# CATAWBA HOSPITAL CATAWBA, VIRGINIA

#### MINUTES

#### COMMITTEE NAME: Local Human Rights Committee

# MEETING DATE: October 17, 2007 MEETING TIME: 3:00 PM

PLACE: Building 24 Conference Room

**MEMBERS PRESENT:** <u>Reba Keen, Chairperson; Rena Ferguson; Carolyn Heldreth; Will</u> Childers; Valarie Robinson; Courtney Hewitt

MEMBERS ABSENT: Ken Rush; Bo Miller; Millie Rhodes

**STAFF PRESENT:** <u>Vicky Fisher, Ph.D., Acting Chief Nurse Executive; Walton Mitchell, Vice</u> <u>President of Patient Care Services; Don Obenshain, Corporate Compliance Officer; Valerie</u> <u>Epperley, Executive Secretary (Administrative Support)</u>

OTHER STAFF PRESENT: Sonia Smith, MSW

GUESTS: None

### MEETING AGENDA – MAIN POINTS DISCUSSED:

1. <u>Review of Minutes:</u> The minutes from the meeting of August 15, 2007 were approved as previously distributed.

### Review Date: No further review

2. <u>Informal Complaints:</u> For the months of August and September, there were three (3) informal complaints. All three complaints were on Unit 2. One (1) was for miscellaneous, and two (2) were for treatment with dignity. All complaints were resolved within the five day required timeframe.

### Review Date: No further review

3. <u>Director's Liaison Report:</u> For August our adult admissions were relatively lower than our average, which runs in the teens; but if you look under length of stay, some long-stay patients were discharged during the month of August. Our length of stay is calculated on patient discharged within that given month. So, if you look at September, we saw an increase in admissions and freed up some beds. We had 19 adult admissions. The median length of stay came back to what is more the normal range--in the mid-20's to 30. Admissions and discharges for both adults and geriatrics are relatively even, so we continue to be at capacity. We're working on developing a Census Management Team for geriatrics. We cover a broad area geographically (from Martinsville/NC line to Winchester/MD line) for geriatrics; therefore, it's difficult to set up a team to manage/prioritize the geriatric admissions. We met with all our geriatric CSB's about a month ago, and future meetings will probably need to be by teleconference or polycom as

face-to-face meetings would be impractical. This should be beneficial for geriatric management.

### Review Date: No further review

4. <u>Director's Report:</u> Mr. Mitchell gave the report in Mr. Wood's absence. Catawba Hospital became a non-smoking facility. Because of the extensive preparations (smoking cessation and stress management programs, conscious drumming, medication, and teams meeting with each patient to plan management strategies) made by staff, the start date of October 10 was uneventful.

The State recently announced there will be budget cuts, and DMHMRSAS was not exempt. What we are cutting are in non-clinical areas, but all areas are impacted. There will be no layoffs; holds are being put on open positions.

Catawba held a special event last month, Patient Fun Day, which was a day-long event including cook-out and activities. We have special events on a regular basis.

We're in the process of revamping our treatment program and going to a 12-week term. We surveyed patients to see what type of programs they desired and surveyed staff to ascertain matching skills.

# Review Date: No further review

5. <u>Restraint and Protective Restraint:</u> For protective restraint hours, excluding enclosure beds, a very nice trend developed going from a significant drop in November of last year and leveling off in September. Enclosure beds are a safety measure as they minimize falls. There was a spike in May for Behavioral Restraint Hours; this was a result of two things: a couple of patients with disruptive behavior and unit change transition. For Protective Restraint Hours (enclosure bed only) there were five (5) patients in September.

### Review Date: No further review

6. <u>Advocate's Report:</u> Ms. Smith distributed copies of the new Human Rights Regulations which went into effect September 19, 2007, handouts from the LHRC seminar in September, and the 2008 LHRC meeting calendar. The new regulations include recording peer-to-peer incidents of aggression, and this committee may want to monitor or receive information in the future on these incidents. She announced that there will be Human Rights Training for providers and employees at Catawba Hospital on October 19, 2007 from 8:30 am until 4:15 pm in Building 17. There were no formal complaints for the last two-month period. She will review the membership list for term renewals.

### Review Date: No further review

7. <u>Membership Report:</u> Ms. Smith announced the committee is at full membership.

### Review Date: No further review

There being no further business to discuss, the meeting was adjourned at 4:00 PM. The next meeting is scheduled for December 19, 2007, at 3:00 PM, in the Conference Room of Building 24, Catawba Hospital.

Mr. Mitchell offered members a tour of the facility after the close of the meeting.

Reba Keene, Chairperson

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