

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
October 22, 2012

Present: Hal Meyers, Committee Chair, Donna Gum, Kathy Belcher, Mark Schorsch, Rob Wade, Mahlon Webb, Committee Members; Chuck Collins, WSH/Regional Advocate, Mark Seymour, WSH Advocate; Ellen Harrison Liaison to WSH Director

Absent: Heidi Campbell, Committee Member

Guests: Mr. RS, Client, and Tiffany Hewitt representing the Citizens' Council

Mr. Meyers, Committee Chair, called the meeting of the Local Human Rights Committee to order on October 22, 2012. Mr. Wade, Committee Secretary, noted that a quorum of members was present. With a motion from Ms. Gum and a second by Mr. Schorsch, the minutes from the September meeting were approved as written. Ms. Belcher made a motion to approve the agenda. Ms. Gum seconded the motion, and the agenda was approved by vote.

Ms. Gum shared that the MHA annual meeting will be November 16th at 6:00PM, at the Holiday Inn. Ms. Heidi Campbell will be receiving the Consumer Award. She asked that those wishing to attend make reservations through her.

Upon a motion made by Ms. Gum, the committee went into closed session pursuant to Virginia Code §2.2-3711, a.15 and §2.2-3705.5 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.

Public Comments: Ms. Hewitt indicated that clients continue to raise concerns regarding the disparity of microwave rules between wards. Ms. Belcher indicated that the committee revisited all ward rules related to microwave use. Mr. Collins followed by saying that the LHRC could only intervene on this matter if it was discovered that the rules were in violation of Human Rights Regulations. While the committee recognized variations in the rules and that Ward C5/6 maintains rules that are more restrictive than the other wards, they did not find any violation of Human Rights Regulations, and are, therefore, not able to intervene in this matter. He reiterated that some variation in ward rules is necessary due to the differences in physical environment and the clients residing on each ward. Mr. Collins referenced comments made by Dr. Barber during the tour of the new facility indicating that all ward rules will need to be modified next year when WSH moves, and there will be less variation because each of the wards has the same basic design; however, differences will continue to be necessary and will be determined by the client base on each unit. The committee will continue to review ward rules annually or as changes are made. Mr. Collins asked Ms. Hewitt to encourage clients to attend the LHRC meetings during which ward rules are reviewed and to participate in those discussions.

Ms. Hewitt also commented on the individual phone areas on each ward at the new facility. It is not clear at this time whether these phone "booths" will be fitted with doors to provide privacy for clients to make personal telephone calls. She suggested that phones for client use be placed in the visitors' rooms. Mr. Meyers asked Ms. Harrison to investigate this issue and report back to the committee.

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Mr. RS stated that he is curious about his rights regarding the medications he takes and the extent to which he participates in making decisions about medications. He indicated he had a serious head injury many years ago that he believes is the cause of his psychological symptoms. He, therefore, does not feel the psychiatric medications he is being given are the appropriate treatment for his condition. He feels his current dosage of medication is insufficient to treat any truly psychological illness which is further evidence that his condition is not psychological. He would like his treatment team to recognize that his illness is medical in nature and develop a treatment strategy based on that diagnosis. He does not feel his treatment team is receptive to his input regarding his condition and subsequent treatments. Mr. Meyers asked that Mr. Collins continue to work with Mr. RS and his treatment team on these issues.

In response to the tour of the new facility, Mr. Collins commented that he was surprised by how small the interior courtyard appears. Ms. Harrison noted that the courtyard is the size of a baseball field and that it may appear, and feel, more spacious when the landscaping is complete. Mr. Collins also noted that he was very impressed with the patient bedrooms; the size of the rooms, the privacy afforded by the inclusion of a half-bathroom in each patient room and the size of the window in each room. Ms. Belcher expressed how pleased she was with the feeling of spaciousness and light on the wards. Mr. Meyers spoke on how the facility is planned with the comfort and convenience of the patients over that of the staff. Mr. Webb commented that he feels the new "Webb Mall" is an improvement over the current environment in the Stribling Building. The classroom spaces are nicer and the central hallway concept provides for better flow and accessibility. He did express concern with the location of the greenhouse and the car wash operation in relation to the mall. However, he believes the facility as a whole will provide clients with the opportunity to feel less constrained. Mr. Schorsch noted a concern with the available outdoor space. He feels that even having private rooms does not provide the solitude afforded by having more additional space to spend time alone outdoors. He also expressed concerns about the ward rules and the distribution of patients of varying functional levels throughout the wards. However, he believes there will be an improved feeling of community, for clients and staff, that will be accomplished by having the entire hospital under one roof; thereby allowing greater opportunity to interact with people from other units. Mr. Meyers noted that the design of the secured courtyards will allow clients at a lower privilege level the opportunity to go outdoors.

There was discussion regarding how ward rules for the new facility will be approved. Mr. Meyers suggested that the LHRC review and provide provisional approval of the ward rules in 2013 with the understanding that they will change as staff and clients become familiar and comfortable with their surroundings. The ward rules would be reviewed on the standard schedule in 2013 and approved for one year. When the wards return to the LHRC in 2014, they will have had time to determine what changes need to be made to match the rules with the environment.

The next meeting will be held November 26, 2012, at 12:30 p.m.

With no further business to discuss, the meeting was adjourned.

APPROVED:

Hal Meyers, Chair

Glenda D. Sheffer, LHRC Secretary