

PAIMI Advisory Council Meeting Minutes

The PAIMI Advisory Council met at 9:30 a.m. on April 5, 2011 at the Office of Protection and Advocacy for Persons with Disabilities.

Present: Muriel Tomer (Chair), Elizabeth Larsen, Barbara Sloan, Alicia Woodsby, and Jennifer Henry

Absence: Sandy Chapman, Wallace Peterson, Lorna Grivois, Roy Lee, Kirk Lowry, Marcia McIntosh, Marisa Walls, Tom Behrendt, and Kim Guy

Staff: Bruce Garrison, PAIMI Assistant Director; James McGaughey, Executive Director; Gretchen Knauff, Assistant Director; Nancy Alisberg, Managing Attorney; Eveleen McDonald, Community Advocacy Specialist; and Jessica Rival, Human Services Advocate

CALL TO ORDER

The PAIMI Advisory Council Meeting was called to order at 9:45 a.m. The minutes were reviewed. Alicia W. requested a correction of page 2, paragraph 3 – change definition of restraint and seclusion to definition of seclusion. Elizabeth L. requested a correction on page 4, paragraph second sentence – change Dr. Justin Sleeper to Justin Sleeper, Nurse. Barbara S. stated that on page 4, first sentence Bruce G. said “the use of report card needs to be reenergized.” A motion was made to approve the minutes with the corrections, but because there was no quorum, a vote had to be tabled until the next meeting.

NEW BUSINESS

Work Plan Implementation: Identifying Priorities and Workgroups

Bruce G. stated that the Council needed to identify and create work groups so that Council members who work in the groups could work toward approving and completing the goals and objectives for the 2011 fiscal year. The workgroups will report back to the full PAIMI Council on the progress made on the group's projects. The workgroups will also provide ideas and advice that will be considered and acted upon by PAIMI staff. Bruce stated that there could be additional meeting times set up by individual work groups when not meeting in the larger bi-monthly meeting.

Restraint and Seclusion Workgroup

The restraint and seclusion workgroup will look at the four investigation reports produced by PAIMI staff and make recommendations based on the reports. The guidance from the workgroup will assist PAIMI with ideas for action that can be taken to reduce restraint and seclusion.

Forum Workgroup

The forum workgroup would continue the work initiated by PAIMI Council and staff who planned and implemented the Team Time Club House forum. Twenty-five people attended the Team Time forum and provided input to the Council. Although the priorities require only one forum during the fiscal year, the Council would like to support more forums.

Gretchen K. said that the initiative was good. Eveleen McD. received a memo saying that five people received help. She asked Bruce G. who was in the work group. Bruce G. stated only PAIMI staff because a council member was unable to attend. He also stated that Muriel T. was a part of organizing and getting things together.

In discussing a forum workgroup, Muriel T. stated that the Council should do training for consumers so that they would know what they're doing when it comes to taking medication. Information about medications can be disseminated, giving consumers knowledge that will help them advocate for their health care needs with their general physician.

Parent Training

This workgroup will assist with development and implementation of a parent training curriculum. Jessica R. and Eveleen McD. have already been working with Muriel T and community stakeholders to begin the process. Paloma from NAMI-CT attended the first parent training workgroup meeting. The group's next step is to write a curriculum. Council member Marisa Walls has expressed interest in working with the group.

Facility Report Card Work Group

The facility report cards are exclusively a PAIMI Council project. The Facility Report Card Workgroup will assist in keeping the project moving forward. They will also review the issues

identified in the report cards and make recommendations for publications and training. Bruce stated that there is still a list of facilities that need to be interviewed and teams need to be put together.

Additional discussion about the report cards included: Council members will review the facilities in teams. Bruce G. will send letters to the hospitals to be reviewed and then follow up with a report. Gretchen K. stated that she and Bruce G. talked about a seasoned Council member working with a newly appointed Council member to complete the follow-up visits.

Barbara S. said that she would like to go to MidState Hospital. Muriel T. will go to a distant hospital and Alicia W. will decide on which hospital she will visit.

Prison Workgroup Suggestion

Alicia wanted to know if PAIMI would benefit from the Council establishing a Prison Workgroup. Bruce said that there are several relationships that have to be established within the DOC, however, a workgroup will be worthwhile.

James McG. informed the Council about a previous endeavor about 4/5 years ago when the PAIMI Council, at that time, interviewed inmates at Garner Correctional Institution. The Council was trying to find out what services the prisoners were receiving before coming into the criminal justice system. They asked the prisoners what they thought happened during discharge that didn't work that led them back to imprisonment. They also asked them what services they needed upon discharge to succeed in the community. Muriel directed the record be found and reviewed.

Bruce G. stated that progress is being made with the goals and objectives on a daily basis even though they may not be completed before the fiscal year end.

Barbara S. asked if the bylaws allow for voting to take place by mail or email. Both Gretchen K. and Bruce G. said they would check into it and inform the Council.

James McGaughey – Executive Director's Report

1. Residential Care Home (RCH) Bill – The legislature proposed a bill that would have taken RCH's out of regulatory oversight. Jim McG. testified against the bill. It died in Committee.
2. Another piece of proposed legislation would require providers to call the police to report client assault on staff persons, calling it "abuse" by the client. The client would be considered to be engaging in threatening behavior. Staff would be re-assigned so as not to work with that client any more. OPA opposed the legislation because of the implications of using the term "abuse" in the context of client assaults. This bill has already gone from the Public Health Committee to the Judicial Committee.

3. Jim attended a symposium at UConn Law School on the “Role of Mental illness in Defending Guilt.” There were two panels and a keynote speech by Michael Lawlor. The first panel dealt with the use of the insanity defense. The second panel talked about the CRT program – the training of police officers. One panel member, Christina Rigusta (sp) of the Treatment Advocacy Center, advocated for outpatient commitment.

Jim told the Council to watch for what Correction does because they are going to try to save money. Michael Lawlor was considering the outpatient piece again.

Nancy Alisberg – Managing Attorney’s Report

OPA v CT - We had a meeting with the parajudicial officer to attempt to resolve outstanding discovery disputes as well as other outstanding motions. We will continue to meet with him on at least a monthly basis for the time being.

Bolmer v. Oliveira - The Judge granted the plaintiff's request to appeal the case against Danbury Hospital to the Second Circuit. The appeal was filed last week. In the meantime, the defendant filed a motion asking the judge to reconsider her decision allowing that appeal. We are waiting for a decision on that motion.

Gross v. Rell – Still waiting for an argument date.

VOPA v. Stewart – We are still waiting for a decision from the Supreme Court.

PAIMI Assistant Director

Case Work and Investigations

Prisons – There has been a slight increase in inmate contacts, particularly from *Northern CI*. Inmates with mental health needs who have a history of receiving medication and treatment; formally classified as MH-5 (DOC classification mental health level 5: more services); having a set-back in their program at Garner Correctional Institution; having their classifications revised to MH-3 (a lower level of service need) and subsequently placed at Northern without medications and minimal services. When interviewing these men, they tend to have similar developmental and familial histories as antecedents to their incarceration.

Hartford Correctional discharge staff and I are meeting on how to stop the revolving door of inmates with mental health needs going from prison to nursing homes and back again.

Skill Nursing Facilities – Westside Healthcare a subsidiary of I-Care is the home of two men we are assisting with to obtain community placements. These men are known by the Department of Mental Health and Addiction Services (DMHAS) and Department of Development Services (DDS) but are living at Westside because no applications have been made on their behalf for either Money Follows the Person (MFP) and/or the DMHAS waivers. I-Care social workers are not informed about resources available to support these individuals in the community.

Investigations – PAIMI personnel completed four (4) investigations of children injured during the administration of restraint/seclusion. We are in the process of meeting with Department of Children and Families (DCF) and the affected providers to agree on a plan to reform the current culture. We are mapping out immediate, short term and long term goals for DCF and the providers they fund. The goals include an immediate ban on prone restraints; enforcement of DCF's own current policies and procedures; comprehensive training in Positive Behavioral Supports (PBS) by those knowledgeable and experienced; development and implementation of appropriate and integrated mental health and education plans based on PBS; and timely and effective data information sharing systems.

Death Investigation – PAIMI advocates are investigating the recent death of a resident of Westside Healthcare. The Department of Public Health (DPH) has completed its investigation and according to facility administrators, certain institutional procedures have been modified. The person supervising the man's care has been fired. The resident was scheduled to move to a supported community apartment through MFP and the DMHAS waiver. The resident was found frozen to death on a neighboring porch around the corner to Westside.

Residential Care Homes – PAIMI Staff members have been successful saving the placement of individuals in Residential Care Homes. Owners are not always careful about complying with DPH discharge procedures. Attorney Paulette Annon and advocate Wiley Rutledge recently provided representation at a DPH hearing.

Forced Medication Hearings – A conservator reported to P&A that Yale New Haven Hospital was not following protocol when a patient requests an advocate for a forced medication hearing. According to the conservator, P&A was not called. The patient wasn't informed of his or her right to appeal nor did he or she have a representative. The patient can be very upset, paranoid, etc. and not competent to make that call. PAIMI staff members explained the scheduling process to conservators and hospital personnel. The conservator now understands that the hospital scheduling office and clinician handle contact with PAIMI. P&A advocates at forced medication hearings have been beneficial in ensuring due process for our clients. Additional program support has been provided by P&A attorneys.

Outreach and Training

Training and Presentations – PAIMI program staff provided presentations and disability rights training to several groups last month. Maria Cruz provided a presentation on Patient's Rights for an Advocacy Unlimited class. I met with professionals at the Child Guidance Clinic at New Haven's Hill Health Center to provide information about the PAIMI program and the services we offer. An interesting discussion about our opposition to the restrain/seclusion of children at Psychiatric Residential Treatment Facilities (PRTF) ensued when several attendees related their experiences with restraining children they worked with in alternative programs. I presented at the Supported Education Advisory/Provider Meeting and the State Advisory Council on Children's Mental Health.

Training Partnership – Curriculum development is the next step after several meetings with partners including National Alliance on Mental Illness (NAMI), Office of the Healthcare

Advocate, Commission on the Deaf and Hearing Impaired, African Caribbean American Parents (AFCAMP), and Recovery For U. A collaborative curriculum will focus on parent training and self advocacy in mental health and educational rights for children who live in a PRTF. Riverview is our first target for training, consistent with the Council's objectives.

Public Forum – PAIMI personnel, supported by Muriel Tomer, convened a forum for the Team Time Social Club at Community Mental Health Associates (CMHA). PAIMI information was distributed and Club members provided stories about the difficulties they experienced obtaining health services due to their disabilities. Recurrent themes were access to case workers; getting medical doctors to understand psychiatric treatment and medications; lifestyle choices, treatment and the metabolic syndrome. It is recommended that PAIMI and the Council convene additional forums to form the basis for future planning and training.

Elizabeth L. asked about a meeting for next month. Muriel T. stated that she would also like to convene a meeting. Gretchen K. stated that as an alternative, a teleconference could be convened. An email will also be sent because a quorum was not met. She stated that everyone needs to participate in the teleconference.

ADJOURNMENT

The PAIMI Advisory Council Meeting adjourned at 11:30 a.m. The next meeting is scheduled for Tuesday, June 7, 2011 from 9:30 – 11:30 a.m.

Respectfully submitted,

Sherri Martin
PAIMI Secretary

c: James McGaughey
Gretchen Knauff
Nancy Alisberg