



Arizona State Hospital Human Rights Committee- for the seriously mentally ill

Sharon Ashcroft, chairperson 24 West Gary Avenue, Gilbert, AZ 85233

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Dr. Cara Christ Director Arizona Department of Health Services 150 North 18th Avenue , Phoenix AZ 85007

CC: Margery Ault, Deputy Director DHS, Dr. Aaron Bowen, interim C.E.O. Arizona State Hospital

RE: Patients with Serious Mental Illness residing in the Arizona State Hospital-Annual Report 2013

The Arizona State Hospital Human Rights Committee was founded according to the current Arizona Revised Statutes (ARS) 41-3803 and 41-3804. The HRC reviews reports of data, and visits patients receiving services from the Arizona State Hospital (ASH) for the purpose of making recommendations to ASH or the Arizona Department of Health Services (ADHS) for systemic change.

In 2013, the ASH HRC faced several challenges, including membership transition, and a sudden policy change by Arizona State Hospital that removed many of the patient's existing rights. Also, the committee had great difficulty in establishing patient visitation policy, and determining what information is supposed to be supplied by the hospital to the Committee, as well as what the scope of the Committee should be.

I invite you to review the 2013 Annual Report to learn more about our activities and the need for the ASH HRC to become more involved with the patients at the Hospital. I am available should you have any questions, or need additional information.

Sincerely,

Sharon E. Ashcroft, Chairperson Arizona State Hospital Human Rights Committee

December 4, 2014

ARIZONA DEPARTMENT OF HEALTH SERVICES

DIVISION OF BEHAVIORAL HEALTH SERVICES

BUERAU OF CONSUMER RIGHTS

ARIZONA STATE HOSPITAL HUMAN RIGHTS COMMITTEE (ASH HRC) ANNUAL REPORT 2013

ARS 41-3803. Human Rights Committee for those with a serious mental illness.

- a. The Human Rights Committee for those with a serious mental illness was established by the Department of Health Services to promote the rights of persons who receive Behavioral Health Services pursuant to title 36, chapters 5 and 34.
- b. Each region of the state is covered by a Regional Behavioral Health Authority, and shall have at least one Human Rights Committee within the authority and responsibilities as prescribed by the Department of Health Services, pursuant to rules adopted by the Department relating to Behavioral Health Services.
- c. The director of the Department of Health Services may establish additional committees to serve persons who receive Behavioral Health Services, or to oversee the activities of any service provider.
- d. Each committee established pursuant to this section shall consist of at least seven and not more than fifteen members appointed by the Director of the Department of Health Services, with expertise in at least one of the following areas: Psychology, Law, Medicine, Education, Special Education, Social Work.
- e. Each Human Rights Committee shall include at least two members who are current or former clients of the Behavioral Health System.
- f. Each Human Rights Committee shall be organized pursuant to this section and the requirements of section 41-3804.

MEMBERSHIP

The Arizona State Hospital Human Rights Committee (ASH HRC) has ten active members, and one member on a leave of absence, as of December 2013. The members are as follows: (Education), Susan Sanchez (Consumer), Mary Lou Brncik (Family Member of Adult Consumer), Phil Sawyer (Consumer), Max Dine (Medicine), Mitch Klein (leave of absence- Consumer), Kim Scherek (Social Work)., John Mancini (consumer). During 2013, the HRC started with 10 members, added eight, and had seven resign. Of those that resigned, the attorney member resigned in July, and the medical expert resigned in September of 2013.

ORGANIZATIONAL STRUCTURE:

The ASH HRC met monthly in 2013 on the fourth Thursday of each month at 6 pm for approximately two hours. The following people also attend monthly meetings:

Yisel Sanchez, Arizona Department of Health Services Human Rights Committee Coordinator, who records minutes and maintains data.

Donna Noriega, Acting CEO of Arizona State Hospital.

Jeff Bloomberg, Chief, Chief Quality Officer, Arizona State Hospital

INCIDENT AND ACCIDENT REPORTS

Rae Hopf was appointed as the member of ASH HRC to review Incident and Accident Reports, but not seclusion and restraint and restraint reports. These reports are sent securely via the internet in an e mail on a monthly basis. Rae identified several patients with excessive incident/accident reports. One patient was chosen by the HRC to have their records reviewed, due to the number of reports that occurred in a very short period of time. At the time, the HRC had a MD Psychiatrist then member, who reviewed the patient records and made recommendations that were submitted to the hospital, through Dr. Lauren Bonner.

DEATHS

There was one patient death at the hospital in September, 2013.

SITE VISITS:

There was one site visit made, on the Civil side of ASH in December 2013. There continues to be confusion in how and where the HRC should visit patients, and in what capacity the Hospital Administration will allow and aid in those visits.

TRAINING

The HRC received no formal training from either the Hospital, DBHS, or from the OHR in 2013.

COMMUNITY EDUCATION

2013 ACTIVITIES

ASH HRC suggested that the hospital include information about the HRC on their website.

CONTINUED CONCERNS:

There is lack of training for the HRC by DBHS. There are no written operating guidelines for the HRC. Also, even though the HRC is mandated to visit patients, the hospital has no policy for site visits.

There is poor communication between the Hospital and the HRC, in part because the HRC had difficulty in conveying concerns to the hospital, and receiving a timely response.

The membership of the HRC was in constant transition, and had a high turnover in membership, primarily due to a lack of cooperation by the hospital when the committee attempted to perform their duties. The hospital's 50% policy, deeming a patient must serve fifty percent of their presumptive sentence before progression within the hospital level system, and a sweeping policy change that restricted patient's hygiene, visitation, and communications was also of primary concern.

2014 FOCUS AREAS

Top Objectives for 2014

- Have a firmly established site visit protocol implemented

- Improve communication with the Hospital

- Have a mission statement and vision and follow it

- Approve Operating Guidelines

- Approve Annual Report for 2013 and submit one for 2014

The Committee would like to thank the staff of the Arizona Department of Health and the Office of Human Rights for their support.

Respectfully Submitted,

Sharon E. Ashcroft, Chairperson, ASH HRC