

**CATAWBA HOSPITAL  
CATAWBA, VIRGINIA**

**MINUTES**

**COMMITTEE NAME:** Local Human Rights Committee

**MEETING DATE:** August 12, 2009      **MEETING TIME:** 3:00 PM

**PLACE:** Building 24 - Lobby

**MEMBERS PRESENT:** Carolyn Heldreth, Chairperson; Rena Ferguson, Vice Chairperson; Dianna Parrish; Millie Rhodes; Valarie Robinson

**MEMBERS ABSENT:** Will Childers; Bo Miller; JoAnn Patterson; Letitia Malone;

**OHR STAFF PRESENT:** Nan Neese, Regional Advocate

**CH STAFF PRESENT:** Jack Wood, Director; Don Obenshain, Corporate Compliance Officer; Vickie Fisher, RN, PhD

**LGH STAFF PRESENT:** Mollie Guzo, LPN, Clinical Services, Lewis Gale Center for Behavioral Health

**CHS STAFF PRESENT:** None

**GUESTS:** None

**MEETING AGENDA – MAIN POINTS DISCUSSED:**

1. **Welcome and Introductions**
2. **Review of Minutes:** The minutes of the June 10, 2009 meeting were approved.

**Review Date:** No further review
3. **Advocate's Report (Nan Neese):** Adrien Monti resigned her position as Human Rights Advocate effective July 24, 2009. Due to the recent state budget cuts, it is unclear whether or not this position will be filled; or if so, when that may be. Nan Neese, Regional Advocate, is providing coverage in the interim. Catawba Hospital will host the State Human Rights Committee on September 4, 2009. Members of this committee are invited to attend.

**Review Date:** No further review
4. **Catawba Hospital Reports:**
  - a. **Admissions and Discharges (Jack Wood):** – Admissions and discharges were up for June and July 2009 for both the adult and geriatric populations. It was noted several forensic patients were discharged, including NGRI patients discharged on Conditional Release. The NGRI status impacts significantly the average length of stay statistics due to the amount of time it takes for an individual to work through the conditional release process.
  - b. **Restraint Usage (Vicky Fisher):** – Behavioral restraints were up slightly in June, but decreased in July 2009. Protective restraint usage is up in an effort to provide a safe, yet least restrictive environment for an increasingly frail and high falls risk geriatric population.
  - c. **Complaints/Serious Injury/Deaths (Don Obenshain):** – There were a total of 8 complaints handled through the informal process, many from the same individual. The majority of complaints were in

the Treatment with Dignity category. There were 2 complaints handled through the formal process. All complaints have been resolved in a manner acceptable to the individuals involved.

- d. Facility Update (Jack Wood): – Statewide budget reductions continue. Previously, only administrative services were targeted, however we are now being asked to reduce the budget by as much as 15% and include clinical adult services. Catawba Hospital could possibly lose as many as 14 beds and 12 staff.

**Review Date:** No further review

**5. Lewis-Gale Center for Behavioral Health Reports (Molly Guzo):**

- a. Admission & Discharges: Admissions and discharges decreased slightly for June/July 2009 from the previous 2 months, and readmissions within 15 days decreased rather significantly. Readmissions continue to be audited as a focus for improvement.
- b. Restraint Usage: There were no behavioral restraint events in June, but in July there were 3 events for a total of 6.1 hours.
- c. Complaints/Serious Injury/Deaths: There were 11 complaints addressed through the informal process for the months of June and July 2009. All were resolved to the satisfaction of the individual or family. Eight illnesses and one injury were reported; there were no deaths.

**Review Date:** No further review

6. **Carilion Behavioral Health**: Reports were submitted for the months of June and July 2009; however, the Committee voted unanimously to defer review of these reports until a representative from the facility could be present.

**Review Date:** October 14, 2009

7. **Other Business**: Pursuant to VA Code §2.2-3711. A. (4) and (15). (Closed meetings authorized for certain limited purposes.), Vice-Chairperson Rena Ferguson 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 record, as follows:

- a. Allegations of abuse or neglect, along with other patient specific information.
- b. Update to Case Number 2008-002

*Upon re-entering public session, Ms. Ferguson 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 testimony from Dr. Noga, attending psychiatrist, 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. A motion was made to approve the proposed plan for the administration of treatment, including the additional medications deemed necessary. The LHRC was again assured 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 discharge from Catawba Hospital.

**Review Date:** October 14, 2009

8. **Next Meeting**: October 14, 2009.