



SAMPLE CQT SITE VISIT REPORT

SITE INFORMATION:

Date of Visit: 11/23/2011 **Start/End Time:** 10:00 a.m. to 12:30 p.m.

Hospital Name: Autumn View Hospital **Building/Unit:** Walnut Unit G

Contact(s): Penelope Smith, Head Nurse
Jill Underwood, Building Director
Joel Worthington, CEO

Daily Attendance: 22 **No. of Interviews:** 5

CQT Team(s): Smith/Myer

GENERAL SUMMARY:

CQT Staff Comments: This was CQT's 2nd site visit in FY 12 to Walnut Building, Unit G at Autumn View Hospital. The visit was announced. CQT noticed that there were flyers up on the bulletin board announcing their visit that day. The consumers were starting the morning meeting in the common area when the CQT interviewers arrived. CQT was able to make an announcement to the group, and several consumers recognized the team. Interviews were conducted at a table in the back of the common area at the request of staff, who expressed concern about some consumers' level of agitation that day.

Consumer Comment Summary: The consumers interviewed had mixed feelings and concerns regarding staff. Concern was expressed about groups being too elementary; also several consumers stated they would like an art class. One consumer told the team they'd like to have GED classes. There were mixed reports about the food.

Staff Comment Summary: The immediate site visit report was given to Penelope Smith, Head Nurse, in person on 11/23/2011. Ms. Smith took notes while the CQT team shared the report with her.

INDIVIDUAL COMMENTS/CONCERNS:

The following consumers gave permission to use their name with staff to address individual concerns and requests.

1. A consumer had one request:

- **They are having side effects from their medication and feel uncomfortable and nauseated. They would like to address this with their care team.** Staff informed.

2. A consumer had two requests:

- **They would like to go to Kingsway, a long term care center in Howard County. They said their social worker doesn't talk to them about this.** Staff informed.
- **They also need an electric razor.** Staff will talk to the social worker and work on getting the consumer an electric razor.

3. A consumer had one request:

- **They would like a new pair of shoes (men's size 10). (The consumer showed CQT where there were holes in the current pair of shoes.) The consumer has told staff, but staff informed the consumer that the consumer does not have money to budget for new shoes. The consumer believes it is a policy that new shoes be provided.** Staff is aware and report that budgeting and buying their own clothing and shoes is part of the consumer's treatment plan; however, staff thanked CQT for bringing this to their attention. They were unaware that their shoes were this worn and will intervene to provide a better pair of shoes.

4. A consumer had one concern:

- **They stated that they should not be here and want to be discharged. They do not have a diagnosis. The consumer stated that they are not present at their forensic/treatment team meetings.** Staff informed and already aware of this concern; the consumer does meet with their treatment team, but they have a problem with their short-term memory.

The following are suggestions, concerns or requests from consumers who did NOT give permission to use their name.

1. A consumer had one suggestion:

- **They would like to see a dance or an art class as one of the groups offered.** Staff shared that they have had art classes in the past and will look into offering it again to the consumers. They will also take a poll to see what other consumers may want to take part in these classes.

INDEX OF CONSUMER COMMENTS BY SUBJECT AREA:

Some comments have been paraphrased for clarity.

Unit Staff Attitudes and Performance:

Staff treats me alright; I really like my doctor.

One of the staff members yells at the patients for no reason.

I'm working on staff to trust me after I eloped.

I feel okay bringing things up with them and a lot of the time something gets done.

If I have a problem, I usually go to Kathy. She tries to help me or talks to me about what's bothering me.

Staff is okay...everybody has their good days and their bad days.

Classes, Programming & Daily Activities:

I'm hoping to get out of here. I'm too winded to go to groups. Staff knows this and forces me to go anyway.

I just go along with the people. I don't really say much.

We go outside every once in awhile.

I would elope on purpose and come back so they would press charges. I don't have a diagnosis after five years.

Groups are ridiculous. What am I supposed to get out of coloring the letter A?

We have a community meeting every morning. Staff tells all the patients what they have been doing wrong and other announcements. We tell them the shower doesn't work or things like that at the meeting.

The staff want me to go to programs. There are games and current events, but it is done at an elementary school level. Why can't they have something more interesting like dancing or art?

They took my pen - why is that considered contraband?

The ward is quiet.

I don't go to groups or classes. They don't have any art classes. I hang out.

It's tough to make everyone happy, especially when people talk to themselves and I can't hear the TV.

I don't feel safe here. One patient likes to start fights. Staff is pretty good about handling him, but I'm scared he's going to start something with me and I will get in trouble.

Community Involvement & Participation:

I have a green level and I don't want to lose that. I'm good with taking my medications and not causing trouble. I like going to the canteen (on campus) to buy snacks and things like that.

I want to visit my son in Hagerstown. I'm not allowed home visits.

Vocational Services:

I walk to work at the Print Shop. It's my second year there. I have a lot of privileges.

I am still able-bodied and am happy to work, but I have to get public assistance.

I'd like to be working on my GED while I'm in here.

Case Management & Entitlements:

They don't talk about me leaving much; I'm here because the judge said so.

They need more people working on placement. I'm ready to be done with this place.

I have access to my money. The doctors here have access to my bank and insurance. My Aunt Shirley, father and brothers have access too.

I went to supervised housing and they tried to get me to change my name and religion. The housing tried to get me to sign a paper saying I am Catholic.

I had to live on the street in order to get Section 8 housing; then I messed up and I ended up in here. I don't know if I still have my place.

Helen, my social worker, is helpful. I have a discharge plan and we've been talking about that lately.

Facility, Food & Other Services:

I like the meals- they serve me vegetarian.

I don't care for the food. It's not fresh. It tastes like it's stale or sometimes it has no taste. I used to cook for myself.

They deliver the breakfast cart at 7:00 a.m., but it has to sit there and wait until we all get our meds, so the food isn't served until 7:30 or so. The eggs are always cold. Cold eggs are just gross.

I try calling people in Virginia, but calls don't go through. I have tried calling collect; nothing works.

The water temperature has been pretty good lately. Last month the showers were mostly cold, but I think maintenance did something about it.

Forensic & Criminal Justice Services:

I have a court case coming up on July 22nd. The whole unit knows about it. I also have a date in August for my release. I have a public defender who works with me. He's cosigned for my release.

Last time I went to court they marked me involuntary.

I can call my public defender.

I have a court date, but they keep pushing it back. The head doctor is going to testify for me to get out.

The nurse dropped me from Level Two to Level Zero before my trial.

I've been in and out for twenty-seven years. I'm stuck in the system. They took me to [another hospital], gave me a whole bunch of medications. I couldn't stand before the judge and tell him what happened because I was so medicated.

I don't know what I have to do to get the judge to let me out of here

Resident Rights and Grievance Services:

The Right's Advisor comes and visits on the unit, and that's a good thing, because it's really difficult to get to use the phone. I had a concern, and the Right's Advisor was on the unit, so I just went and talked to her. She helped me get the problem straightened out.

Clinical MH Services & Staff:

My doctor, Dr. L. is very qualified. I see her almost every day.

I think I'm ready to move on, but my treatment team isn't willing to let go of me.

I think I am being medicated too much. *(Consumer did not give permission to use name.)*

I don't have a mental illness but I am taking medication anyways. I had postpartum depression and I understand how that works and I'm over it now. The staff don't want me to leave.

I want to be able to be out but I don't want to be taking medication.

I want to go off some of my meds. They won't let me. *(Consumer did not give permission to use name.)*

I am angry. I don't know what I'm taking and when I take it. I talk to Dr. C. (Consumer stated that they felt Dr. C should be in on the interview. Consumer left the interview, went to the nurses' station and told Dr. C he needed to come into the meeting. CQT staff stated that the consumer was interested in knowing their medications and schedule. Dr. C was happy to comply and brought a handwritten list of medication schedule back to the consumer before the interview was over. The consumer was very happy about this.)

Somatic/Medical Services:

I am going to the doctor for my hearing.

I have a feeling that I'm dying. I saw my doctor two or three days ago. My leg suffers a lot. I have a feeling it's from the Haldol shots. I don't want another shot. I haven't talked about this with my doctor. I worry about my heart. I take heart medication, but my blood pressure is good. *(Consumer did not give permission to use name.)*

My medical doctor is a nice guy. I see him every six months or so.

I'm grateful for all the free medical stuff. I take vitamins just because they are free.