

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
February 24, 2014

Present: Hal Meyers, Committee Chair, Kathy Belcher, Vice Chair, Heidi Campbell, Donna Gum, Rob Wade, Mahlon Webb, Committee Members; Chuck Collins, WSH/Regional Advocate; Mark Seymour, WSH Advocate; Gail Burford and Becky Shaw, Co-Liaisons to WSH Director

Absent: Mark Schorsch, member, Erin Haw, dLVC Advocate

Guests: Mr. Moriah Tolton, Intern from JMU, Mr. TH, patient

Mr. Meyers, Committee Chair, called the Local Human Rights Committee to order on February 24, 2014. The committee approved three sets of minutes, as follows: the November 21st meeting, motion by Ms. Gum, second by Ms. Belcher; the December 2nd meeting, motion by Mr. Webb, second by Ms. Campbell; January 27th meeting, motion by Ms. Campbell, second by Mr. Webb (with changes). Each set of minutes was approved by vote. Ms. Gum made a motion to have Ms. Sheffer indicate on the minutes whether the meeting is a called or special meeting. Ms. Belcher seconded the motion. By vote of the committee, the motion was passed.

The agenda was amended to reflect that Mr. Beghtol will not be presenting at this meeting. He will be scheduled for the March 24th meeting.

During the public comment, Mr. H reiterated his concerns regarding searches conducted by unit staff when he returns from on-grounds tours. Mr. Meyers indicated that the discussion regarding unit searches was on today's agenda to begin at 3:05. Dr. Jana, Team Leader for 1 Elm, and Brent Groff, Security Chief, will be present for that discussion. He indicated that Mr. H should return for that discussion if he is available at that time.

Mr. H also expressed concern regarding the Receipt System within the NGRI Program. He is not able to obtain receipts from vending machines, which are utilized when the Canteen is closed; therefore, he is unable to be reimbursed for that expenditure. Mr. Collins explained that NGRI patients are allowed to carry a specific amount of cash on their person at any given time. When that cash is used, at the Canteen for example, the patient returns the receipt to their unit staff to be reimbursed from his or her Patient Account. Mr. Meyers suggested that the committee research this situation further in expectation of resolving this problem for Mr. H, as well as other NGRI patients. Mr. Tolton indicated that he was a former patient at WSH, and that the Canteen hours and use of vending machines were a concern at that time as well. Mr. H indicated that 1 Elm is the only unit requiring receipts. Ms. Shaw indicated she would contact other units with NGRI patients to determine how receipts and reimbursements are handled.

The video phone on 1 Elm, for Mr. H to use, is not yet operational. There is a video phone available in the Deaf Mall that he has access to; however, he maintains his request for one on his unit. Ms. Shaw indicated that hospital and unit staff had concerns, first about the replacement of one of the two courtesy phones with the video phone. There was also a concern for the privacy of other patients on the unit due to the intended location of the video phone. The video phone allows a constant feed, and shows the caller a wide area of the dayroom, which violates others' right to privacy. Mr. Meyers commented that this appears to be a work in

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
February 24, 2014

progress, and the LHRC will continue to monitor the situation. Ms. Shaw will contact the telecommunications expert at the hospital, as well as unit staff, to establish the current status.

Ms. Sheffer guided the committee through a tour of the new facility. She noted prior to the tour that she wasn't planning to take the committee through any of the malls, as this would likely disrupt ongoing groups. The group stopped to view the Stribling Courtyard, then visited the Dogwood Patient Care Unit (PCU), where they were able to see a patient bedroom, the fenced courtyard with basketball hoop, and the dayrooms. As the other PCUs are nearly identical, the group did not visit the others. The next stop on the tour was the Admissions Suite. The group was told how the sally port is used for incoming patients' privacy. They also viewed the staging area where new patients are registered. The last of the tour was spent in The Commons. This includes various specialty areas such as the chapel, the gymnasium, the East Courtyard and the cafeteria / Canteen. The committee members asked many questions during the tour, and now have a better understanding of the functionality of the new WSH.

Upon a motion made by Ms. Gum, the committee entered a closed session pursuant to Virginia Code §2.2-3711, a.15 and §2.2-37.05.5 for the purpose of discussion of medical record / treatment plans.

Mr. Trent Humphries, Hospital Investigator, joined the committee in a discussion regarding how investigations of assault, abuse or neglect of patients are managed. Mr. Meyers advised Mr. Humphries that the committee is in a closed session.

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.

Ms. Gum shared with the committee the events in the community related to mental health. Ms. Gum, and MHAA were asked by Mary Baldwin College to co-sponsor their Reel to Reel movie series on March 25th. This presentation focuses on mental health, and the movie is "Silver Linings Playbook." The event will be held in the MBC auditorium at 7:00PM.

To update the committee on legislation related to mental health, Ms. Gum had hoped to have a current update to share with the committee; however, it was not available. In the latest update there are multiple bills regarding psychiatric care, specifically, Emergency Custody Orders (ECO) and Temporary Detention Orders (TDO), primarily due to the Deeds tragedy. Crossover day was February 12th. Ms. Gum will email the legislative update to Ms. Sheffer, who will forward it to the committee members.

MHAA will begin the membership campaign this month. MHAA is sponsoring a fund raiser to be held at Cici's Pizza in Staunton on Tuesday, April 8th from 5:00PM until 8:00PM. May is Mental Health Month. The theme this year is Speak Up, Speak Out for Mental Health. The art show will be opening on Friday, May 9th. Ms. Gum asked the members to share this information with others. ShenanArts will be performing the play "Next To Normal," and

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
February 24, 2014

MHAA will assist them with this project. Details have not been completely established at this time. The annual golf tournament will be held on June 6th.

Mr. Collins presented the Advocates' Report. WSH was recently visited by Mr. Jerry Thomas, with the Office of the Inspector General (OIG). Mr. Thomas is visiting multiple mental health facilities to conduct a survey regarding the Complaint Resolution Process. He met with the advocates, psychology, investigations and other individuals. He asked multiple questions including, what is the process, how well does it work, do the patients understand the process, and what is the role of the Local Human Rights Committee. Mr. Collins explained how patients are able to attend LHRC meetings as well as what role they play in the meetings. He explained the process for complaints from initiation to resolution, and the LHRCs role in that process.

Mr. Seymour commented on meeting with Mr. Thomas to discuss similar items at the Commonwealth Center for Children and Adolescents (CCCA). He specifically relayed information regarding a recent event at CCCA during which a young man who is very close to his 18th birthday eloped from the center by breaking through an exterior door in the gymnasium. The staff at CCCA often face the challenge of intermingling patients with such a wide range in physical age as well as intellectual age.

Mr. Collins reminded the committee of the State Human Rights Committee meeting being held at WSH on March 7th. All LHRC members are encouraged to attend.

Mr. Meyers directed members to the Unit Rule changes. He felt that all units participated very well and provided what was asked; however, 2 Elm appears to be an exception as they did not report any changes. He suggested that the committee ask the Treatment Team from 2 Elm to attend the next meeting to discuss unit rule changes and why they have apparently made no changes since moving to the new facility. Ms. Campbell made a motion to take the action suggested by Mr. Meyers. Ms. Belcher seconded the motion and the committee approved by vote. Ms. Shaw will contact the 2 Elm Treatment Team in order to ask them to attend the March 24th meeting.

Mr. Meyers expressed his appreciation toward Dr. McLain for the excellent presentation of information regarding the changes to the 2 Hickory unit rules. He asked Ms. Sheffer to send an email to Dr. McLain to thank her for providing such a well prepared document.

Chief of Security, Mr. Brent Groff, was welcomed to the meeting to discuss contraband at the new facility. Mr. Randall Hiner, a supervisor in the Security department attended as well. Mr. Groff indicated that patients are being checked for contraband more closely now than they were at the old facility. This applies to visitors as well. Contraband at WSH is described as cigarettes, lighters, matches, etc. Mr. Meyers related to Mr. Groff what Mr. H, who has reported his concerns about patient searches to the LHRC, had indicated about these searches. Mr. Groff is unfamiliar with rules relating to searches conducted by unit staff. Mr. Meyers asked if contraband was being found in the new facility. Mr. Groff and Mr. Hiner explained to the committee the process for searching patients who return from off-grounds. The sensitivity on the metal detector is set so that it will alert on large items such as knives, but will not alert on the small amount of metal found on a cigarette lighter or the foil on a cigarette pack. Mr. Hiner indicated patients and visitors frequently hide contraband in their crotch area. It is not possible

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
February 24, 2014

for staff, Security or unit staff, to search for these items because it would require an order from a doctor for a strip search. Mr. Meyers asked Mr. Groff and Mr. Hiner to explain how the patients avoid the multitude of video cameras to exchange contraband, and whether the majority of the patients who attempt to bring contraband into the hospital are NGRI patients. Mr. Groff indicated that the bathrooms are a common location for these exchanges. He does not feel that NGRI or forensic patients affect the occurrence of contraband. The restrooms in the Commons area are especially popular for these activities, therefore, Security staff frequently patrol this area. The hospital is responsible for enforcing the State law eliminating the use of cigarettes in a State facility; however, the greater concern is that possessing or selling contraband increases the possibility that it will be used to trade for sexual favors, putting the more vulnerable patients at risk.

Mr. H feels that patients with a Level 7 or above should be searched for contraband because these are the folks going off-grounds. He doesn't feel that Level 6 patients should submit to the same search criteria. He is concerned that 1 Elm is the only unit who performs these searches and doesn't feel that is fair to the patients of that unit.

Dr. Jana, Treatment Team leader for 1 Elm, was asked to comment on this issue. He indicated that Mr. H is correct that these searches do occur when patients return to the unit, whether from off-grounds or on-grounds. He feels that the search performed is minimally intrusive. He also indicated that Mr. H is correct in his understanding that this is not the practice on all units. However, he noted that 1 Elm has a significant number of NGRI patients. He compared 1 Elm to 2 Elm, which also has a large number of Forensic and NGRI patients. The patients on this unit have very few privileges due to their legal status including their access to other areas of the hospital. This limitation results in less need to conduct searches as those patients don't have as much opportunity to trade in contraband. The level of access to off-grounds passes is not restricted to Privilege Levels 6 and 7, patients with a lower level may be given permission for off-grounds trips, such as to Club House, in certain situations. In order to not single-out any one patient, and for the safety of the unit and hospital the Treatment Team feel that searching all patients is a reasonable step in accomplishing this goal.

Mr. Wade asked Mr. Groff about the police certification being lost, as Mr. Humphries stated earlier. Mr. Groff indicated that the Department of Criminal Justice Services (DCJS) has modified the requirements for police certification to include firearms certification. Security officers at WSH do not carry firearms due to the safety risk to patients. The Security staff have completed Special Conservator of the Peace certifications, which allows the department to have similar rights and responsibilities to regular police departments, and requires less training time. Ms. Belcher asked how this different certification affects the Security department's role in performing criminal investigations at the hospital. They continue to have the power of arrest, as well as the skills necessary to conduct an investigation; however, when an investigation indicates sexual assault, the Virginia State Police are contacted so they may take over the investigation. The instances of criminal investigations are minimal. Mr. Collins asked Mr. Groff how peer to peer assaults are handled, specifically when one of the patients chooses to file charges against the other. Mr. Groff indicated that there is a Hospital Instruction for this situation. In part, the Security department will obtain competency statements from the physicians of both individuals,

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
February 24, 2014

the statements will be forwarded to Dr. Barber, who will verify that the individuals are both competent to stand trial, he will approve the request, and Security staff will transport the victim to the Magistrate's Office to file the complaint. The Magistrate's Office will issue a warrant for the other patient, and Security staff will serve the warrant on the patient. The severity of the case will determine whether the individual will be arrested and taken to appear before the Magistrate or will be given a subpoena and a date to appear before the court. Mr. Hiner indicated that this situation may occur twice per year at most.

Mr. Meyers asked Mr. H whether he understood the requirements for searches on 1 Elm. Mr. H replied that he continued to believe removing shoes as part of the search is unnecessary and a waste time. Mr. Meyers reiterated that the presence of contraband needs to be minimized, and any steps necessary to accomplish that goal are justified. Mr. H indicated he continues to feel that the new hospital environment limits the opportunities for exchange of contraband, and therefore should not require the additional level of search requirements. Mr. Meyers advised Mr. H that he felt the Security department and Dr. Jana have presented sufficient information to support this action. Ms. Gum made a motion to approve the current practice for contraband searches, and Mr. Wade seconded the motion. The committee approved the motion by vote.

Mr. H asked about returning to the March meeting for follow up on vending machine receipts. Mr. Meyers indicated that the committee had obtained additional information in their tour earlier today and that the advocate will be contacting him to explain the solution to the problem.

Regarding the Internal Forensic Privilege Committee minutes and the Clinical Risk Management Committee minutes, no comments were given.

Upon a motion made by Ms. Gum, the committee went into closed session pursuant to Virginia Code §2.2-3711, a.15 and §2.2-37.05.5 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.

The next meeting will be held March 24, 2014, at 12:30 p.m. in Room 1085 of the Staff Development Offices.

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

APPROVED:

Hal Meyers, Chair

Glenda D. Sheffer, LHRC Secretary