed by Mr. Obenshain. There were ten (10) total complaints for this period; five (5) on 2nd Floor, three (3) on 4th Floor, and two (2) on 5th Floor. By category, two (2) complaints were treatment with dignity; two (2) were participation in treatment; two (2) were discharge related; and four (4) were miscellaneous. All complaints were resolved within five days at the informal level.

Review Date: No further review

4. **Director's Liaison Report:** Mr. Mitchell reviewed the admission and discharge data for December 2005 and January 2006. Admissions increased overall in January compared to December, with nearly double geriatric admissions in January compared to December. The median length of stay for both adults and geriatrics was comparable for the period. The median length of stay on 2nd Floor, West increased due to two long-term patients.

Mr. Mitchell explained the collaborative admission process begun over three years ago through Regional Partnerships which will change how patients are admitted to psychiatric facilities throughout the State. This process takes the State facilities out of the role as "gatekeeper" for admission decisions, and the CSB's assuming this responsibility in accordance with the Code of Virginia. All service providers meet daily and weekly to discuss each patient's case and make a determination on the facility/service that best meets the patient's needs. Catawba Hospital now most often becomes the last resort, which will increase the acuity of the patients they are serving. All facilities and service providers account for their open beds, and revenue streams are provided to buy bed days at private facilities. Facilities and community service providers are working together to protect State beds for the patients with the greatest need. In the past, State facilities were the default in the admission process; patients are now placed in the appropriate treatment setting first to assure appropriate treatment and enhance continuity of care.

In order to protect the privacy of an individual and his record, the Committee entered into closed session to review an ECT consent. Mr. Mitchell reviewed an ECT consent for a 73 year old female with a recurrent history of Major Depression, catatonic-like presentation, significant appetite disturbance with weight loss, and isolative behaviors. The patient has a past history of successful ECT treatment. The LHRC sub-committee reviewed the request on January 27, 2006, and approved. Upon returning to open session, each member certified that only the ECT consent review was conducted.

Review Date: No further review

5. **Director's Report:** Mr. Wood discussed the funds allocated by the General Assembly for the Department of Mental Health, Mental Retardation and Substance Abuse Services, to rebuild/refurbish four facilities and as a funding source for Regional Partnerships. Dr. James Reinhard has been reappointed by Governor Kaine as the DMHMRSAS Commissioner. Mr. Wood was recently elected President of the Mental Health Planning Council. Catawba Hospital's peer-to-peer treatment options and successful supportive services with consumer-based groups such as the Department of Rehabilitative Services and the Virginia Office for Protection and Advocacy (VOPA) were highlighted. Catawba Hospital is striving to provide accurate patient assessment to assist with acuity, to assure the facility remains seclusion-free and lower restraint usage, and to use innovative peer support systems in treatment.

Review Date: No further review

6. **Advocate's Report:** Ms. Smith reported there were two (2) formal complaints for the period of December 1, 2005 to January 31, 2006; both received an appropriate response at the Director level.

In order to protect the privacy of individuals and their records, the Committee entered into closed session to review two allegations of abuse and/or neglect. Upon returning to open session, each member certified that only the two allegations were reviewed.

A copy of the State Human Rights Committee newsletter, "*Human Writes*", was distributed to the Committee along with the Web addresses for obtaining future issues. A guidance memo from the Chair of the State Human Rights Committee regarding bylaws and minutes was reviewed. Ms. Smith advised there will be state-wide LHRC member training on September 7-8, 2006, in either Richmond or Charlottesville.

Review Date: No further review

7. **Membership Report:** One membership vacancy still remains, and Ms. Walker's second term will expire in June 2006.
9. **Other Business:** None

There being no further business to discuss, the meeting was adjourned at 4:15 PM. The next meeting is scheduled for April 19, 2006, at 3:00 PM, in the Conference Room of Building 24, Catawba Hospital.

Reba Keene, Chairperson