



Arizona State Hospital Human Rights Committee Meeting

Thursday, December 21, 2017 6:00-9:00PM Meeting AzSH Auditorium	Arizona State Hospital 2500 E. Van Buren St. Phoenix, AZ 85008
Members Present: Joe O'Cain; Leon Canty; Joe Contreras, (phone); Sharon Ashcroft, Chair; Ross Davids; Ashley Oddo-(phone) Kim Scherek (phone) [after 7pm]	
Other Attendees: Dana Hearn, A.D./AHCCCS; Yisel Sanchez, Human Rights Committee Coordinator/AHCCCS; Dr. Aaron, ASH CEO (phone); Cara Christ, DBHS Director (phone); Anna Branson; ACDL, Peter Gray	
Members Absent: Jim Gillcoatt; Laurie Goldstein	
Next Meeting: January 18 2018	
Revised January 16, 2018 and Approved January 18, 2018 by: _____ Sharon Ashcroft, Chairman	



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Item	Discussion	Follow-Up/Action	Person(s) Responsible for Follow Up	Target Completion Date
Welcome and Introductions	<ul style="list-style-type: none"> Sharon Ashcroft calls meeting to order at 6:00pm. 	NA	NA	NA
Disclosure of Conflict of Interest	<ul style="list-style-type: none"> Chair asks for disclosure of conflict of interest. 	None noted		
Review November Meeting Minutes	<ul style="list-style-type: none"> Correction to page 5 of 11, change word 'determined' to the word 'deemed'. Remove Dr. and lowercase P in patient at the bottom of page 5 of 11. 	Joe makes a motion to approve with change. Leon seconds, all member vote in favor.	NA	
Dr. Bowen's Report Approved Others-Social Work	<ul style="list-style-type: none"> Dr. Bowen notes this was discussed at the last two meetings. Point of clarification made that if there are questions from the approved others or patient they can follow up with social worker/treatment team. Dr. Bowen stated all treatment teams review individual pass guidelines with patients. 			



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Incident/Accident Reports – Jim Gillcoatt	<ul style="list-style-type: none"> Jim unable to attend Jim provided a report for Sharon but it is on her cell phone, and HRC members not allowed to bring cell phones into this particular meeting. Sharon states she will try to overview Jim's report. Sharon communicated what Jim shared that sometimes when patients are in seclusion and restraint staff notes they are no longer DTO or DTS but they are not released immediately. Sharon notes Jim concern that the S/R report does not say why those patients are not released. An incident happened because staff repeatedly refused to call a patient by the name they identify with. Patient acted out. Jim stated there should be more documentation on 	Sharon will send report to Yisel for the following month's meeting in Jan.	Sharon	1-12-18



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	<p>what led up to the incident.</p> <ul style="list-style-type: none"> AHCCCS reviewed continuing work to improve FTP server process. Sharon notes there may be missing Incident and S/R reports. Dana inquired if any missing info was reported to AHCCCS by Sharon. She stated no, but that Jim had requested them from Yisel. 			
Holiday Party	<ul style="list-style-type: none"> HRC did not host a holiday party this year because Dr Bowen stated that the ASH Rehab staff would be providing patients with holiday events. 			
Sub-committee Leon Canty	<ul style="list-style-type: none"> Leon gave introduction to training subcommittee. Dana reviewed 23 page draft completed by DHCAA staff and suggested change to be to the screen shots for greater visibility. Leon agreed to add to the community resources 	Leon to add resources	Leon	



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	<ul style="list-style-type: none"> Sharon would like 12 step programs included. Joe agreed to review for feedback with CRU patients. Committee would like training emailed. Committee agreed to discuss further plan of training at next meeting. 	<p>Joe to get feedback</p> <p>Yisel to send out training that was sent to Leon 12/21/17.</p>	<p>Joe</p> <p>Yisel</p>	
Hope Lives	<ul style="list-style-type: none"> Leon has followed up with Robert Rodriguez and it was noted that there was never a contract between Hope Lives and AzSH and that confirms everything Dr. Bowen has said. Leon notes patients can reach out to Hope Lives and they would be more than happy to take them on passes. Sharon notes they need to go through a Hope Lives intake first, and she believes there is funding 	<p>Leon will follow up with</p>	<p>Sharon</p>	1/12/18



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	<p>through AHCCCS per Deb Jorgensen of Hope Lives to do this.</p> <ul style="list-style-type: none"> • Deb was supposed to be at the HRC meeting to discuss but was not present. To be tabled until next meeting. • Reviewed to be a good option for patients that do not have approved others. Leon reviewed it was crucial to achieving the levels that resulted in his conditional release. • Leon reviewed that Hope Lives is a peer operated network. Some examples provided of the peer work: show resources in the community, hold groups (budget, coping skills, seeking employment, etc.). 	Deb for next meeting.		
Site visits	<ul style="list-style-type: none"> • Reviewed that last meeting they did not discuss because agenda was made prior to site visits. • Three site visits. • HRC members were joined by 			



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	<p>Northern AZ HRC chair. Patient one reported being assaulted and concerned with how the situation handled. Sharon reported he had asked for keys to lock his room because he was afraid of being assaulted and in fear of some patients on unit. He did not get the keys until after the assault. Sharon suggested to member he share his feelings with his treatment team.</p> <ul style="list-style-type: none"> • Second visit to patient who stated he was secluded and restrained for 20 hours total. It was reported he was told he had a privilege that his psychiatrist did not grant. This reportedly resulted in him acting out. The patient stated that the restraint order was renewed several times and he got Tylenol and Gatorade. As of November patient reported still having provider issues. Feels there is difficulty 			



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	<p>communicating with staff and psychiatrist.</p> <ul style="list-style-type: none"> • Third visit was about a patient moved to a different unit. Patient stated staff told her the move was temporary. She was informed move was permanent a few days later so patient asked to move her own possessions. This was refused by staff, and they moved her belongings. Some of her personal items were lost and another patient ripped up her journal. Patient reported to HRC that staff spent so much time with the person that needed restraint because of his acting out that they did not address her treatment and care as a result. Patient reported she was spit on by other patient when trying to protect staff from him. • Sharon reviews that all three patients felt staff was not 			



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	<p>responding to their needs and it triggers them to act out or become symptomatic. Two patients reportedly said they felt staff lied to them, and all three were made promises by ASH staff that were not kept.</p> <ul style="list-style-type: none"> • Sharon notes one concern she took up with patient attorney and not sure if can be talked about in this meeting. • Ross suggests better communication between hospital staff and patients. • Dr. Bowen asks for clarification on statement of Sharon talking to patient attorney regarding something within a site visit. • Sharon clarified she randomly saw Tammy Wray (attorney) at PSRB and asked her why a patient came back and was still at the state hospital. Reportedly Tammy 			



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	<p>noted Sharon would need a ROI.</p> <ul style="list-style-type: none"> • Dr. Bowen reviewed that the identity of the patient should not be relayed to others by the HRC and reviewed concern due to wanting to protect identity of the patients. • Sharon notes she only relayed information to the patient's own attorney. • Dr. Bowen requested that the committee abide by statutory duty and operating guidelines. Reviewed path to submit in writing concerns to the Director. Dr. Bowen also reviewed that there are many circumstances involved and there is caveat that patient is only reporting on one side so a request for more information can be done and working to resolution. • Dana inquired if any HRC concerns had been submitted in 			



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	<p>writing and Sharon noted they had not because that action needed to be voted on.</p> <ul style="list-style-type: none"> Vote taken on getting more clarification on patient incidents and S/Rs via request in writing. 	<p>Sharon to submit request Joe makes motion. Leon seconds. All vote in favor.</p>	Sharon	12/31/17
Public Comment	<ul style="list-style-type: none"> Aaron Wallace – on unit staff are supposed to watch hallway and he got injured because of lack of staff. Stated sometimes there are staff in hallway and sometimes don't pay attention. Wants more staff John Mancini – discussed years ago with 1:1 staff in bathrooms. He notes he pushed up ping pong table blocking nurses station to show them need for staff. Notes concern of patient being moved 			



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	<p>around a lot without addressing their behavior, and as a result another patient was assaulted. Discussed his health issues and notes he has a grievance in process. He notes that he does not believe timelines are followed in grievance procedures. He also notes he will not be around next meeting.</p> <ul style="list-style-type: none"> • David – notes he hasn't slept last couple days. Feels he is being retaliated against and items were removed from his room and some items were stolen. Stated he has no hygiene. Reports respect and dignity concerns and states it is spirit-crushing. Requested HRC visit. • PP – former patient – has a blog. Reviewed hospital history with Donna Noriega and Cory Nelson. Concerned about not using word 	Sharon will request visit for David with Jacqueline.	Sharon	1/12/18

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	into her treatment. Notes a state senator tried to intervene on her behalf and false information was given to the senator by a top ASH administrator. Sharon asks if she has filed grievance and Jill notes being non- SMI that she does not have the same grievance process as SMI patients. Sharon suggests HRC site visit to discuss in more detail.			
Meeting Adjourn	<ul style="list-style-type: none"> Sharon calls for a motion to adjourn the meeting. 	Joe motioned to adjourn. Ross seconded at 726pm		