#### CATAWBA HOSPITAL CATAWBA, VIRGINIA

#### MINUTES

#### COMMITTEE NAME: Local Human Rights Committee

MEETING DATE: December 20, 2006 MEETING TIME: 3:00 PM

PLACE: Building 24 Conference Room

**MEMBERS PRESENT:** <u>Reba Keen, Chairperson; Dr. Martin Ham, Vice Chairperson; Rena</u> <u>Ferguson; Louise Garman; Carolyn Heldreth; Courtney Hewitt; Valarie Robinson; Ken Rush;</u> <u>Millie Rhodes</u>

MEMBERS ABSENT: None

**STAFF PRESENT:** Jack L. Wood, Facility Director/CEO; Walton Mitchell, Vice President of Patient Care Services; Diane Jones, Chief Nurse Executive; Don Obenshain, Corporate Compliance Officer; Karen Calfee, Executive Secretary (Administrative Support)

OHR STAFF PRESENT: Sonia Smith, MSW

GUESTS: None

#### MEETING AGENDA – MAIN POINTS DISCUSSED:

1. <u>Review of Minutes:</u> The minutes from the last meeting of October 18, 2006 were approved as previously distributed.

#### Review Date: No further review

2. <u>Restraint and Protective Restraint</u>:: Ms. Jones provided the restraint data for October and November 2006. Behavioral restraint hours decreased this period compared to the last reporting period (August and September 2006). Of the five patients utilizing restraints, one patient accounted for three episodes, and one patient accounted for two episodes. Protective restraints also decreased this reporting period compared to the last. Ms. Jones reported treatment teams have been targeting protective restraint usage and recommending interventions to reduce use such as getting patients out of bed more for meals and sitting up. Ms. Keene requested Ms. Jones congratulate staff for their work on decreasing protective restraint hours.

#### Review Date: No further review

3. <u>HIPAA Model Accounting Variance Report</u>: Mr. Obenshain presented a letter to the Director of the Office of Human Rights requesting a renewal of the accounting variance for Catawba Hospital to the *Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers of Mental Health, Mental Retardation and Substance Abuse Services*. The Committee accepted the variance report as presented.

Review Date: No further review

**4.** <u>Informal Complaints:</u> Informal complaints for October to November 2006 totaled five (5); two (2) miscellaneous, one (1) for decision-making, and two (2) for treatment with dignity. All complaints were resolved within the five day period at the informal level.

### Review Date: No further review

5. <u>Director's Liaison Report:</u> Mr. Mitchell reviewed the admission and discharge data for October to November 2006. Adult and geriatric census data has remained stable this period with an equal number of admissions and discharges. Census continues to be consistently full, and the average length of stay remains even compared to the last reporting period. Approximately 35% of the Unit 2 population is located on the west end of the unit, keeping acutely ill patients in a calmer environment than with the general population. There was one (1) adult readmission within 30 days, well below the benchmark established in the community. At the request of a committee member, Mr. Wood explained how LIPOS (Local Inpatient Purchase of Service) effects patients in the community awaiting admission when the census is full.

## Review Date: No further review

6. <u>Director's Report:</u> Mr. Wood reviewed the services provided to patients during the holidays including Operation Santa Claus, activities with local church groups and a full Christmas dinner. Energy management construction projects continue on chillers and generators. Mr. Wood was recently re-elected President of the Virginia Mental Health Planning Council and continues as a member of the DMHMRSAS Systems Leadership Council.

In order to protect the privacy of individuals and their records, the Committee entered into closed session to review one allegation of abuse and/or neglect for the months of October and November 2006. Upon returning to open session, each member certified that only the one allegation was reviewed.

**Review of Restrictive Plan #1:** The patient involved in Restrictive Plan #1 attended the meeting to review his progress and provide an update on his behavioral plan for October to December 2006. The patient has now received his Green band and the interventions to assist him in managing this privilege level increase were reviewed. The Committee approved the plan's continuation for two months, with review again at the next meeting.

### Review Date: February 21, 2007

 Advocate's Report: Ms. Smith reported there were no formal complaints for the period of October to November 2006. Public comments on the Human Rights Regulations closed in November; new regulations are expected some time next year.

# Review Date: No further review

8. <u>Membership Report:</u> Full committee membership continues with no scheduled vacancies until June 2007.

Review Date: No further review

9. Other Business: None

There being no further business to discuss, the meeting was adjourned at 4:00 PM. The next meeting is scheduled for February 21, 2007 at 3:00 PM, in the Conference Room of Building 24, Catawba Hospital.

Reba Keene, Chairperson

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