CATAWBA HOSPITAL CATAWBA, VIRGINIA Catawba LHRC Review of Case Number: CATAWBA 2008-002

MEETING DATE:	<u>November 25, 2008</u>	ME	ETING TIM	E: <u>3:00</u>	<u>) PM</u>	
PLACE:	Building 24 - Lobby					
MEMBERS PRESENT:	<u>Carolyn Heldreth,</u> Robinson; Millie Rh	*	Will Childe	rs; Bo	Miller;	Valerie
MEMBERS ABSENT:	Rena Ferguson					
OHR STAFF PRESENT: CH STAFF PRESENT:	<u>Adrien Monti, Huma</u> Jack Wood, Direct Simonenko, M.D. (R	tor; Tom Nog		tending	Psychiat	<u>rist); Iouri</u>

The LHRC convened a special meeting in response the petition submitted by Jack Wood, Director/CEO of Catawba Hospital. Mr. Wood petitioned the LHRC for the purpose of reviewing a proposed course of treatment for a specific individual to determine whether there is sufficient evidence to relative to this course of treatment being in the best interest of the individual and whether substitute consent has been properly obtained.

Pursuant to VA Code §2.2-3711. A. (4) and (15). (Closed meetings authorized for certain limited purposes.), Ms. Heldreth moved that the LHRC go into closed session for the purpose of protecting the privacy of individuals in personal matters not related to public business and the discussion of medical and mental health records, namely to conduct a review of an individualized treatment plan.

Upon re-entering public session, Ms. Heldreth moved that each member certify that to the best of his or her knowledge that only matters lawfully exempted from open meetings requirements were heard, discussed, or considered. The motion was seconded and each member so certified.

Having heard and reviewed the evidence regarding case Catawba 2008-02, including but not limited to testimony from Dr. Noga, attending psychiatrist, and Adrien Monti, Human Rights Advocate, as well as having reviewed the capacity determination, and the appointment of the individual's husband as her legal guardian, the LHRC agreed that the personal consent of the individual is not required, and that substitute consent by her legal guardian has been appropriately obtained. Ms. Heldreth moved to approve the proposed plan for the administration of treatment. The LHRC noted that this information will be shared with the individual upon improvement of her symptoms to the extent that she is capable of understanding, and that an alternate method of treatment will be decided upon prior to her discharge from Catawba Hospital.

The motion was seconded and passed unanimously.

The Committee adjourned at 3:55 p.m.

Follow-up: February 11, 2008

Carolyn Heldreth, Chairperson