

Thursday June 16, 2016	Arizona State Hospital
6:00-9:00PM Meeting	2500 E. Van Buren St.
AzSH Auditorium	Phoenix, AZ 85008
Members Present: Laurie Goldstein	; Joe Contreras; Ashley Oddo; Joe O'Cain; Joe Contreras; Jill Manahan; Susan Ashcroft; Kim
Scherek (via phone); Ross Davids (vi	a phone); Mary Lou Brncik (via phone); Jim Gillcoatt (via phone)
Other Attendees: Dr. Aaron Bowen;	Paul Galdys; Liz Kosloff; Jacqueline Bachelier; Todd Reynolds; Debra Tayler; Connie Belden;
Dr. Steven Dingle; Levada Coker; La	ura Burstein (via phone); Rodney W. (via phone); David M. (via phone); Amado Salas (via
phone); Gavin (via phone); Tyler (via	phone); John Paul (via phone)
Members Absent: Michael White	
Next Meeting:	
Approved:	
Sharon Ashcroft, Chairman	



Item	Discussion	Follow-Up/Action	Person(s) Responsible for Follow Up	Target Completion Date	Complete Yes/No
Introductions	N/A	N/A	N/A	N/A	N/A
Review of May, 2016 meeting minutes	Laurie motioned for approval noting one typo on page 7; Ashley seconds; all approve.	N/A	Yisel Sanchez		No
Conflict of Interest	None reported.	N/A	N/A	N/A	N/A
Dr. Bowen's Report	<ul> <li>Smart Beds</li> <li>Still running the 4 bed pilot in the Sago unit and everything is going well.</li> <li>Ryan had a phone conversation with the vendor and he and Dr. Bowen will meet with the vendor on the 23<sup>rd</sup> to discuss possibly implementing Smart Beds on a full unit and work within AzSH' budget limitations.</li> </ul>	Meeting with vendor to work out a deal to have an entire unit outfitted with the Smart Beds.  Implement at Forensic	Dr. Bowen and Ryan Hoffmeyer	N/A N/A July 31,	No No
	<ul> <li>Up and running on CRU.</li> <li>Social work and rehab are</li> </ul>	campus by the end of July 2016.	nonnieyer	2016	INO



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	<ul> <li>currently working on trying to get the internet implemented at the Forensic campus by the end of July.</li> <li>After implementing at Forensic, the plan is to implement at Civil and then ACPTC.</li> </ul>	N/A	N/A	N/A	No
	<ul> <li>Grievance and Appeals</li> <li>The policy has been approved by the governing body with several attached forms to go with policy.</li> </ul>	Dr. Bowen provided copies of the policy and extra forms to the committee. Mary Lou Brncik asked for a copy to be emailed to those attending by phone.	Laurie Goldstein	N/A	N/A
	At the next meeting,     Margaret will provide a     presentation and answer any     questions.  RFI	Margaret will provide a presentation along with Q & A session at next meeting.	Margaret McLaughlin	N/A	No
	<ul> <li>The RFI went out and an initial information gathering</li> </ul>	N/A	N/A	N/A	N/A



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	meeting was held at ADHS. The meeting was well attended by entities showing interest in either building on the land or using the existing facilities.				
	<ul> <li>The response date has been extended to July 30<sup>th</sup>. The RBHA's and AHCCCS will provide a joint response.</li> <li>Discussion regarding the</li> </ul>	N/A	N/A	July 30, 2016	N/A
	CRU and explain to staff that any transfer of staff and/or patients is currently on hold.  Request for additional staff  ADOA has confirmed that 95	N/A	N/A	N/A	N/A
	staff has been added. This will include staffing for security, behavioral health technicians and R.N.'s. This is in addition to the 29 staff already received.  • 3 job fairs have been planned	Job fairs to be held in June and July to recruit for new staffing positions.		July 30, 2016	No



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	in June and July to recruit for the 3 new staffing areas.				
Natural remedies and how can patients obtain them?	Dr. Dingle addressed this question. In a hospital environment any vitamins, supplements, protein bars/powder, etc. are considered nutraceuticals and must be managed by a physician and the dietary staff. These requests will be reviewed on a case by case basis. A physician needs to execute an order for these items just like a regular prescription, and if a patient is denied a natural remedy request, there isn't an appeal process.	N/A	N/A	N/A	N/A
Clothing Issue	Last month there was a discussion regarding a patient not being able to purchase a pair of designer pants because they couldn't find anyone to help them. Dr. Dingle suggested that any of the patients who want to	N/A	N/A	N/A	N/A



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	purchase specialty items with their own money should get in touch with their social worker first to try and help them out with purchasing items.				
Site Visit Report & Forensic Library Update – Laurie Goldstein	Jackie Bachelier helped the with providing names of special assistance people to speak with. There is a concern about visiting the day room and hanging out to see if anyone wanted to talk to them. Does a guardian need to sign off allowing the patient to speak to HRC? What is the policy?	Need clarification of visitation policy. Need to avoid any HIPPA violations.	Margaret McLaughlin	N/A	N/A
	Sharon and Laurie went to visit client #1 in Mohave. This client is concerned about the lack of progress in getting a dentist appointment. Client has cavities that need filling and he has lost all of his upper teeth and is requesting dentures. Client stated several times during the visit	N/A	N/A	N/A	N/A



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			Responsible	Completion	Complete
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	that he and his guardian have been	•			
	repeatedly ignored on this issue.				
	HRC did follow up on his dietary				
	needs and were able to confirm that				
	his food is being prepared correctly				
	(ground up) so he can eat. Dr.				
	Dingle brought up that getting				
	dentures has historically been a				
	problem but it has recently been				
	solved.				
	Client also stated that the staff				
	ignores him since he is soft spoken				
	but when he raises his voice to be				
	heard, he gets into trouble. Client				
	states that he feels safe in Mohave				
	but not in any of the other units.				
	Claims that he was beaten and it was				
	another patient who intervened and				
	not staff even though they were				
	close by. Also claims to have been				
	assaulted by staff and nobody				
	helped. When asked about seclusion				
	and restraint, client states he				



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	understands the purpose and need when either he or another patient get out of control. This client also works at a paying job and has access to his money.	•			
	There was a question as to what is the current approach to patients who need crowns, caps, fillings? Is it pull rather than restore? Dr. Dingle stated that according to the new dentist, the approach is to restore as much as possible. Dr. Dingle will follow up with the dentist to get clarification.	Follow up with new dentist to verify the approach of restore rather than pull.	Dr. Dingle	N/A	No
	Sharon and Laurie then went over to Pinon unit to visit client #2 and the first thing that was striking was the smell of burning electrical wiring. When asking about the smell they were told it has always been there but some days were worse than	Have the Pinon unit electrical wiring checked out.	Dr. Bowen	N/A	No



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	others. Probably need to have this checked out. Another issue noted is the dorm being closed during the daytime. A patient wanted to talk to Sharon but was physically ill and unable to go back into her room to lie down due to it being closed. This was in the middle of the day and the day room was crowded with some people sleeping in chairs. The outside mall areas are currently closed due to the heat.	Look at alternate spaces that can extend the living area and everyone not having to be confined to the day room. Also look at activities that can get people off of the units for a little while.	Connie Belden	N/A	No
	They began speaking with client #2 who was mostly concerned about his legal appeal process. He feels the staff is respectful of his religious needs and can worship when he wants to worship. There is a minister who stills comes on the unit. When asked about his ability to socialize with family and friends,	N/A	IV/A	N/A	N/A



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Rem	he has limited contact with his mother but tries to reach out to his sister to talk. Client is able to work at a paying job and has access to his money when he has some. Client has attended AA meetings and it would be beneficial for him to continue to do so.	Tonow-Op/Action	Tol Tollow Cp	Date	103/10
	Library: There isn't any space for a library but what about a mobile library? Each unit could have their own craft/book cart.	Speak with rehab about getting something in place and the guidelines for material.	Laurie Goldstein and Sharon Ashcroft	N/A	No
Peer Support Update - Sharon	This was coordinated through Kathy Bashor. There is an outside agency that will come in for free and train patients in peer support. Susan McGinder through S.T.A.R. is the person willing to come in a do the training. She is available starting in August and can handle around 20 patients at a time. She needs a minimum of 2.0 hours and hopefully	Need to get clarification of the time frame whether to meet once a week or twice a week. How many total hours?  Need a small proposal for the executive team listing out Susan's requirements and executive team will	Sharon Ashcroft	N/A	No



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	can have 3.0 hours of time to gather	need to see if there is			
	the patients together for training.	available space and rehab			
	Paul Galdys mentioned that if this is	staff.			
	for the full peer employment				
	training, it is usually requires 40				
	hours of training.				
	She is also interested in helping				
	those who do not have a SMI				
	classification with the grievance and				
	appeals process.				
Public Comment	Gavin in Sycamore unit				
	<ul> <li>Thanked Dr. Bowen for</li> </ul>				
	clarifying the questions and				
	concerns surrounding CRU.				
	Laura Burstein, mother of a patient				
	<ul> <li>Mentioned that her son is in</li> </ul>				
	a room that has a Smart Bed				
	and complains that he is				
	disturbed every 30 minutes				
	or so by staff checking beds.				
	Rodney W. on Sago unit:				
	<ul> <li>Smart beds are not being</li> </ul>	Follow up with Rodney	Someone from	N/A	No
	utilized. Even in single bed	regarding his	HRC will		



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	<ul> <li>rooms, the staff are waking patients up and disturbing the patient's sleep.</li> <li>Concern regarding a doctor is overmedicating patients.</li> </ul>	accusations/complaints.	follow up with patient directly.		
	David Metcalf on Sago unit:  • Stated that his doctor is forcing him to take a medication that he feels uncomfortable with taking especially at the doses he is being given.	Patient needs to speak with his treatment team.	Someone from HRC will follow up with patient directly.	N/A	No
	Tyler on Sago unit:  • Voiced his concern about the CRU issue being placed on hold. What about the patients who have met their levels and want to leave the Forensic campus? If CRU is not going to be an option, what do they look forward to	Place this as an agenda item for the next HRC meeting.	Yisel Sanchez.	July 31, 2016	No



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	now?  John Paul on Sago unit:  • All his concerns have been already addressed so he didn't have anything to add.	N/A	N/A	N/A	N/A
New Business – Sharon Ashcroft	Are there any plans in the near future of bringing Campus Support back into the units?	With the new funding security will grow from the current 62 to 85 positions.	N/A	N/A	N/A
	Jim asked if anyone has checked into solar panels that would provide shade for outside and generate energy. Dr. Bowen stated that this was the initial desire for the Forensic unit but for some reason Ryan said this fell through the cracks.	Need to re-look at this option. Place on next month's agenda.	Dr. Bowen	N/A	N/A
Discuss Holiday / Christmas Party – Sharon Ashcroft	Brief discussion on whether it is too early to start planning since last year's was too stressful since	Get a few dates and ideas together and can go over them in a holiday sub-	Sharon Ashcroft and Laurie	N/A	No



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	nothing was planned ahead. Dr. Bowen stated that he isn't sure that rehab has thought this far ahead.	committee.	Goldstein.		
Agenda Items	What are the initiatives for Forensic patients to meet levels since CRU is on hold?  Solar panels.				
Meeting Adjourn	Jim motioned to adjourn; Jill seconds; all approve.  Meeting to go into Executive Session				