



FOR IMMEDIATE RELEASE

HUMAN RIGHTS AUTHORITY-NORTH SUBURBAN REGION

REPORT 22-100-9012
ELGIN MENTAL HEALTH CENTER

Introduction

On February 1, 2022 the North Suburban Regional Human Rights Authority opened an investigation into care and services provided to a patient in Elgin Mental Health Center (EMHC).

The specific complaint under investigation and its related statutes is that EMHC discharged the recipient to the county jail without forwarding his personal belongings to his family as requested. Upon readmission to EMHC it was discovered that EMHC had reportedly retained the recipient's missing possessions, but that most of them had been misplaced or damaged. (405 ILCS 5/2-104.)

Elgin Mental Health Center (EMHC) is a State Psychiatric Hospital run by the Illinois Department of Human Services (IDHS). The hospital currently has 366 forensic beds and 42 civil beds. Clients receiving services at EMHC's Forensic Treatment Program have been remanded by Illinois County Courts to the IDHS under statutes finding them Unfit to Stand Trial (UST) or Not Guilty by Reason of Insanity (NGRI).

Method of Investigation

To proceed with this investigation, the HRA reviewed the recipient's clinical record (with authorization) from the service provider and obtained additional case information through an interview with provider staff including a social worker, a nurse, the Quality Manager, and the EMHC Director .

Policy Review

The HRA reviewed the following relevant policies and procedures, all of which were found to be in alignment with the Mental Health and Developmental Disabilities Code (the Code), 405 ILCS 5/:

234 Deposit of Cash/Small Personal Property Items (Revised 6/8/05)

- *When staff members receive valuables at the time of admission or during hours in which the Trust Fund office is closed, they shall be deposited in the CPS Program Administration safe. Personal Property Receipt (DMHDD-1), and Trust Fund Deposit Authorization (DMHDD-623), shall be completed, and the transaction entered on the "Itemization of*

Deposits” into Trust Fund/Personal Property (TF-CA-100681), form kept by CPS administrative staff.

235 Patient Possession and Use of Money and Valuable

- *When patients are discharged, all of their lawful property in the custody of the hospital is to be returned to them, or to their guardian if any. Patients may designate family or others to receive their money/valuables. It is the social worker’s responsibility to see to it that all money and valuables are taken with the patient at the time of discharge or transfer to another facility. If they are not, every effort shall be made to deliver said property to the patient. Property remaining after two years shall be disposed of in accordance with the Illinois Administrative Code.*

236 Money and Valuables: Receipt and Storage

- *All other property is inventoried upon arrival on the treatment unit. Money and valuables obtained by the patient after the time of admission must be itemized by treatment unit staff. It is imperative that the unit staff complete an inventory of property other than money and valuables as soon as possible after admission, with the assistance of the patient. Each individual program area will develop its own procedures for the reception of and documentation regarding property.*

240 Patient Clothing

- *The patient’s clothing shall be inventoried by unit staff at the time of admission, semi-annually and at unit transfer and discharge. Unit staff shall record the inventory on a Patient Clothing Inventory (Male) form, DOC 1465M, or a patient Clothing Inventory (Female) form, DOC 1465F. The completed inventory record shall be distributed as noted on the forms. If unit staff are notified of clothing additions, they shall update the inventory . . . At the time of discharge unit staff shall inventory all clothing and accessories from the patient’s wardrobe and unit storage, using DOC 1465M or DOC 1465F. A copy of the form shall accompany the patient, if he or she is being placed in a community facility. The form is to be signed by the patient. If the patient refuses or is unable to sign his/her name, two staff witnesses must sign. This form shall be retained in the clinical record. A diligent effort shall be made to send all clothing with the patient at the time of discharge and to return the patient’s clothing to them if any is found after discharge. If clothing belonging to the patient is found after a planned discharge, the unit staff shall first try to arrange delivery to the patient (see below). If that is unsuccessful, then the authorized correspondent shall be contacted. Following the above attempts to have clothing picked-up or delivered, any clothing unclaimed for thirty days after discharge shall be considered abandoned.*

Case Review

According to the case record the recipient of services was admitted to Elgin Mental Health Center’s Forensic Treatment Program on June 19, 2019. The record contains an Admission inventory dated June 19, 2019, signed by the recipient and the “receiving Unit representative”. The items inventoried upon initial admission are a belt, blue jeans, a cap/hat, a winter coat, two long sleeved shirts, a pair boots, a book, miscellaneous paper, a bottle of lotion, and two bars of soap. The

record also contains a “Personal Property Receipt” form for the recipient’s valuables dated June 19, 2019 and signed by the recipient and the employee who accepted the property. The items listed on this form are an Illinois Driver’s License, a Visa Debit Card, a Mastercard debit card, Keys, a black cell phone, and a headphone adapter.

The recipient was discharged to the County Jail on February 10, 2020, and according to the recipient his property was not forwarded to his family upon discharge as had been requested. According to policy 240 Patient Clothing, *“At the time of discharge unit staff shall inventory all clothing and accessories from the patient’s wardrobe and unit storage, using DOC 1465M. A copy of the form shall accompany the patient, if he or she is being placed in a community facility . . . This form shall be retained in the clinical record.”* Such form was not found in the clinical record, and the record contains no evidence that the social worker made efforts to deliver the recipient’s property to the recipient or his family. A social worker told the HRA that she was under the impression that the recipient’s possessions were all sent to the county jail with him upon discharge, but mentioned that there is no chain of inventory between EMHC and the County Jail to track items when a recipient is transferred to the county jail.

The recipient was readmitted to EMHC on July 22, 2020. The record contained the following complaint from the recipient dated July 29, 2020: *“When I left in February 2020, I was told my personal belongings would be shipped home. My family had called about my belongings and were told they were sent to the county jail with me. I been given the run around . . . about my personal belongings which contained legal mail, letters, clothes, hygiene, and other important things.”*

The record contained another complaint from the recipient about missing personal property dated August 5, 2023: *“Before I left [for the county jail] I was not allowed to take my personal belongings with me. I left behind clothes, shoes, legal letters, and books. My family called EMHC numerous times to retrieve my belongings but were told they were sent with me to the county jail by a social worker named [redacted]. I managed to make a phone call from the county jail and spoke to [the social worker] . . . [The social worker] told me security was supposed to inform her that my clothes were left behind so my family can pick them up . . . When I asked about my personal belongings [upon readmission to EMHC] I was told they were destroyed.”*

The provider responded to the recipient on the form: *“We do not destroy that stuff.”*

The social worker mentioned in the above complaint was not still employed with EMHC at the time of the interview with the HRA, and other staff were not able to comment on the complaint.

The record contains three more complaints dated August 20, August 24, and August 28 2020 requesting that staff help him locate his cell phone, driver’s license, and bank card. Another complaint from the recipient dated September 10, 2020 indicates: *“My issues [with missing personal property] are not being looked into.”* Provider staff told the HRA that they were not sure if any staff looked into finding the recipient’s missing items after the complaints were made. The record contains additional personal property paperwork, some of which are not completed correctly, e.g. inventory forms that do not indicate the type of inventory action and/or are not signed by the recipient as required by EMHC policy.

In March 2022, after this investigation had been opened, the recipient complained to the HRA that he was transferred to a new unit and his belongings placed in storage for the move. Upon requesting his clothing from storage (specifically boots, a belt, and a sweatshirt) he was told that these items had also gone missing.

The HRA found EMHC's attitude towards patient property and values to be surprisingly lax. Even a nurse admitted in the interview with the HRA that the facility "could do better". The director of EMHC told the HRA that their patient handbook states that they are not responsible for patient property and said that staff are not responsible for items on the unit after a patient discharges. This is incorrect according to EMHC's policy: 235 Patient Possession and Use of Money and Valuables which states: *"It is the social worker's responsibility to see to it that all money and valuables are taken with the patient at the time of discharge or transfer to another facility. If they are not, every effort shall be made to deliver said property to the patient."* That policy perfectly aligns with the Code, 405 ILCS 5/2-104 which states: *When a recipient is discharged from the mental health or developmental disabilities facility, all of his lawful personal property which is in the custody of the facility shall be returned to him.*

Findings

This case investigation found that the complaint that EMHC violated the Code, 405 ILCS 5/2-104, by not forwarding the recipient's personal property upon discharge and misplacing and damaging his retained property is **substantiated**. This investigation found that the provider also violated their own policies related to receipt, storage, and transfer of patient property and valuables.

Recommendations

- Train staff on EMHC policies and procedures relating to receipt, storage, and transfer of patient property and valuables and on correctly filling out inventory forms.
 - o Provide the HRA with proof of trainings.
- Contact the recipient and his family to accept responsibility for the recipient's lost items and attempt recompensation for said items.

Suggestions

Due to the fact that transfers between the County Jail and EMHC are common occurrences for the recipient population, the HRA suggests that EMHC create some type of a chain of inventory to document when possessions are sent from the hospital to the jail. This would assist service recipients, as well as limit any potential liability for EMHC.

RESPONSE

Notice: The following page(s) contain the provider response. Due to technical requirements, some provider responses appear verbatim in retyped format.



NORTH SUBURBAN REGIONAL HUMAN RIGHTS AUTHORITY

HRA CASE NO. 22-100-9012

PROVIDER: ELGIN MENTAL HEALTH CENTER

Pursuant to Section 23 of the Guardianship and Advocacy Act (20 ILCS 3955/1 *et seq.*), we have received the Human Rights Authority report of findings.

IMPORTANT NOTE

Human Rights Authority reports may be made a part of the public record. Reports voted public, along with any response you have provided and indicated you wish to be included in a public document, will be posted on the Illinois Guardianship and Advocacy Commission Web Site. (Due to technical requirements, your response may be in a verbatim retyped format.) Reports are also provided to complainants and may be forwarded to regulatory agencies for their review.

We ask that the following action be taken:

We request that our response to any recommendation/s, plus any comments and/or objections be included as part of the public record.

We do not wish to include our response in the public record.

No response is included.

Michelle E. [Signature]
NAME

Chief Executive Officer
TITLE

March 21, 2024
DATE



JB Pritzker, Governor

Illinois Department of Human Services

Grace B. Hou, Secretary

Elgin Mental Health Center
750 South State Street • Elgin, IL 60123

Ms. Mariah Balaban
Human Rights Authority
9511 Harrison Street, W-335
Des Plaines, IL 60016-1565

HRA# 22-100-9012

March 8, 2024

Dear Ms. Balaban:

Thank you for your letter regarding your findings. EMHC agrees that it is important that patients have access to their belongings, and that an appropriate inventory control is completed for each patient.

Elgin Mental Health Center is providing retraining to all security, nursing and social work staff who are involved in the inventory process on EMHC Policy 234 Deposit of Cash/Small Personal Property Items, 235 Patient Possession and Use of Money and Valuables, 236 Money and Valuables: Receipt and Storage, and 240 Patient Clothing. Evidence of retraining will be sent to HRA upon completion.

Elgin Mental Health Center has contacted the recipient and are working on compensating them for the items lost. This evidence will be provided upon completion.

Please feel free to include our response with any public release of your Report of Findings.

Respectfully,

Michelle Evans, DSW, MBA
Chief Executive Officer