

Western State Hospital
Staunton, Virginia
Local Human Rights Committee Meeting Minutes
Jeffrey's Building, Room 95 at 12:30
October 27, 2014

Present: Rob Wade, Committee Chair, Kathy Belcher, Karen Cochran, Mahlon Webb, committee members; Chuck Collins, WSH/Regional Advocate; Mark Seymour, WSH Advocate; Erin Haw, dLCV Advocate; Becky Shaw, Liaison to WSH Director

Absent: Heidi Campbell, Vice Chair, Mark Schorsch, Mary Stern, committee member

Guests: Mr. TH, patient on Unit 1 Pine, and Ms. SC, Mr. H's fiancée

Mr. Wade, Committee Chair, called the Local Human Rights Committee to order on October 27, 2014. Mr. Wade noted that a quorum of members was present. The minutes from the August 25th, September 15th, September 22nd, September 30th and October 21st meetings were reviewed and approved with a motion by Mr. Webb, a second by Ms. Belcher and a vote of the committee. The agenda was accepted.

Ms. Cochran commented that the increase of ID and DD patients at the hospital may present a new challenge in the form of providing skill-appropriate reading materials to those individuals. Treatment teams attempt to provide patients with reading material appropriate to their skills; however, some of these patients are sensitive to being given reading material at a different skill level than that provided to other patients. Ms. Belcher suggested that the Volunteer Services Department could be asked to be mindful of this need and encourage donations.

Upon a motion made by Ms. Belcher, 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.

The following doctors presented treatment plans for quarterly review: Dr. Tim Jana for Mr. DC, Dr. Jason Stout for Ms. CZ and Drs. Ann Walling and Lee Ann Bass for Ms. AM.

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.

Mr. TH, along with his fiancée, Ms. SC, and an interpreter joined the meeting. Mr. H asked the committee to assist him in securing additional usage of the video phone on 1 Pine. He is currently provided access once per day. He was previously allowed use of the video phone twice a day. He currently uses the TTY telephone six to seven times per day. Mr. H indicated Dr. Nichols and Dr. Stout will not listen to his complaints. He is also concerned that staff monitoring him during his use of the video phone is too intrusive.

Mr. H feels the TTY should be eliminated and he should be able to use the video phone exclusively. He indicated his next step is to contact VOPA (dLCV) for assistance because they know his rights and can provide additional assistance. Mr. H is also concerned that he was denied permission to participate in the NAMI 5K walk in Richmond. He was not given a reason

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for the denial. Ms. Shaw will speak with Dr. Rawls, with the IFPC, for additional information about Mr. H's request being denied.

Ms. Belcher suggested asking the treatment team to attend the next LHRC meeting for a discussion on Mr. H's access to the video phone. For the December 1st meeting, Dr. Nichols, Dr. Stout, and staff from the Deaf Mall will be invited to attend for a discussion on Mr. H's use of the video phones.

Mr. Jim Smith, Director of Physical Plant Services, was asked to present information regarding the current status of repairs and updates to the new hospital due to concerns brought to the committee recently by the Citizens' Council. Mr. Smith began by addressing the concerns about the safety of shower stalls. WSH continues to work with the contractor to determine the best solution to the shower pans that were installed incorrectly. An acceptable solution will be actively pursued until the situation is completely resolved. In the interim, temporary measures have been taken and appear to be functioning appropriately.

Mr. Smith also commented on door locks that were not installed correctly and that re-installation is currently underway.

The committee inquired about features of the new hospital that are an improvement over the old facility. Mr. Smith indicated that being in one building has allowed for the use of one fire alarm system and one vendor to maintain and monitor the system. He also noted that there are multiple large screen (50") and one extra large screen (70") televisions on each unit, which directly impacts the level of comfort and convenience for patients. Each patient has a private bedroom and half bathroom. Patients have the ability to lock their bedroom doors individually.

The committee inquired about the status of questions raised regarding fresh air or outdoor spaces. The hospital and its security system were not designed for patients to be allowed in the area in front of the hospital, and it is, therefore, not safe for them to do so. However, the East Grounds will be re-opened soon, allowing for additional fresh air space.

In the Advocates' Report, Mr. Collins noted that Mr. Seymour was not able to attend due to other obligations. He commented that patients need to feel they can trust their doctors and unit staff to uphold their rights. Patients are reminded of those rights and should be made aware of the Complaint Process and how to contact their Advocate. Generally, when the trust between patient and staff is broken, the advocates hear from the patient.

Mr. Collins advised the committee that the meeting on December 1st will be his last with the LHRC. Mr. Seymour will be assuming the role of LHRC Advisor at the January meeting.

Ms. Erin Haw, Advocate with the disAbility Law Center of Virginia (dLCV), was not present.

There were few comments regarding the complaint report. Complaint #419 prompted discussion about patients' access to personal radios, mp3 players and CD players. In the majority of cases, these are allowed and may even be provided by the hospital; however, individual treatment plans may address occasions when this access may be limited.

While reviewing the Extraordinary Barriers List, the committee questioned how the hospital handles discharges when the patient is going out of state. The hospital may provide staff

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to travel with the patient to their intended designation. They have also provided funding for family members to travel to Virginia to meet the patient at discharge.

The Internal Forensic Privilege Committee (IFPC) minutes and the Clinical Risk Management Committee (CRMC) minutes were reviewed. No comments were made.

MHA will sponsor a dinner on November 14th. Reservations must be made by November 5th. Deputy Commissioner Olivia Garland will be in attendance.

The next meeting will be held December 1st, 2014, at 12:30 p.m. in Room A1085 of the Staff Development Offices.

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

APPROVED:

Rob Wade
Chair

Glenda D. Sheffer
WSH Administrative Assistant to LHRC