# CATAWBA HOSPITAL CATAWBA, VIRGINIA

#### **MINUTES**

COMMITTEE NAME: Local Human Rights Committee

MEETING DATE: October 13, 2010 MEETING TIME: 3:00 PM

**PLACE:** Building 24 - Lobby

**MEMBERS PRESENT:** Rena Ferguson, Chairperson; Dianna Parrish; JoAnn Patterson; Millie Rhodes; Letitia

Malone

MEMBERS ABSENT: Will Childers; Bo Miller

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

CH STAFF PRESENT: Walton Mitchell, MSW, Vice-President of Patient Care Services

**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 August 11, 2010 meeting were approved.

**Review Date**: No further review

**Advocate's Report (Nan Neese):** Providers were reminded about the importance of not only resolving complaints but also making determinations of whether or not violations of human rights had occurred. If an individual's rights were violated, a plan of corrective action must be included with the report. Nan gave the example that violations of confidentiality seem to be documented very clearly but providers are not documenting the specific findings relative to other complaint categories.

**Review Date:** No further review

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

- a. <u>Admission & Discharges:</u> Admissions and discharges were slightly higher for the month of August, but decreased again in September. Readmissions within 15/30 days remain slightly higher than average. A review is conducted each time a patient is readmitted within 15 days and the facility continues to make this a focus for improvement.
- b. Restraint Usage: There was 1 restraint event in August and 2 events in September.
- c. <u>Complaints/Serious Injury/Deaths:</u> There were 7 complaints handled through the informal process, all matters have been closed. Due to illness, 7 patients were sent to the Emergency Department; 5 patients were treated and returned to Behavioral Health and 2 were admitted medically. There were no serious patient injuries or deaths; however one patient did injure a staff member.
- d. Other Business: None.

**Review Date:** No further review

# 5. <u>Carilion Behavioral Health (Judie Snipes/Mala Thomas):</u>

- a. <u>Admission & Discharges:</u> Admissions and discharges on the adolescent unit increased slightly in September. Admissions and discharges on the adult unit had increased slightly, while dropping somewhat on the Intensive Treatment Unit. Readmissions continue to fluctuate, but were down for the month of September.
- b. <u>Restraint Usage:</u> There was one child/adolescent patient restraint episode in August and one in September. Three adult patients were responsible for 7 episodes in September. There were no adult restraints in August.
- c. <u>Complaints/Serious Injury/Deaths:</u> There were 10 complaints addressed through the informal process. All were all were closed without progressing further. Five patients were referred to the Emergency Department for treatment. There were no serious injuries and one death occurred within 21 days after discharge.
- d. Other Business: None.

## **Review Date:** No further review

## 6. <u>Catawba Hospital Reports (Walton Mitchell):</u>

- a. <u>Admissions and Discharges:</u> Admissions and discharges remained stable for August and September on both the adult and geriatric units. There were 5 adult readmissions in August and 2 in September, along with 1 geriatric readmission. A recent Performance Improvement Team has developed a pilot program to address the rate of rapid readmissions.
- b. <u>Restraint Usage</u>: Behavioral restraints increased this reporting period; however one patient accounted for the majority of the episodes. The length of time spent in protective restraints decreased in September. 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. <u>Complaints/Serious Injury/Deaths:</u> There were a total of 5 complaints handled through the informal process and all complaints have been resolved in a manner acceptable to the individuals involved. One complaint was carried through the formal process before being resolved.
- d. <u>Facility Update:</u> Preparation continues to begin accepting the geriatric admissions from Southwestern Virginia. Contact has been made with all the CSB's that will now be included in Catawba's catchments area and plans are being made to personally meet with each of them. This change will not affect the adult population or number patients currently being served at this facility.
- e. <u>Other Business:</u> A very minor change was made to the Unit Rules prompted by a patient's request for clarification. The Committee unanimously voted to approve this change.

<u>Other Business:</u> Dianna Parrish was nominated for consideration of Vice-Chairperson. The Committee voted unanimously to elect Ms. Parrish to this office.

		Review Date: No further review
7.	Next Meeting: December 8, 2010.	
		Rena Ferguson, Chairperson