



Arizona State Hospital Human Rights Committee for the Seriously Mentally Ill

Sharon Ashcroft, Chairperson – Post Office Box 1240 Chandler, AZ 85244

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Dr. Cara Christ, Director Arizona Department of Health Services 150 North 18<sup>th</sup> Ave Phoenix, AZ 85007

CC: Paul Galdys, Senator Nancy Barto, Margery Ault, Governor Dave Ducey

RE: Patients with Serious Mental Illness residing in the Arizona State Hospital- Annual Report 2015.

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 2015 the ASH HRC membership had several membership resignations, the majority of those being patient members. The Arizona State Hospital Administration, despite the Committee's concern about patient right violations, did not revise the contact visitation, 50%, and patient to patient communication and interaction policies. And they imposed an even higher level infringement of rights by implementing a policy of closing the dorms to patient accessing their rooms and personal belongings, in order to force compliance with attendance of classes held in the day rooms. After the HRC requested information regarding an incident that was mentioned in last year's report, the then CEO Donna Noriega assured us that this incident actually never took place, and supplied none of the requested documents. Channel 15 Investigative Reporter, Dave Biscobing, gave three HRC members the requested documents, live, on the air. This refuted all of Ms. Noriega's previous statements. In addition, Jim Gillcoat and Sharon Ashcroft met with Senator Nancy Barto to express concerns about the growing level of unrest and violence at ASH as a direct result of the restrictive environment created by the now defunct administration. Senator Barto involved Governor Ducey, who removed six top officials as a direct result of HRC and others advocating, in addition to the information Channel 15 exposed. I invite you to review the 2015 Annual Report to learn more about our activities, and the need for the ASH HRC to remain involved in protecting patient rights at Arizona State Hospital. Should you have any questions or concerns, or need additional information, please do not hesitate to contact me.

Sincerely,

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

## 2015 ANNUAL REPORT OF THE ASH HRC

### MEMBERSHIP:

2015 did not see the medical and legal category vacancies filled. We did fill the position of parent of a patient residing at the Hospital. Our patient membership remained strong, although the positions held by both of the Civil patients who resigned have not been filled. We did have a patient who was discharged from ASH return as a member to fill the consumer spot. This is a precedent we hope will encourage those most familiar with the system to return and help the HRC focus on what is most important to patient rights being preserved.

The ASH HRC met monthly in 2015 on the fourth Thursday of each month at 6 pm for approximately two hours. There were eleven meetings in 2015. The following people also attended monthly meetings:

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

Margery Ault, DHS

Donna Noriega, C.E.O. Arizona State Hospital

Jennifer Alewelt, C.Q.O., Arizona State Hospital

Dr. Aaron Bowen, C.E.O. Arizona State Hospital

Dr. Dingle, C.M.O. Arizona State Hospital

Kathy Bashor, OIFA

Paul Galdys, DHS

### INCIDENT AND ACCIDENT REPORTS

Jim Gillcoatt was appointed as the HRC member to review Incident and Accident Reports during 2015. He noted some details in documenting that he felt should be more complete. He also found an incident that had been grieved to DHS for an assault allegation. The patient was placed in a hold that seemed violent and aggressive. The patient was also medicate with an injection against his will after he was woken up, placed in a chokehold, and drug to the seclusion room The incident was sent to DHS for further review, and we were informed the staff in question received CIT training to help prevent future occurrences.

### DEATHS:

There was one death at Arizona State Hospital in 2015.

#### SITE VISITS:

Site visits were carried out by the HRC on both the Civil and Forensic Campuses, successfully conducted. In addition, a patient forum was held on the Forensic side of the Hospital that the HRC Chair attended. The HRC received many patient letters and calls regarding requests for records, lack of staff and high amount of temporary employees, physical abuse by staff to patients, lack of progress in attaining levels and being recommended to Special Class and the PSRB, restrictions in communications patient to patient, and personal mail being lost, and a restriction on receiving items even though on the approved list. Mandatory dorm closures and retaliation for filing grievances was noted as well. Many patients experienced severe stress with the nightly checks that involve going into the patient rooms with a flashlight every thirty minutes. Civil patients complained about not ever having a hot breakfast, and that the food choices were not always in accordance with their diets, and lack of dentures. Patients also complained that the newspapers and television stations were censored so that they could not read about events transpiring at the hospital, and also regarding a death and murder that involved patients that used to reside at ASH. Finally, there was a boiler that blew up in December, and it took several days for patients to get hot water, and the units were very cold.

#### TRAINING:

The Department of Health Services provided a link that all members needed to review and complete regarding ethics. We were promised training regarding the PSRB that never happened. We had also asked for training on how HRC's function and what our duties and responsibilities are. That never materialized either.

#### COMMUNITY EDUCATION:

ASH updated its website to include information regarding the HRC and its meetings. Also, the link provides access to HRC minutes. Senate Bill 1400 was passed, clarifying the scope and role of HRCs statewide. Chairs from Pima, Pinal, Maricopa and ASH attended stakeholder meetings at the Senate to help re write this Bill, which passed. There was also a first ever Stateside Meeting of the Arizona HRC's, which was open to the public, and at which Senator Nancy Barto given an award for her advocacy.

Christmas cards containing HRC and public information and phone numbers were provided to all patients, most staff, and other DBHS members during 2015 to increase awareness of the HRC and its availability for all to contact regarding patient rights. Patients and family were encouraged to call into meetings if they could not attend personally, and speak during the public comment section.

A member of OIFA, Kathy Bashor, attended a few meetings, as well as a subcommittee meeting to talk about vocational and peer support training. Also, there was a statewide meeting held in Casa Grande that familiarized other HRCs in the state about the Ash Committee. And, finally, Channel 15 ran a series of stories about the hospital, and interviewed three committee members on the air. Also, two committee members met with Senator Nancy Barto to further her awareness of the situation at ASH and what the committee was trying to do to protect patient rights. She has become a strong advocate for

the Hospital's residents, and for the HRC members. She, in turn, has brought Governor Ducey into the loop regarding ASH and the HRC.

#### CONCERNS:

A patient's death in 2015 occurred while the patient was on a one to one watch. After the HRC requested an investigation into the incident, it was found that she was not adequately monitored. Also, after requesting investigations into another death at ASH, it was found that hospital staff had not followed treatment protocol and documentation. And regarding the December 2014 incident that we fought so hard to get information about- again, a patient who was on one to one staff supervision was harmed because staff was not fulfilling their duties. Furthermore, an investigation by CMS and also by Ruth Ginsberg discovered that nine out of ten charts at ASH were not complete, and that there were serious staffing and documentation deficiencies. Also, at one point APS was not allowed access to patients who complained of abuse, Grievances, appeals and investigations by the hospital were at a standstill.

After the level of unrest increased to an unbearable point halfway through 2015, the entire administration was replaced. And we will never know all of the serious infringements of patient's rights, and egregious lack of care, because there was such an appalling lack of documentation. One on one patient repeatedly harmed themselves. In one case, a patient repeatedly beat their head on the pavement because the staff member in charge of watching them was PLAYING BASKETBALL. There are concerns about breach of patient's HIPAA rights, when staff take camera phones onto units, and discuss care and treatment of patients in clear hearing of others.

Now we get to the positive occurrences in 2015. Dr. Aaron Bowen was appointed as CEO , along with Dr. Steven Dingle, returning to ASH as CMO. Along came replacements in all areas of the hospital to include the following: Director of Rehab- Scott Stambaugh, CNO Debra Taylor, CQO Tiffany, and COO Ryan Hoffmeyer. The 50% policy was abolished. Ankle monitors came off of those who were not leaving on passes or on full mall privilege. Patients could communicate by phone unit to unit again, and contact visits with hugs were re instituted. Talk about shade for the unit patios, peer support and vocational training, bed monitors to abolish night time checks. The internet might be a reality in 2016. There were food visits allowed during the holiday season, and a Christmas Program, presented by the HRC- the first ever such occurrence., open to any who wished to attend on both Civil and Forensic Campuses. Quarterly patient forums were started , to allow patient input into what they felt most important in their lives at ASH,.

Dr Bowen, Dr. Dingle, and the entire administration is transparent with the HRC. Information requested is provided in a timely manner. Dr Bowen is available at each meeting to provide updates and answer questions. He also will answer questions directly when asked by the HRC, whereas Donna Noriega and Jennifer Alewelt demanded all communication come to them through DHS. Both the CEO and CMO as well as Dr.Christ are regularly on the units at ASH to monitor patient treatment and care.

2016 FOCUS AREAS

Top Objectives for 2015

Continue Site Visits

Increase Membership

Have Training for a clearer understanding of the PSRB and Appeal and Grievance/Complaint Process

Establish a library for the Forensic patients, with the AZ Statutes and more literature available.

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