CATAWBA HOSPITAL CATAWBA, VIRGINIA

MINUTES

COMMITTEE NAME:	Local Human Rights Committee
MEETING DATE:	<u>April 11, 2012</u> MEETING TIME: <u>3:00 PM</u>
PLACE:	Building 24 - Lobby
MEMBERS PRESENT:	Dianna Parrish, Chairperson; Will Childers; Millie Rhodes; JoAnn Patterson; Valarie Robinson; Bo Miller
MEMBERS ABSENT:	None
OHR STAFF PRESENT:	Nan Neese, Regional Advocate; Dwayne Lynch, Human Rights Advocate
CH STAFF PRESENT:	Walton Mitchell, III, Facility Director
LGH STAFF PRESENT: LGH STAFF ABSENT:	Mollie Guzo, Lewis Gale Center for Behavioral Health - Salem Mary Lavery-Fisher, Director Lewis Gale Center for Behavioral Health - Alleghany
CHS STAFF PRESENT:	Tommy Finch, Department of Psychiatry & Connect, Carilion Clinic
GUESTS:	Amy Wilhelm

MEETING AGENDA – MAIN POINTS DISCUSSED:

- 1. <u>Welcome and Introductions</u> The meeting was called to order.
- 2. <u>Review of Minutes</u>: The minutes of the January 11, 2012 meeting were approved.
- 3. <u>Advocate's Report (Nan Neese/Dwayne Lynch)</u>: Nan Neese introduced Dwayne Lynch as the new Human Rights Advocate for this area. Mr. Lynch will be covering Catawba Hospital and the Roanoke/Alleghany services areas. Nan expressed her appreciation to the members for their commitment and oversight.
 - a. Those in attendance were provided with a copy of the newsletter from the State Human Rights Committee, *Human Writes*. Committee members were also reminded to check the website for the Office of Human Rights for other useful information, including the Department of Justice settlement facilitating the closing of the training centers.
 - b. Mr. Lynch will be visiting the various licensed services. Please make sure you update your human rights posters and notices with his contact information.
 - c. At the meeting in January, the Committee voted to recommend decreasing membership to seven; however, they are retracting this request at this time. Membership will stay at nine. The reappointment application for Millie Rhodes was accepted and the Committee whole-heartedly supports her continued membership. An application has been received for an additional consumer member. The Committee will go into closed session to interview this applicant after hearing the facility reports.

Review Date: <u>No further review</u>

4. Alleghany Regional Geriatric Behavioral Health (Mary Lavery-Fisher):

- a. <u>Admissions and Discharges:</u> Since receiving their conditional license in September 2011, admissions have steadily increased, almost doubling from January to March from 16 to 30. Discharges remain consistent with admission. The average daily census is 10-11, with an average length of stay of 7.5 days.
- b. <u>Restraint Usage:</u> There were no seclusions or restraints to report for the quarter.

- c. <u>Complaints/Serious Injury/Deaths:</u> Two complaints were received during the quarter. Both were closed with no violations found. Five patients received treatment for illness; all were returned to Behavioral Health.
- d. Other Business: None.

Review Date: No further review

5. <u>Lewis-Gale Center for Behavioral Health Reports (Mollie Guzo):</u>

- a. <u>Admission & Discharges:</u> Admissions are up slightly on both the adult and adolescent units, and as such, readmissions increased as well. Ongoing efforts to decrease readmissions continue.
- b. <u>Restraint Usage:</u> The number of restraint events rose sharply in February but declined again in March. Time spent in restraints, however, did not showed a marked increase throughout the quarter.
- c. <u>Complaints/Serious Injury/Deaths:</u> There were 11 complaints during the quarter, all handled through the informal process, and have been closed with no violations found. Fifteen patients were sent to the Emergency Department due to illness during the quarter. Ten patients were treated and returned to Behavioral Health and 5 were admitted medically and then returned to Behavioral Health. There were no injuries or deaths during the quarter.
- d. <u>Other Business:</u> Peer-to-peer altercations were reviewed. There was no evidence of neglect by the facility in any of these instances.

Review Date: No further review

6. <u>Carilion Behavioral Health (Tommy Finch):</u>

- a. <u>Admission & Discharges:</u> Admissions on the adolescent unit increased, particularly in March. Admissions on both adult units were down slightly. Readmissions within 15 & 30 days increased somewhat during the quarter.
- b. <u>Restraint Usage:</u> Restraint usage continues to be slightly higher than average.
- c. <u>Complaints/Serious Injury/Deaths:</u> There were 12 complaints addressed through the informal process and one addressed formally during the quarter. These have all been resolved with no violations found. Fourteen patients were referred to the Emergency Department for treatment, 8 of whom were admitted medically, while the others were treated and returned to the Unit. There were 4 minor injuries and no serious injuries. One death occurred within 21 days of discharge.
- d. <u>Other Business:</u> Staffing was found to be appropriate during the peer-to-peer altercations reviewed and no advocate involvement was necessary.

Review Date: No further review

7. <u>Catawba Hospital Reports (Walton Mitchell, III):</u>

- a. <u>Admissions and Discharges:</u> Admissions and discharged increased during the quarter on both the adult and geriatric units. There were a total of 7 adult readmissions from January through March and only 1 geriatric readmission within 30 days.
- b. <u>Restraint Usage:</u> Behavioral restraints continued to decrease in January, but rose sharply in February. The number of incidents remained high in March, however time spent in restraints was dramatically lower. Protective restraints (excluding enclosure beds) remain slightly higher than average for the quarter. Seven patients required enclosure bed use in February, but by March only 3 patients remained in enclosed beds. As always, least restrictive measures are pursued prior to using the enclosure beds and the level of treatment is reviewed weekly by physical therapy and the physician to see if the patient's falls risk has decreased. Patients utilizing enclosure beds have continuous supportive observation.
- c. <u>Complaints:</u> There were 6 complaints handled through the informal process during the quarter, one of which was responded to formally. All complaints have been resolved in a manner acceptable to the individuals involved.
- d. <u>Other Business:</u> Catawba Hospital submitted Policy 1.56 (Restraint for Violent/Self-Destructive Behavior (Behavioral Restraint); Seclusion) to the Committee for review and comment. The members requested a copy of the previous policy for comparison.
- e. Closed session requested.

The motion was made and passed to go into Closed Session pursuant to Virginia Code §2.2-3711.A. (4) and (15), for the protection of privacy of individuals in personal matters not related to public business and to review medical records, namely to conduct a review of an investigation of an individual's abuse allegation and to interview an applicant for Committee Membership.

Upon reconvening in public session, the Local Human Rights Committee unanimously certified that 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 the Closed session.

The LHRC unanimously endorsed the Candidate for membership and directed Nan Neese to forward the application to the State Committee for its consideration for immediate reappointment.

8. <u>Next Meeting</u>: July 11, 2012

Dianna Parrish, Chairperson

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