

## EMERGENCY INVOLUNTARY PROCEDURES REVIEW COMMITTEE

Friday, June 10, 2022 - 10:30a - 12p

### Zoom Meeting Link

1. Join Zoom Meeting

<https://vsc.zoom.us/j/86014600560>

2. Dial-In Option

Meeting ID: 860 1460 0560

Find your local number: <https://vsc.zoom.us/u/kbMUbw0wo1>

### Purpose

The Emergency Involuntary Procedures (EIP) Review Committee is a committee convened by the Commissioner of the Department of Mental Health (Department) to review emergency involuntary procedures occurring on inpatient psychiatric units for those in the custody of the Commissioner. The Committee's responsibilities will be to review aggregate data, review inpatient hospitals' adherence to the requirements of the CMS and Joint Commission standards, to review the appropriateness of the decision(s) to use emergency involuntary procedures to ensure that there is external review and oversight of emergency involuntary procedures, and to prepare an annual report to the Department summarizing its work, providing suggestions and recommendations regarding the hospitals' adherence to CMS & Joint Commission standards.

*Meeting minutes are intended to capture the substantive business of the meeting and should not be construed as an explicit transcript of all meeting commentary*

### Agenda

1. Introductions & Check-In (10:30a)

a. Review minutes from previous meeting

2. Updates from members (10:35a)

a. Brattleboro Retreat - (audio issues)

- Census has gone up quite a bit?, still have quite a few travel positions?, beds coming online soon on Tyler 1, hoping to relieve back up in ED's, no COVID positive staff/patients? Hired first peer specialist, training for this role is needed. Would like to hire more peer specialists.

b. Central Vermont Medical Center -

- Busy, challenge to staff the unit, taking patients that are a little more acute than they typically accept, a lot of admits to ED, especially minors, inpatient unit is for adults only, minors in ED stressful - not a lot of training dealing with them.

c. Designated Agency Representative

d. DAIL/Division of Licensing and Protection

e. Department of Mental Health - DH, LF, LL

f. Peer Representatives

g. Rutland Regional Medical Center -

- Finished renovations, patients enjoying art work/pictures, centralized nurses station - better access for patients, receiving lots of positive feedback, also struggling with higher acuity rates and staffing challenges, 4 travelers about to end contracts (attempted to see if they can be extended), peer specialist will be moving to part time - hiring for another part

time, trauma informed care important and would be interested in more of that training, despite challenges, EIP rates continue to be low

- Janice - what do staff need? Everything
- h. Springfield Hospital - Windham Center
- i. University of Vermont Medical Center - in attendance - no updates at this time - no suggestions for training info
- j. Vermont Psychiatric Care Hospital
- k. Veterans Affairs -
  - Things are acute here as well, concern for post COVID syndromes, trauma informed care is good for everything
- l. Others - DRVT in attendance

More training to come including online modules. Establish working group for implementation/sustainability. 6 core strategies trainings through next year. Check in with staff to see what they'd like to see in the trainings.

Quarterly data report from DMH

New format for the report. Shorter and more informative. Only 29 (3 youth) involuntary patients across the state this quarter to receive EIP's. Done away with duplicative data, trend data. May consider different trends to include.

Level I units are where most of the EIP's are done.

Osgood not being used as inpatient unit.

Units focus on their own performance over time rather than look at a population rate.

All hospitals are reporting voluntary patient data to DMH. CVPH has no data as of yet. Either we don't have it, and need it, or they aren't doing EIP's.

New format makes you hunt for the good news. Concerns around where/how census numbers are displayed.

Data needs to be aggregated.

### 3. Open Discussion/Comments

- a. DRVT - New curriculum/training opportunities are great. Helpful to have consumer members receive trainings as well. Commendations to RRMC with renovations and dedication.

### Legislative Mandate

- Here is a link to the legislative mandate and the paragraph (page 15) that applies to these reports:  
[https://mentalhealth.vermont.gov/sites/mhnew/files/documents/AboutUs/Committees/EIP/EIP\\_Rule\\_FINAL\\_2016.pdf](https://mentalhealth.vermont.gov/sites/mhnew/files/documents/AboutUs/Committees/EIP/EIP_Rule_FINAL_2016.pdf)
- The Review Committee shall review aggregate data that has been prepared based on information received from the clinical leadership teams of the designated hospitals and the state-operated facility regarding all relevant orders of emergency involuntary procedures (involuntary medication, seclusion and restraint). The aggregate data shall be prepared by the Department of Mental Health in quarterly reports.
- The Review Committee shall meet quarterly to review the aggregate data submitted by the designated hospitals and the state-operated facilities.

*Note:* Committee members & members of the public are invited to submit additional

comments/questions at any time using this form: <http://bit.ly/EIPComment>

### **Important Links**

- EIP Administrative Rule:

[https://mentalhealth.vermont.gov/sites/mhnew/files/documents/AboutUs/Committees/EIP/EIP\\_Rule\\_FINAL\\_2016.pdf](https://mentalhealth.vermont.gov/sites/mhnew/files/documents/AboutUs/Committees/EIP/EIP_Rule_FINAL_2016.pdf)

- EIP Committee Website (with minutes & reports)

<https://mentalhealth.vermont.gov/about-us/boards-and-committees/emergency-involuntary-procedures-review-committee>