

Eastern Virginia Local Human Rights Committee
Draft Meeting Minutes
May 8, 2008

A meeting of the Eastern Virginia Local Human Rights Committee was held on Thursday, May 8, 2008, at 9:00 a.m., at Holiday House of Portsmouth, Inc., 4211 County Street, Portsmouth, Virginia 23707.

Members Present:

Kimberly Benton, Chair
Jeffrey Kail, Co-Chair
Marcia Kennedy
George Amory

Members Absent:

Matthew Albright

Providers Present:

Jacqueline Mazyck, Holiday House of Portsmouth, Inc.
Melanie Perez-Lopez, St. Mary's Home for Disabled Children
Carol Taaffe, Director, Maryview Behavioral Medicine Center

Providers Absent:

None

Also Present Were:

Willie Barnes, Advocate, Office of Human Rights
Ronnie Ratliff, CAO, Holiday House of Portsmouth, Inc.
Melanie Joyner, Holiday House of Portsmouth, Inc.
Anita Morris, Holiday House of Portsmouth, Inc.
Ann Sparkman, St. Mary's Home for Disabled Children
Theresa Waldo, St. Mary's Home for Disabled Children

I. Call to Order:

Ms. Kimberly Benton, Chair, called the meeting to order at 9:00 a.m., Eastern Daylight Time and Janice Burrus recorded the minutes. A quorum of members was present, and the meeting, having been duly convened, was ready to proceed.

II. Applicant Interview

Mr. Jeff Kail moved that the EVLHRC go into executive session pursuant to VA Code 2.2-3711(A) 4 for the protection of the privacy of individuals in personal matters not related to public business, namely for the purpose of conducting interview, pursuant to

the regulations. Recommendation: Denise Gordon be appointed to Eastern Virginia Local Human Rights Committee. Vote: Unanimous.

III. Approval of Meeting Agenda:

Motion was made by Ms. Kennedy to approve the agenda as written. Motion was seconded by Mr. Kail. All members present voted in favor of the motion.

IV. Approval of Minutes:

Motion was made by Mr. Amory to approve the minutes as written. Motion was seconded by Mr. Kail. All members present voted in favor of the motion.

V. Election of Officers

Motion was made by Ms. Kennedy to elect Mr. Kail as Chairman. Motion was seconded by Mr. Amory. All members present voted in favor of the motion.

Motion was made by Mr. Kail to elect Mr. Amory as Co-Chair. Motion was seconded by Ms. Benton. All members present voted in favor of the motion.

VI. UPDATES FROM:

Maryview Behavioral Medicine Center

Report was given and copies of report were submitted for February 2008 – April 2008, for Acute Care Services, Clinical Trials and Turning Point Program. Carol Taaffe made a notation of a correction on the Child/Adolescent Seclusion/Restraint reporting. Change is noted and corrected on the report for the record.

St. Mary's Home for Disabled Children

Report was given and copies of report were submitted for February 2008 – April 2008.

Holiday House of Portsmouth, Inc.

Report was given and copies of report were submitted for February 2008 – April 2008.

VII. Old Business:

Mr. Ronnie Ratliff, Chief Administrative Officer of Holiday House, Inc., resubmitted to the committee the policy and procedures regarding the use of video cameras for monitoring in their facility. It was noted that the internet reference has been completely removed from all camera equipment used in the facility for video surveillance and digital recording. After having been reviewed and approved by the Regional Advocate's Office, this information is now shared with the EVLHRC.

VIII. New Business/Program Updates:

Maryview Behavioral Medicine Center

Carol Taaffe, Director, reported an unannounced visit by the Department of Health, Office of Licensure and Recertification, had identified items during inspection and that the items were noted and had been corrected.

St. Mary's Home for Disabled Children

St. Mary's reported a routine annual visit from the Department of Health, Office of Licensure and Recertification with a plan of correction being put in place in accordance with the items addressed.

St. Mary's Behavioral Support Manual is being reviewed by the Regional Advocate's Office. After completion, a letter will be sent indicating review completed by their office and ready for presentation to our EVLHRC.

Holiday House of Portsmouth, Inc.

Mr. Ratliff reported Holiday House, Inc., received an unannounced visit from the Department of Health, Office of Licensure and Recertification, regarding a complaint. A plan of correction was established, approved and has been put into place regarding the inspection findings.

Advocate's Report:

Ms. Willie Barnes stated Human Rights policies are still in the process of review by the Human Rights Committee. Ms. Barnes reminded affiliates that all Human Rights policies are to be forwarded, not just the ones which have been revised.

IX. Open Forum:

Carol Taaffe, on behalf of the EVLHRC, presented a certificate of recognition to Kimberly Benton, Chair, whose tenure on the committee has come to an end. The committee acknowledged her years of service giving generously of her time, talents and energy.

X. Closed Session for Human Rights Complaints, Abuse, Discrimination, Formal/Informal Complaints:

Mr. Kail moved the EVLHRC go into executive session pursuant to the Virginia Code Section 2.2-3711 A (4) for the purpose of reviewing behavior programming and client specific data and/or complaints, investigations for St. Mary's Home for Disabled Children, Maryview Behavioral Medicine Center and Holiday House of Portsmouth, Inc.:

see attached reports. Motion was seconded by Mr. Amory. All members present voted in favor of the motion.

Upon reconvening in open session, each member of EVLHRC certified that, to the best of each LHRC Member's knowledge, only public business matters lawfully exempted from statutory open meeting requirements, and only public business matters identified in the motion to convene the executive session were discussed in the executive session. See attached record of Executive Session.

XI. Adjournment:

The regular session was adjourned at 10:55 a.m.

XII. Next Meeting:

The next meeting of the Eastern Virginia Local Human Rights Committee will be held on Thursday, August 14, 2008, at Holiday House of Portsmouth, Inc., 4211 County Street, Portsmouth, Virginia 23707. Holiday House will provide refreshments.

HOLIDAY HOUSE OF PORTSMOUTH, INC.
EVLHRC REPORT

I. Period Covered:	February 1, 2008-April 30,2008
II. Admissions:	(0)
III. Discharges	(0)
IV. Deaths	(0)
V. Current Census	27 Residents (Not Capacity: 28)
VI. Medication Supports:	17 Residents
VII. Supportive Devices	13 Residents

<u>Types of Supports</u>	<u>Number of Residents</u>
Posey Belt	0
Posey Vest	0
Helmet	1
Knee Pads	2
Elbow Splint	0
Soft Hand Mittens	1
Benick Gloves	3
Gait Belt	3
Bed Side Rails	3
AFO's	5
Stander	2
Gait Trainer	3
Lap Belt	6
Thoracic Belt	2
Knee Immobilizers	1
Abductor Wedge	2
Protective Eyewear	0
Chest Harness	4
Footrest W/Straps	3
Bathing Chair	4
Feeding Chair	2
Oversized Strollers	4
Ear Guard	1

VII. Emergency Medication for Behaviors	(1)
VIII. Formal/Informal Complaints	(0) Informal (0) Formal
IX. Human Rights Violation	(0)
X. Serious Injuries	(0) February (1) March (1) April
XI. Peer on Peer Injuries	(0)February (0) March (0) April
XII. Allegation of Abuse & Neglect	(0)February (0) March (1) April

All of the above serious injuries, peer on peer injuries, and allegations of abuse will be discussed in Executive Session.

Reports Submitted by:

Melanie Joyner, BSW, QMRP
Social Worker

Date: May 7, 2008

EVLHRC
Executive Session

HOLIDAY HOUSE OF PORTSMOUTH, INC.

May 8, 2008

1. The Program Director discussed with the Human Rights Committee members 20 residents' behavioral data and psychotropic medications. The Human Rights Committee members approved all 20 residents' behavioral plans. The following was recommended: Resident (A) – Environmental Change: It was recommended that the facility contact the company that service our partitions in the recreation room to request modifications to lower the partition to the floor as a safety precaution for the residents. Resident (B) – It was recommended that the staff continue to monitor and document all behaviors due to changes in medications and provide an update at the next LHRC meeting.
2. Social Worker reported on 2 serious injuries (1 in March and 1 in April).
3. Chief Administrative Officer reported on 1 allegation of abuse and neglect incident, which was re-investigated in April.

Submitted by: J. Mazyck
Program Director/QMRP
EVLHRC Representative

Maryview Behavioral Medicine Services
Human Rights Report February – April 2008

Month	ADC	Admissions	Discharges
Feb	44.8	202	192
Mar	42.7	188	194
Apr	42.7	190	181

Complaints

Feb -	<u>0</u>
Mar -	<u>1</u>
Apr -	<u>0</u>

Restrictions

Feb -	<u>0</u>
Mar -	<u>0</u>
Apr -	<u>0</u>

Investigations

Feb -	<u>0</u>
Mar -	<u>0</u>
Apr -	<u>1</u>

Administrative Discharges

Feb -	<u>0</u>
Mar -	<u>0</u>
Apr -	<u>0</u>

Serious Injury/Death

Feb -	<u>0</u>
Mar -	<u>0</u>
Apr -	<u>0</u>

Seclusion/Restraint Report February – April 2008

ADULT

Month	Seclusion	Physical Restraint	Mechanical Restraint	Met Criteria
Feb	1 (.6)	0	1 (1.1)	100%
Mar	1 (.16)	0	1 (2.25)	100%
Apr	1 (1.75)	0	8 (1.15)	100%

CHILD/ADOLESCENT

Month	Seclusion	Physical Restraint	Mechanical Restraint	Met Criteria
Feb	0	0	3 (.7)	100%
Mar	0	0	7 (1)	100%
Apr	1 (1)	0	10 (1.7)	100%

May 5, 2008

TURNING POINT PROGRAM

Turning Point Intensive Outpatient Program reports the following information for the period of February 1, 2008 to April 30, 2008.

Evening Program

Admissions:	45
Discharges:	31
Still in IOP:	14
Successful Completions:	23
Unsuccessful:	6
Other (3 Sessions or less)	3
Current Census:	14
Emergency Medications:	0
Complaints of Violation of Human Rights:	0

Aftercare

Current Census:	14
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The Turning Point Program continues to have a sliding census because of continued admissions and discharges. The Aftercare Program remains consistent.

Submitted by,
Donna Jones-Elliott
Counselor II
Outpatient Chemical Dependency Services

05/02/2008

Clinical Trials Report
Maryview Site/CBH Health

**PSY-3007- Adult Schizophrenia , Double-Blind Placebo Controlled
Injectable Study with Paliperidone_ **STUDY CLOSED****

18 Screened
5 Screen Failed
13 Randomized
8 Early Termined
4 Completed

**PSZ-3001- Adolescent Schizophrenia , Paliperidone 6-week Double-Blind
placebo controlled study with 24-month open-label follow-up study (PSZ-
3002)**

1 screened
0 screen failed
1 Randomized
1 Early Termined
0 Completed

**Wyeth SCA-136- Adult Schizophrenia, A Randomized, Double-Blind
Placebo-controlled, Risperidone-Referenced, Parallel-group, Adaptive-
Design study of the Efficacy, Safety, and Tolerability of Vabicaserin (SCA-
136) in Adults with acute exacerbations of Schizophrenia.**

11 Screened
2 Screen Failed
8 Randomized
5 Early Termined
3 Completed

EVLHRC
Executive Session

Maryview Behavioral Medicine Center

May 8, 2008

The following is a summary of the executive session for May 8, 2008.

One complaint and one investigation were presented with no recommendations or follow-up required.

Submitted by: Carol Taaffe
EVLHRC Representative

EVLHRC Meeting
Date of Meeting: May 8, 2008

St. Mary's Home for Disabled Children Report

Eastern Virginia Local Human Rights Committee:

The following is information for the May, 2008 Local Human Rights Committee meeting. St. Mary's Home for Disabled Children reports the following for the period February 1, 2008 to April 30, 2008:

Admissions

February	March	April
1	1	2

Discharges

February	March	April
0	0	1

Current Census: 89

Restraints: 5

Use of psychotropic medications: 4

Use of Emergency Medical Restraint: 0

Serious Incidents: 2

Deaths: 1 (February)

Informal / Formal complaints: 0

Seclusion/ Time out: St. Mary's does not use either.

Current programming is appropriate.

Submitted by,

Melanie Perez-Lopez,
Dir. of Social Work

EVLHRC
Executive Session

St. Mary's Home for Disabled Children

May 8, 2008

The following is a summary of the Executive Session for May 8, 2008 for St. Mary's Home for Disabled Children. Pursuant to Virginia Code 1.1-3711A for purpose of reviewing behavior plans for 8 residents, the following was discussed in closed session.

Behavior plans for use of psychotropic medications were reviewed on 4 clients and approved. Additionally, 5 residents were reviewed for use of restraints. One resident's plan was discontinued and we will review in 3 months. All plans will be reviewed in 3 months at the next regularly scheduled meeting.

One death and two serious incidents were also discussed without recommendations. Also discussed was a resident previously on a behavior plan for use of restraint who no longer requires one.

Motion made to accept the information given during closed Executive Session and go into open session.

Melanie Perez-Lopez
St. Mary's Home for Disabled Children

EVLHRC Minutes
Emergency meeting
June 11, 2008

EVLHRC
Special Session Meeting
June 11, 2008

A special session meeting was held at Holiday House of Portsmouth, Inc., on June 11, 2008, for the purpose of reviewing behavior programming and resident specific data for Holiday House of Portsmouth and for St. Mary's Home for Disabled Children.

Members in attendance:

Jeff Kail, Vice Chairperson
Chairperson
George Amory, Member
Marcia Kennedy, Member

Members absent:

Kimberly Benton,
Matthew Albright, Member

Others in Attendance:

Willie Barnes, Representative from the Office of Human Rights
Jacqueline Parker-Mazyck, Program Director, Holiday House of Portsmouth
Melani Joyner, Social Worker, Holiday House of Portsmouth
Wendy English-Barnes, Occupational Therapist Rehabilitation Assistant
"P" Parent (Conference Call)
Terry Waldo, School Psychologist, St. Mary's Home for Disabled Children

The EVLHRC Emergency meeting was called to order by Jeff Kail, Vice Chairperson, at 10:15 a.m. Holiday House requested that a parent (P's mother), participate in the meeting via telephone conference. A motion was made by Marcia Kennedy and seconded by George Amory to convene in closed session pursuant to VA Code 2.2-3711 (A) for the purpose of reviewing behavior plans and resident specific data for Holiday House of Portsmouth and St. Mary's Home for Disabled Children, pursuant to the regulations.

Holiday House of Portsmouth, Inc., Holiday House presented a revised Behavior Support Plan for resident "P", section number 7 to include procedures for the use of a soft-shell protective helmet (Playmaker Headgear). The plan was approved with the following changes: to allow resident "P" to wear the helmet for the maximum amount of time (6 to 8 hours) due to self-injurious behaviors/sensory deficits then decrease the amount of time as he progresses (SIB decreases). The EVLHRC recommended that the OT department at Holiday House incorporate a sensory diet to allow for helmet (headgear) application into daily routine in addition to restrictive plan. The Behavioral Support plan was revised and submitted to the Behavioral Management Committee on June 12, 2008. This committee did not agree with the way the revise plan was written due to the ICF/MR regulations. The soft-shell protective helmet is considered a restrictive device evening though it does not restrict his movement. The Behavioral Management Committee recommended the following: that staff should remove the

helmet after 15 minutes of calm and application should not exceed 60 minutes in a single episode. The Behavioral Support Plan was revised for the third time with the changes from the Behavior Management Committee (BMC). A copy of this plan was forwarded to the parent for consent, to EVLHRC members and BMC members. Updates regarding "P" behavioral support plan will be reviewed at the next LHRC meeting. See attached revised behavioral support plan.

Holiday House of Portsmouth's executive session ended at 10:45a.m.

St. Mary's Home for Disabled Children discussed GM and his restrictive behavior plan for using a lock on the subbasis bar of a manual wheelchair while his power wheelchair is being repaired. This lock is used whenever he is in the manual wheelchair. The behavior plan was approved.

St. Mary's presented another restrictive behavior plan for KP which was not approved. The committee recommended continued use of his current restrictive behavior plan and in addition, requested that St. Mary's develop a schedule of restraint usage across his day to provide proprioceptive input that is not contingent upon agitation. Restraints will still be used for periods of agitation.

A motion was made by Marcia Kennedy and seconded by George Amory to reconvene in open session. Upon reconvening in open session, each member of EVLHRC certified that, to the best of each member's knowledge, only public business matters identified in the motion to convene the executive session were discussed in the executive session.

The emergency Executive Session meeting was adjourned at 11:15 a.m.

Melanie Perez-Lopez
Social Worker
St. Mary's Home for Disabled Children

Jacqueline Parker-Mazyck
Program Director
Holiday House of Portsmouth, Inc.

BEHAVIORAL SUPPORT PLAN

Name: "P"
Date updated: June 16, 2008

Targeted Behaviors:

Self Injurious Behavior (hitting/slapping self about the face or head, scratching self with sufficient force to leave marks/abrasions, biting self)

Disruptive Behavior (running from immediate area of supervision, pushing and hitting others)

RATIONALE:

"P" is diagnosed with autistic disorder with severe intellectual disability. He is nonverbal with no functional mode of communication. "P" has a history of self-injurious behavior (SIB) and disruptive behavior, which involves hitting, slapping himself about the face or head, scratching himself on his arms and legs causing marks or abrasions, and biting himself on the arm. In addition, he occasionally runs away from the immediate area of supervision and might push others in his way. Most often his SIB involves hitting/slapping himself. A functional assessment indicated "P's" challenging behavior serves multiple functions, including escaping or avoiding task demands, communication of protest when he cannot have a desired item or toy, communication or distress associated with discomfort (e.g. clothing is soiled, too hot, itching, etc.), and communication of stress associated with being in crowded or noisy and disruptive environments. He has a history of dry skin and this may result in some itching, which can be minimized with the use of moisturizing lotion. "P" can usually be calmed by determining the communicative function of his challenging behavior and resolving the specific problem and/or redirecting him to engage in an alternative activity in a quiet area. "P" has a history of hyperactive behavior and receives psychoactive medication to aid in managing his behavior.

This program attempts to minimize physical discomfort, frustration, exposure to crowded, noisy or disruptive situations or environments, and redirecting his SIB and disruptive behavior when they occur. Specifically, staff will follow a structured routine of activities, redirect "P's" challenging behavior to an appropriate activity or task, and use calming strategies.

PROCEDURES:

1. Staff of Holiday House of Portsmouth will attempt to keep "P" engaged in appropriate activities throughout the day by following a structured routine. Staff will reward his participation with verbal praise when he is participating.
2. Staff will try to minimize "P's" exposure to crowded, noisy, or disruptive environments or situations. Should the immediate area become noisy and

Behavioral Support Plan for “P”

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disruptive, staff will move “P” to an area away from the source of the noise and disruptions.

3. Staff will apply moisturizing lotion to his arms and legs following his daily bath.
4. Staff will encourage “P” to express his wants/desires through vocalizations, gestures, eye gaze, pointing, or other alternative forms of communications as replacement behaviors during the daily routine. When communicative responses occur, staff should accommodate his request unless it is completely unreasonable.
5. If “P” displays signs of frustration/agitation or over stimulation (e.g. vocalizing, whining, etc.), staff will establish eye contact with him and say, “P” what do you want?” Staff will attempt to determine what Alex’s specific desire or problem is, and resolve the problem (e.g. crowded or noisy situation, soiled clothing, environment is too hot, etc.) or accommodate his request unless it is not practical or reasonable at the time.
6. If “P” continues to show signs of frustration/agitation, over stimulation, or begins to engage in SIB or displays disruptive behavior, staff will assist him in calming down in one of the following ways: Escort him to a quiet area and prompt his engagement with a task or toy; Escort him to the “sensory room” where he can listen to soft music, have access to a weighted blanket, staff can implement his therapeutic brushing technique or allow him to bounce on the therapeutic ball; Give him a therapeutic bath in Jacuzzi tub or give him a shower or bath in the Cottage.
7. If attempts to interrupt and redirect his SIB are unsuccessful after 60 seconds, staff will apply his **soft-shell helmet (Playmaker Headgear)**. The helmet will be removed once “P” has been calm for 15 minutes (i.e. no hitting/slapping self). No single occurrence of use of the helmet will exceed 60 minutes in a single episode. Staff will continue efforts to redirect his behavior and socially reward his engagement in activities. Staff may take him outside, take him for a short walk or van ride. Staff will document any use of the helmet in accordance with the policies and procedures of Holiday House of Portsmouth, Inc. This documentation will include the date and time the helmet is applied, the time it is removed and the staff person name that applied the helmet. Staff will document on a Behavior Narrative Data Form and also a statement must be written in “P’s” ID notes regarding the behaviors exhibited. Staff will visually monitor “P” continuously while the helmet is being used.

Behavioral Support Plan for “P”

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8. If “P” shows any signs of pain or discomfort (e.g. repeatedly scratching his arms or legs) or displays SIB when the immediate cause (e.g. noisy environment, crowded situation, toys not available, etc) is unknown, staff will refer him to nursing staff to be checked for possible medical or physical problems, as well as making efforts to redirect and calm him.
9. In general, staff should not verbally reprimand “P” for challenging behaviors and should not discuss his challenging behavior in his presence.
10. Staff will document episodes of challenging behaviors on the narrative behavior data form and in “P’s” ID notes as they occur.
11. Psychoactive medications will be administered as prescribed by the physician or psychiatrist in conjunction with this behavioral treatment program.
12. Staff will monitor for medication side effects and report any observed or suspected adverse side effects to the nursing staff.

Update by: _____
Jacqueline Parker-Mazyck, QMRP
Program Director

Reviewed by: _____
Ronnie Ratliff, QMRP
Chief Administrative Officer

Eastern Virginia Local Human Rights Committee
Emergency Meeting
St. Mary's Home for Disabled Children
July 7, 2008

An emergency executive session was held on this date at 10:05 a.m., at St. Mary's Home for Disabled Children, to review two behavior plans for resident # 1 for use of naltrexone and resident #2 for a plexiglass area, pursuant to Virginia Code 2.2 3711 (A) 4 for the protection of the privacy of individuals in personal matters not related to public business, namely for the purpose of hearing of behavior modifications pursuant to the regulations.

In attendance were: Willie Barnes, LHRC Human Rights Representative; EVLHRC committee members: Marcia Kennedy, Jeff Kail and George Amory. In addition were St. Mary's staff members: Sheri Mantoni and Robin Geluso, QMRP; Ann Sparkman, HIM; Melanie Perez-Lopez and Social Worker; Tara Dean, Primary Nurse.

Jeff Kail, Chairperson, called the meeting to order. Marcia Kennedy, member, moved to go into Executive Session and this motion was seconded by George Amory, Vice-Chairperson.

First plan reviewed was for resident #1. Jeff Kail asked the class of drug and Ms. Dean got the PDR and gave the information regarding this. The plan was approved and will be reviewed at the next regularly scheduled meeting in August, 2008.

Second plan was reviewed for resident #2 and the plan was approved with these changes:

- a sensor will be added to the door and door will have a non-locking latch;
- weather stripping may be added under the door;
- extra supports may be required on 8 foot wall;
- staff checks on the resident will be specified in the plan (minimum of every 2 hours).

The plan was approved with these changes and will be reviewed at the next regularly scheduled meeting in August, 2008.

The committee then certified that, to the best of each members' knowledge, only private business matters lawfully exempted from statutory open meeting requirements and only private business matters identified in the motion to convene the executive session were discussed in executive session. This motion was made at 10:47 by Kennedy and seconded by Amory after coming out of closed session. A motion was then made to approve both plans, one with changes. Meeting was adjourned at 10:50 a.m.

A motion was made by Marcia Kennedy at 10:47 a.m., and seconded by George Amory to reconvene in open session. Upon reconvening in open session, each member of EVLHRC certified that, to the best of each member's knowledge, only public business matters identified in the motion to convene the executive session were discussed in the executive session.

The emergency Executive Session meeting was adjourned at 11:00 a.m.

Melanie Perez-Lopez
Director of Social Work
St. Mary's Home for Disabled Children

**EVLHRC COMMITTEE MEETING DATES
2008**

Thursday, February 7, 2008

Maryview Behavioral Medicine Center
3636 High Street
Portsmouth, VA 23707

Thursday, May 8, 2008

Holiday House of Portsmouth
4211 County Street
Portsmouth, VA 23707

Thursday, August 14, 2008

Holiday House of Portsmouth
4211 County Street
Portsmouth, VA 23707

Thursday, November 13, 2008

St. Mary's Home for Disabled Children
6171 Kempsville Circle
Norfolk, Virginia 23502