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**Egyptian Regional Human Rights Authority
Chester Mental Health
Report of Findings
Case #21-110-9020
November 18, 2022**

The Egyptian Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission voted to pursue an investigation of Chester Mental Health after receiving the following complaints of possible rights violations:

Complaints:

1. Inhumane care due to lack of outside time

If the allegations are substantiated, they would violate protections under The Mental Health and Disabilities Code (405 ILCS 5/2-102 and 405 ILCS 5/2-100).

Complaint Summary: The complaint alleges that patients of Chester Mental Health are treated inhumanely due to lack of outside time. Allegedly, patients on all units do not get to go outside even when the weather is not a factor.

Interviews:

The HRA interviewed staff of Chester Mental Health Center. Staff stated that Chester has courtyards for residents to use to enjoy the outdoors. Staff stated on weekdays the courtyards are used regularly. However, security staffing on the weekends have created challenges which results in outside activities not occurring. Staff stated in May 2021 Chester was undergoing some construction. Staff stated they needed some construction space which caused residents to use the yard/gym with Covid-19 infection control precautions in place and approval. Additionally, some outside construction limited the use of the big yards that Chester has available for residents. However, staff stated the courtyards have been continuously utilized if weather permitted.

Staff stated typically an Activity Therapist (AT) along with several Security Therapy Aides (STA) are required when residents are using the yards. However, on the weekends Chester typically has shortened security staff and at times no activity therapist. Due to the staff shortages, residents cannot go out to the yards. When no AT is present, security staff can still take residents outside, but an incident report should be completed due to union bargaining unit contracts and job descriptions. Staff were not sure if any incident reports were completed, during the timeframe the HRA reviewed, when residents could not go to the yards due to not having an AT working.

Staff stated when a unit was quarantined due to COVID-19 the residents did not go outside. Staff stated they followed documentation provided by the Illinois Department of Public Health (IDPH) with guidance from the CDC (Centers for Disease Control) revised on 4/29/2021 and Interim Policy and Procedure.

Policy Review:

The HRA reviewed Chester Mental Health Center's policy titled "Use of the recreational courtyard" which states "All patients at Chester Mental Health Center will be provided opportunities to participate in activities in the Recreational Courtyard. The Security staff ratio to patient is 1:12 with the maximum number of patients allowed in the courtyard being 48. Activity therapy staff shall not be counted in the ratio. Minimum coverage for a courtyard session will be three security therapy aides and an activity therapist...The unit security staff shall make the day-to-day decision if a patient may use the courtyard based on the behavior of the patient on the module. If the patient is on the current list to attend the courtyard and the unit security staff make a decision to exclude the patient from courtyard attendance then the STA-II (security therapy aide) will enter a progress note in the patient's clinical file stating the reason for the patient being excluded from the courtyard for that time period...All patients on green or yellow level will be eligible to use the courtyard unless otherwise specified by the treatment team...A unit may decide to use the courtyard at a time rather than the regularly scheduled time with prior notification and prior approval from the Activity Therapy Supervisor; or in the Activity Therapy Supervisors absence, the Director of Rehabilitation Services, Chief of Security, or the STA-IV's (security therapy aide). Monthly attendance data will be submitted to the Activity Therapy Supervisor for the courtyard used by the Unit Activity Therapy Coordinator."

The HRA reviewed Chester Mental Health Center's policy titled "Use of Recreation Yard" which states "Patients at Chester Mental Health Center will have the opportunity to participate in outdoor activities to promote health an in a safe and secure yard area. South yard: the yard area farthest from the service road and back of the CMHC (Chester Mental Health Center) building. North yard: the yard area closest to the service road and CMHC building. The Unit STA II (security therapy aide) is responsible for notifying the security shift supervisor and outside security when patients are scheduled to use the yard. A log will be kept by an activity therapist of each unit to record the following: Number of times yard is offered, and explanation of why yard was not held, number of patients that attended the activity. The shift supervisor may cancel yard activities due to: Inclement weather, unsafe grounds conditions, unexpected security personnel shortage, other security or safety issues. Special yard activities will take precedence over unit yard activities. A minimum of 24-hour notice will be given to the unit by the director of activity therapy when such special activities are scheduled. The shift supervisor will document the rationale for yard cancellations on the daily shift report...when temperature are between 40 degrees wind chill and above 90 degrees heat index, residential units will offer patient's yard a minimum of five days per week. No yard is offered when the temperature is below 40 degrees wind chill. If heat index temperatures are above 90 degrees, the medical director or designee must approve any scheduled yard activities to be conducted...a minimum of three STA's (security therapy aide) and one activity therapist (A.T) are required to staff a yard activity, if no A.T is available then the minimum staffing will be 4 STA's. If unit modules are properly staffed, additional staff will also be deployed to the yard. If the minimum staffing standard cannot be met, the unit STA II will notify the shift supervisor requesting deployment of detail staff for the yard activity. It is preferred that at least one activity therapist be available for each yard session. Normally, activity therapists assigned to the residential until will accompany the patient to the yard to provide organized activities. In the event no activity therapist assigned to the residential unit is present, an activity therapist from another unit or program will be assigned to accompany patients to the yard to provide organized activities. If due to holidays, special activity events, or other circumstances no activity therapist is available for yard, yard may be conducted without an activity therapist present. In such instances, the shift supervisor will be notified of the situation, and the unit STA II will prepare an Incident Report explaining the circumstance which required yard to be conducted without an activity therapist present."

The HRA reviewed the Illinois Department of Human Services "Interim Policy and Procedure: COVID-19 Testing and Quarantine/Isolation Plan for State-Operated Psychiatric Hospitals" states "Positive case identified in patient or staff. Testing: conduct one round of facility wide testing (all staff and patients) within 3 days of first positive case. Staff and patients who have tested negative will be retested every 3 to 7 days until the testing identifies no new cases of COVID-19 infection among patients or staff for a period of 14 days. The clinical judgement of the testing of the treating physician should guide decisions as to when exactly tests will be performed for patients. If a test is positive, the patient will be placed in isolation per facility protocol. A staff member who tests positive will immediately be sent home and follow guidelines for self-isolation. Once 14

days without a positive has been attained, all staff (no residents) will be tested two times per month until 28 days have been attained without a positive test result. At 28 days without a positive result, screen testing for employees as described above will resume. Transmission Based Precautions: The unit is considered in quarantine status. Pause/suspend all activities on the impacted unit. Staff entering and working on a quarantine unit will wear N95 and eye protection. All efforts will be made to restrict staff movement between units to the extent possible. Quarantine measures include quarantine remains in affect for all patients until the results of first round of testing is known. Patients are restricted to their rooms and units. Communal dining and social activities are paused/suspended until results of first round of facility wide testing are obtained. Indoor visitation on affective unit is paused/suspended except those required by the federal disability right laws until the results of first round of facility wide testing are obtained. Virtual visits are still allowed...”.

Records Review:

The HRA reviewed the weekly schedules for the courtyard, north recreational yard and south recreational yard for all units at Chester. Unit A is scheduled to go outside Monday to Sunday anywhere from 3-6 times per day. Unit B is scheduled to go outside Monday to Sunday anywhere from 2-7 times per day. Unit C is scheduled to go outside Monday to Sunday anywhere from 3-8 times per day. Unit E is scheduled to go outside Monday to Sunday anywhere from 2-6 times per day. Lastly, unit F is scheduled to go outside Monday to Sunday anywhere from 2-4 times per day.

The HRA reviewed Chester’s “yard log book” for March 2021. Unit A went outside 15 total days, once per day. There was one day that the residents went outside twice in one day. There was 17 days that the residents did not go outside. There was 5 consecutive days that residents did not go outside. Some of the reasons listed for the days residents did not go outside were: “too cold”, “no AT worker”, “rain”, “wet”, “contractors in yard”, and “cold”. Unit B went outside a total of 10 days in March 2021. Unit B did not go outside 21 days of the month. Due to the unit being on quarantine there was 12 consecutive days residents on unit B did not go outside. Other reasons listed for not going outside were: “weather”, “rain”, and “AT off”. Unit C residents went outside 16 total days for the month. There were 15 days unit C residents did not go outside. With 6 of those days in a row. Reasons listed for not going outside were: “cold”, “no AT staff”, “rain”, “threat of rain”, and “wet”. Unit E went outside a total of 10 days in the month of March. They did not go outside 21 days. There were 6 consecutive days they did not go outside and then there were 7 consecutive days they did not go outside later in the month. There were no reasons listed for not going outside. Finally, unit F went outside a total of 10 days in March 2021. Residents in unit F did not go outside a total of 21 days. There were 14 consecutive days the residents did not go outside due to quarantine. Other reasons listed for not going outside included “rain”, “not scheduled-canceled by admin”, and “gym at 0845”.

The HRA reviewed Chester’s “yard log book” for May 2021. Unit A went outside 19 total days with 5 of the days including two outside times. There were 12 days the residents did not go outside. The reasons listed for not going outside were: “staff shortage”, “no AT”, “rain”, and “too cold”. The residents of unit B went outside a total of 13 days in May. There was 14 days the residents did not go outside. The residents were in quarantine for 9 consecutive days. Other reasons the unit did not go outside was “rain” and “weather”. Unit C went outside a total of 18 days. Unit C did not go outside 10 days in May. The reason listed was “wet”, “rain”, and “no security staff”. The HRA did not receive any logs for Unit E for the month of May 2021. Unit F went outside a total of 18 days. There was 11 days the unit did not go outside. The reasons listed for not going out included: “short STA”, “rain”, “?”, and “unknown”.

The HRA reviewed Chester’s “yard log book” for June 2021. Unit A went outside 10 total days, once per day. There was 20 days they did not go outside. The reason listed for not going outside was “rain”, “canceled mushrooms” [sic], “no AT”, “heat”, “meals late”, and “short staff”. Unit C went outside for 12 days and did not go outside for 17 days. The reason for not going outside was “wet”, “rain”, “too hot”, “courtyard closed”, “big yards no security”, and “no AT”. The HRA did not receive any logs for Unit E for the month of June 2021. Unit F went outside a total of 6 days and did not go outside for 22 days in June. There was 16 consecutive days the

unit residents did not go outside. The reasons for not going outside was “helping with B vending”, “wet”, “no AT”, “vending”, “rain”, “issue on unit B”, “quarantine” and “heat”.

The HRA reviewed Chester’s “yard log book” for July 2021. Unit A went outside 10 total days but did not go outside 21 days in July. There were 5 consecutive days unit A residents did not go outside. The reasons for not going outside were “rain”, “short staff”, “no AT”, and “heat”. Unit B went outside 4 days and did not go outside 22 days in July. There was 17 consecutive days the residents did not go outside. The reasons for not going outside were “quarantine”, “too hot”, and “rain”. Unit C went outside 10 days and did not go outside for 21 days. There was 10 consecutive days the residents did not go outside. The reason’s listed for not going outsider was “wet”, “?”, “mowing then too hot”, “quarantine”, “no AT”, and “rain”. Unit E residents went outside a total of 3 days in July. They did not go outside for 28 days in July. There was 12 consecutive days they did not go out followed by 16 consecutive days. The reasons for not going outside was “weather”, “quarantine”, and “staff shortage”. Finally, unit F went outside a total of 9 days in July. They did not go outside a total of 22 days. The reasons for not going outside was “rain”, “heat”, “unknown”, “no AT”, and “quarantine”.

The HRA reviewed Chester’s “yard log book” for June 2022. Unit A went outside 15 days but did not go outside 15 days. There was 8 consecutive days the residents did not go outside. The reasons for not going outside were “heat index”, “back from breakfast after 9:45. Heat index after that”, “rain”, and “no AT worker”. Unit B went outside 12 days and did not go outside 18 days. The reasons provided were “rain”, “rain/cookout”, “hot”, “too hot”, and “no staff”. Unit C went outside a total of 15 days and did not go outside 15 days. The reason for not going outside was “hot”, “no staff”, “hot/no early morning spots”, “rain”, “no AT”, and “AT’s off”. Unit E went outside a total of 12 days and did not go outside 12 days in June. There was 7 days that there was documentation for unit E. The reason for not going outside was “too hot”, “only time available was too hot”, “? unit AT not here, couldn’t find documentation”, and “no AT”. Unit F went outside a total of 20 days in July. They did not go outside a total of 10 days. The reason listed for not going outside was “yards too wet/still puddles”, “heat”, “rain”, and “no AT”.

The HRA reviewed the log for July 2022. Unit A went outside 11 days and did not go outside 20 days. The reasons for not going outside were “heat index”, “wet/rain”, “construction canceled- No big yards”, “rain”, “rain earlier/only vaccinated”, “heat index/waiting on covid tests”, “no AT staff”, and “covid all 3 modules”. Unit B went outside in July a total of 9 days and did not go outside 21 days. The reason for not going outside was “no staffing”, “heat index”, “rain”, “wet/95 heat index”, “no At”, and “no patient movement”. Unit C went outside a total of 12 days in July. They did not go outside a total of 17 days. The reasons listed for not going outside was “too hot/unit AT staff wasn’t here”, “rain”, “excessive heat warning”, “heat advisory”, “rain/wet”, “hot-real temp 94 at 10”, “no AT”, “covid protocol- couldn’t leave until all patients had been tested and received results. Did not start testing til after 1pm”, “Had not been told if we could go to programs until after 12 then the heat index was 91 per MSN weather”. Unit E went outside a total of 7 days but did not go outside a total of 24 days in July. The reasons listed was “weather” and “no AT”. Finally, unit F went outside a total of 14 days in July and did not go outside a total of 16 days. The reasons listed for not going outside was “no AT”, “heat index”, “rain/wet”, “short STA staff”, “unclear info from [staff] so charge aid called [another staff]. The [other staff] cancelled all patient movement for program”, attempted ex low staff (STA) each attempt”, “unknown”, and “morning unknown/afternoon heat”.

Conclusions

Complaint 1. Inhumane care due to lack of outside time

The Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102) states “(a) A recipient of services shall be provided with adequate and humane care and services in the least restrictive environment, pursuant to an individual services plan. The Plan shall be formulated and periodically reviewed with the participation of the recipient to the extent feasible and the recipient's guardian, the recipient's substitute decision maker, if any, or any other individual designated in writing by the recipient. The facility shall advise the recipient of his or her

right to designate a family member or other individual to participate in the formulation and review of the treatment plan.”

The Mental Health and Developmental Disabilities Code (405 ILCS 5/2-100) states “(a) No recipient of services shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of the receipt of such services.”

Chester has 3 outdoor areas for residents to enjoy. There is the courtyard, North yard and South yard. The HRA reviewed Chester’s schedule for outside time for all units for all 3 yards. The schedule indicated that all units are to go outside Monday-Sunday anywhere from 2-8 times per day. Additionally, staff stated residents go outside regularly on weekdays, but weekends are difficult due to staff shortages. However, The HRA reviewed the “yard log book” for the months of March, May, June, July 2021 and June and July 2022 for all five units at Chester. A majority of the units did not go outside most days of each month. There were some months that a unit may not go outside for 20 days of the month. The reasoning for not going outside varied but a majority of the reason was “weather”, “rain”, “quarantine” and “no AT (activity therapist)”. Chester’s policy titled “Use of Recreation Yard” states “It is preferred that at least one activity therapist be available for each yard session...In the event no activity therapist assigned to the residential unit is present, an activity therapist from another unit or program will be assigned to accompany patients to the yard to provide organized activities. If due to holidays, special activity events, or other circumstances no activity therapist is available for yard, yard may be conducted without an activity therapist present...”. However, there are several days listed on the yard logs that state the units did not go to the yards due to being short staffed or not having an activity therapist. Therefore, the Egyptian Human Rights Authority concludes that the consumer’s rights were violated and, therefore, the complaint of inhumane care is **substantiated**.

The Human Rights Authority makes the following **recommendations**:

- 1. Chester Mental Health Center follow their policy titled “Use of Recreation Yard” by ensuring units go to the yards without an activity therapist if one is not available. Please provide the HRA with the yard logs for September and October, 2022 to demonstrate this is now occurring.**
- 2. Chester Mental Health Center re-train staff on the policy “Use of Recreation Yard” and provide the HRA with evidence of the training.**
- 3. Chester Mental Health Center ensure they are following The Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102) by providing “adequate and humane care and services in the least restrictive environment” to all residents by allowing them to go outside a minimum of 5 days per week as per policy “use of recreation yard.”**

The HRA was concerned with the “use of recreational yard” policy which broadly states that “staff shall make the day-to-day decision if a patient may use the courtyard based on the behavior of the patient on the module.” The HRA **strongly suggests** that this policy be reviewed, and more specific guidelines for staff be included in the policy as to what type of behavior should prohibit someone from attending yard.