ASH INDEPENDENT OVERSIGHT COMMITTEE ACTION ITEMS

IOC Name: ____ DHS ASH IOC_____ Meeting Date: 3/17/2022 Meeting Location: _Conf Call (remote) __ Meeting Time: ___18:05-19:00pm____

Members Present: Laurie Goldstein, Alyce Klein, Dee Putty, Melissa Farling, Barb Honiberg, Kim Scherek, Kay Kunes

Members Absent: Leon Canty, Kim Scherek,

Other Attendees: Tim, Issac, Charles E, Deborah B, Sommer W., forensic units

Agenda Items (Enter the related topic from the IOC's agenda)	General Description of Matters Discussed & Motions Made (Enter the related topic from the IOC's agenda)	Action Item/Assigned To/Due Date All items below are for ASH administration and or other involved agencies
	Write ups are used to communicate conversations and issues. IOC still has questions about why write ups are happening when patients talk about private issues like cases, PSRB, etc. Discussion and questions about the verbiage in the policy and it appeared to be vague and lack specifics. Discussion about how patients may not have access to legal supports or other supports and need to discuss with peers. Could staff communicate to patients that they can have private conversations and they can ask for space and privacy. Jackie agreed that would be ok. Staff did mention that they can't tell what they are talking about if they aren't observing the conversations. Seems to be a policy that's generated by control/intimidation and is perpetuating the themes/feelings. There are mixed messages from employees. Public forum attended by IOC members: Patient said they could not get a notary and had to pay for a notary for court documents. There is no notary at the	What is the policy about private conversations between patients and their lawyers and legal counsel/lawyers? Motion: Laurie Second: Barb Roll Call: Unanimous Can ASH hire a notary or allow a volunteer to be a notary for the patients?

hospital. There needs to be notary resources for patients. A staff member should be paid by ASH to become a notary. This is typical of hospitals to have a notary.	Motion: Dee Second: Melissa Roll Call: Unanimous
ASH2022-0579: Self-injury of patient trying to take eye out with a stick. Patient sent to ER at 1:45. Later same day at 6:00 did the same thing, had to go back to the ER. Report indicated it happened a 3 rd time also. 2-3 days later patient was trying to harm eyes again.	Why wasn't this patient on a 1:1? What would require a patient to be 1:1 or at least line of sight? Motion: Laurie Second: Alyce Roll Call: Unanimous
Was patient getting the recommended follow care for his procedure?	Motion, Dee Second, Ashley Roll Call, unanimous