

**CATAWBA HOSPITAL
CATAWBA, VIRGINIA**

MINUTES

COMMITTEE NAME: Local Human Rights Committee

MEETING DATE: April 14, 2010 **MEETING TIME:** 3:00 PM

PLACE: Building 24 - Lobby

MEMBERS PRESENT: Carolyn Heldreth, Chairperson; Rena Ferguson, Vice Chairperson; JoAnn Patterson; Dianna Parrish; Valarie Robinson; Millie Rhodes; Will Childers; Letitia Malone

MEMBERS ABSENT: Bo Miller

OHR STAFF PRESENT: Nan Neese, Regional Advocate

CH STAFF PRESENT: Jack Wood, Director

LGH STAFF PRESENT: Leigh Frazier, Clinical Services Director, Lewis Gale Center for Behavioral Health

CHS STAFF PRESENT: Judie Snipes, Privacy Officer; Mala Thomas, Director of Behavioral Health

GUESTS: None

MEETING AGENDA – MAIN POINTS DISCUSSED:

1. Welcome and Introductions

- 2. Review of Minutes:** The minutes of the March 10, 2010 meeting were approved.

Review Date: No further review

- 3. Advocate's Report (Nan Neese):** Training was conducted on the Virginia Freedom of Information Act, including a PowerPoint presentation and handout. There was also a thorough review of the §37.2-400. Bill of Rights. Ms. Neese pointed out a new right had been added, bringing the number of rights included to eleven (11). The Committee was given the opportunity for questions and discussion.

Review Date: No further review

4. Catawba Hospital Reports (Jack Wood):

- a. Admissions and Discharges: – Admissions and discharges in both the geriatric and adult populations were lower than average in February and March. Proportionately, there were no patients readmitted within 30 days in February and only 2 adults in March.
- b. Restraint Usage: – Behavioral restraints rose slightly in February, but stabilized in March, with one patient continuing to dominate the usage. The staff remains diligent in finding alternative methods to deal with this patient's aggression and the frequency and duration of episodes requiring restraint has decreased. We continue to have a higher than average number of patients using protective restraints. This is due to a very fragile geriatric population with an extremely high falls risk. Time spent in enclosure beds has, however, decreased slightly. As always, least restrictive measures are pursued prior to using the enclosure beds and the level of treatment is reviewed weekly by physical therapy and the physician to see if the patient's falls risk has decreased.

- c. Complaints/Serious Injury/Deaths: – There were a total of 4 complaints handled through the informal process and all complaints have been resolved in a manner acceptable to the individuals involved. No formal complaints were filed during February and March.

Review Date: No further review

5. Lewis-Gale Center for Behavioral Health Reports (Leigh Frazier):

- a. Admission & Discharges: The census was low in February having only 153 admissions and 155 discharges; while resuming to a more standard rate in March with 216 admissions and 213 discharges. Readmissions within 15 days are reviewed at 100% and after 2 years, no real trends can be identified, other than the importance of having a family meeting.
- b. Restraint Usage: There were no restraints used during the month of February; however, there were 5 episodes in March with a total duration of approximately 7 hours. There has not been a seclusion event since August 2009.
- c. Complaints/Serious Injury/Deaths: There were 8 complaints addressed through the informal process. All were resolved to the satisfaction of the individual or family and no formal complaints were filed. There were 7 reported illnesses, 6 of which were treated in the Emergency Department and returned to Behavioral Health. One patient was admitted medically and then returned to Behavioral Health. There were no injuries and no deaths.

Review Date: No further review

6. Carilion Behavioral Health (Judie Snipes/Mala Thomas):

- a. Admission & Discharges: Admissions and discharges were stable for February and March, and the census was full. Readmissions within 15/30 days increased slightly in February and normalized in March.
- b. Restraint Usage: There were 3 episodes of behavioral restraints involving 3 adolescent patients in February. During the month of March, there were 3 restraint episodes involving 2 adolescents and 4 episodes involving 2 adult patients. While restraints were up slightly in number, the duration of each event has decreased significantly.
- c. Complaints/Serious Injury/Deaths: There were 4 complaints handled through the informal process, all but one were resolved to the satisfaction of the clients and/or their families during the reporting period. No complaints were filed through the formal process. There were no serious injuries reported or Restriction of Rights, 10 patients required medical treatment, and no deaths were reported during February and March.

Review Date: No further review

7. **Other Business:** Follow-up review to Catawba Case #2008-002:
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 records. 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.

8. **Next Meeting:** June 9, 2010.

Carolyn Heldreth, Chairperson