Western State Hospital Staunton, Virginia

Local Human Rights Committee Meeting Minutes

Jeffrey's Building, Rom 95 at 12:30 May 23, 2011

Present: Kathy Belcher, Donna Gum, Hal Meyers, Mark Schorsch, Rob Wade, Ski Washington,

Committee Members; Chuck Collins, WSH/Regional Advocate; Mark Seymour, WSH

Advocate; Erin Haw, VOPA; Ellen Harrison Liaison to WSH Director

Absent: Mahlon Webb, Committee Member; Zachary DeVore, VOPA

Guests: J.S. (patient)

T.P. (patient) L.B. (patient) J.S. (patient) M.K. (patient)

Ms. Gum, Committee Chair, called the meeting of the Local Human Rights Committee to order on May 23, 2011. With a motion from Mr. Meyers and a second by Mr. Wade, the minutes from the April meeting were approved with changes. A quorum of members was present. The agenda was approved with changes on a motion from Ms. Belcher and seconded by Mr. Wade.

The committee opened the meeting to anyone wishing to express concerns during the public comment period. Patient T.P. was congratulated for his design of the winning t-shirt contest submission for the WSH 5K Race. Patient L.B. addressed the committee with concerns regarding an advocate not being present as requested during his treatment team meeting. Mr. Seymour assured L.B. that he would be present for the next treatment team meeting and asked that he be advised of the date that it would occur. L.B. also went on to remind Mr. Collins on an additional complaint that he has written a letter to the WSH Director about as well. L.B. did acknowledge receiving a response from the Director on that issue.

Mr. Collins reported that he will attend the State Human Rights Committee meeting in Petersburg on June 10^{,2011}. During this meeting Mr. Collins will present a memorandum stating that all 10 Local Human Rights Committees have adopted the Bylaws and Affiliation Agreements. Bylaws will be effective on July 1^{,2011}. Mr. Collins announced the Quarterly Advocates Meeting on May 25^{,2011} and welcomed any issues or ideas the Committee may wish to present. Mr. Collins discussed the external threat of violence incident that was precipitated on May 17, ²⁰¹¹. Informational updates by the Facility Director of WSH were communicated quickly throughout the day and procedures were followed with a safe outcome.

Ms. Haw reported that there will be some re-arrangement within VOPA. Elizabeth Nagji will serve as Erin's back-up at LHRC meetings.

Dr. Baggett presented MACS Ward Rules. Dr. Baggett stated that there were many changes with basic wording throughout the document including rephrasing to emphasize the recovery process. When asked if patients typically have the intellectual ability to understand concepts within the Ward Rules, Dr. Baggett explained several options to further enhance patient understanding which included the use of Authorized Representatives, interpreters for the deaf/hard of hearing and Recovery Coaches. Further revisions to the Ward Rules included changes to levels and timing of "free time" which will provide more consistency with actual practice. MACS Ward Rules were approved on a motion from Mr. Meyers and seconded by Mr. Wade.

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Dr. Mclain and Dr. Lindsay presented B1 Ward Rules. Dr. Mclain explained the removal of Level 7 from the Ward Rules due to it being confusing and possibly leading patients to think they must have a Level 7 in order to be discharged. Removal of this level was achieved by making adaptations to Level 6. A typo on page 9 will be corrected and the Infection Control section will be placed under "Safety" rather than "Fire Safety". Ward Rules are posted on the ward and are updated as changes occur. Additionally, if necessary, Ward Rules are discussed one on one or during Doctor's Group. There is also a simplified brochure available which outlines Ward Rules with bullets making it easier for new patients to understand and refer to as necessary. B1 Ward Rules were approved on a motion from Mr. Meyers and seconded by Ms. Belcher.

Guest speaker, Dr. Rawls, discussed the process that occurs when an individual is committed at Western State Hospital after being found Not Guilty by Reason of Insanity (NGRI) by a court of Virginia. Dr. Rawls explained that assessments and a documented analysis of behavior are completed at Central State Hospital via visits with an appointed psychologist and psychiatrist. These findings are reported during the patient's hearing at which time the judge can grant an unconditional release (rare occurrence), conditional release (25% occurrence), or commitment to a hospital (75% occurrence). Once committed to a hospital, NGRI patients attend biannual hearings. These hearings assess progress made; usually through the gradual release program which offer steps toward conditional release. While hospitalized NGRI patients may request increases in privilege levels. These increases are considered by the Internal Forensics Privileges Committee (IFPC) following review of behavior and future risk analysis. Dr. Rawls explained that NGRI patients should think in terms of specific risk factors that have been identified and then develop a plan to eliminate/manage these risks. Conditions of release vary greatly for each individual between the time of adjudication and release. Examples of requirements for conditional release typically include stable housing and preferably 30 hours of structured activity per week (e.g. gainful employment, volunteer work, clubhouse, etc.)

The Patient Complaints List, Barriers to Discharge List, and the IFPC minutes were all reviewed.

Upon a motion made by Mr. Meyers the committee went into closed session pursuant to Virginia Code $\S 2.2-3711$ (1) for the purpose of discussion of medical record/treatment plans.

Upon reconvening in open session, all members of the Local Human Rights Committee certified that to the best of each ones' knowledge, only public business matters lawfully exempt from statutory open meeting requirements, and only public business matters identified in the motion to convene the closed session were discussed in closed session.

Under Community Connections, Ms. Gum announced that the CSB Legislative Forum is scheduled for August, 28, 2011 at 6:00pm. Ms. Gum also announced that the Mental Health of America Golf Tournament had 14 participating teams. The Consumer Art Show is being held at the Staunton Public Library until the end of May; all art work on display was contributed by WSH patients.

As per Mr. Collin's request, Ms. Harrison discussed peer-to-peer aggression with the Committee. Ms. Harrison explained that regardless of the nature or severity of peer-to-peer aggression, the hospital is concerned with administering care to the injured party and determining the cause of the of the aggression. In addition, all Staff have historically demonstrated great—concern with patient safety first. It was also noted that any event that results in the need for medical treatment, which can include Bacitracin and bandaids, are reported to VOPA via PAIRS—for oversight and review.

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Agenda requests for future meetings include: Request that Reverend Sault be invited to attend the June 27th meeting.

The next meeting will be held June 27th at 12:30 p.m. With no further business to discuss and from a motion made by Mr. Meyers and seconded by Mr. Wade, the meeting was adjourned.

APPROVED:	
Donna Gum, Chair	Elizabeth T. Little, LHRC Secretary