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TO ALL COALINGA STAFF: ANNUAL/QUARTERLY PHYSICAL EXAMINATIONS; FALSIFICATION OF PATIENTS RECORDS

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To: All current and former Coalinga State Hospital staff,

It is **important** that all staff immediately be made aware that they may be inadvertently placing patient lives in danger by not following Coalinga State Hospital, Administrative Directive #511, as it relates to processes involving Annual Physical Examinations. It has also come to light that there are serious deficiencies involving the documentation in Nursing Weeklies and RN Monthly Assessments, and interdisciplinary notes completed by both current and former staff, which overwhelmingly have failed to capture and document patient participation and/or lack of participation in their Annual Physical Examination processes. It has also been discovered that there is an alarming lack of compliance with Administrative Directive, #509, as it relates to the determination of urgency regarding a patient's new medical condition.

Dr. Lawrence Williamson, on unit-9, at Coalinga State Hospital, was recently discovered falsifying a patient Annual Physical Examination, FORM DSH-C 183, claiming that he saw a patient face to face when he did not, and he copied and pasted stale information into the form. Three other patients on the same unit under Dr. Williamson's care received letters from HIMD indicating that there were no DSH-C 183 FORMS in their chart for the time period of 1/1/20 through 2/1/21, indicating they had not received an Annual/Quarterly Physical Examination during this time frame. (According to Dr. Jeffery Neubarth, in response to an email from Officer Rene Munoz, sent to him on 3/9/20, all Quarterly/Annual Physical Examinations are to be documented on FORM DSH-C 183. In response to an email from Officer Munoz, 3/5/20, Dr. Jonathan Hamrick replied that "exams are done Quarterly and Annually", DPS #19112341.)

Many patients throughout Coalinga State Hospital are currently reporting that they are not receiving Annual Physical Examinations, and many patients in recent years have been reporting inconsistently receiving Annual Physical Examinations, or that they refused. DSHABUSE.ORG has conducted a hospital wide informal survey of patients and staff, and has not found anyone aware that the below specific provisions of Administrative Directive, #511, Section IV, A, 2, 4, a, i and ii, even existed which reads as follows:

If the patient refuses any part of the Physical Exam, 3 attempts shall be made to complete the exam; one attempt shall be made daily for three consecutive days. Following three refusals by the patient, a referral to the TxT shall be made. The TxT shall address the refusals under the appropriate Focus 6 of the TxP within the current status. In the event a patient refuses any portion of the Annual Physical Exam, the remaining portions of the history and physical form must be completed by documenting observations made during the time spent encouraging the patient to permit the exam. Observations include, but are not limited to, wounds swelling, extra ocular movements, voice sounds, presence of teeth, distended neck vessels, gait, posture, abnormal facial or extremity movement, skin color, nutritional status, visible skin observations.

DSHABUSE.ORG through its survey over the last few weeks of staff and patients could not find anyone aware of these procedures ever being followed or documented in a patient's Interdisciplinary Notes, nor is anyone ever aware of this type of information being captured in a patient's Nursing Weeklies, or RN Monthly Assessments. DSHABUSE.ORG knows that

there are many wonderful and caring staff that do not intend to endanger patient lives or neglect their care; it is well known that the majority of staff actions and documentation are driven by directives from Administration and Program management which are beyond their control. Many staff are aware that patients are not receiving their Annual Physical Examinations, that procedures are not being followed, however they are afraid to speak out about it.

Whatever you feel about the patient population at Coalinga State Hospital, this silence should not be allowed to continue as it relates to Annual/Quarterly Physical Examinations of patients. All current and former Coalinga State Hospital staff are mandated reporters by law, as well as Administrative Directive, #976, and need to be concerned about their personal liability. Due to the fact that DSHABUSE.ORG appears to have substantiated that there is wide spread discrepancies in the accuracy of patients medical records, we believe that this has serious implications on previous death investigations (which rely in part on the accuracy of the patients medical record). Furthermore, it appears that there is an ongoing practice at Coalinga State Hospital to not take Annual/Quarterly Physical Examinations seriously, or treat them as a priority, or wait until patient medical conditions become symptomatic and/or life threatening.

DSHABUSE.ORG is respectfully requesting that you take immediate steps in your area of employment and patient care to ensure that all aspects of Administrative Directive, #511 are fully implemented. In addition, it is requested that you contact **Richard Diaz** at **Disability Rights California** with any information you have regarding the failure of patients to receive appropriate care and treatment regarding their Annual/Quarterly Physical Examinations (Richard.Diaz@disabilityrightsca.org - (213) 213-8127). Mr. Diaz is part of the **Investigations Unit**.

DSHABUSE.ORG through its survey has also discovered serious violations regarding patients Sick Call procedures which are mandated pursuant to Administrative Directive, #509, which require the Registered Nurse to confer with the doctor every time a patient is placed on sick call to determine the level of urgency: Urgent, Emergent, or Non-urgent. In formal reports are that this is apparently never being done. As a result, Registered Nurses, are making their own independent decisions, often on weekends and holidays, about the urgency of a patient's new medical condition, even those involving pain, without consulting a doctor as mandated by this Administrative Directive. This has resulted in patients undue pain and suffering, when a doctor who might have been consulted during off-hours would have had the patient summoned to the Coalinga State Hospital, Emergency Room (UCR). Any staff with information regarding this practice should similarly contact their area supervisors to insist that the provisions of Administrative Directive, #509, be followed. Furthermore, Richard Diaz, with Disability Rights California should also be contacted by staff who have information on this issue.

Staff who have information on any of these issues are also encouraged to contact: **Kerry Klein, at Valley Public Radio, (559) 424-3282, kklein@kvpr.org** or **Nadia Lopez, at the FRESNO BEE, (559) 417-0098, nlopez@fresnobee.com**. (Both Kerry and Nadia would appreciate hearing from any staff who have credible information on these issues even if you are afraid to fully identify yourself).

Thank you for your time and attention to this matter, and to all of the great caring staff who have come to Coalinga State Hospital to do their best on behalf of the patients.

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