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North Suburban Human Rights Authority  
Report of Findings  
Alexian Brothers Medical Center  
**HRA #08-100-9014**

**Report Summary:** The Physician documented that the consumer reported severe depression and wanted to die due to his pain; a petition and a certificate were subsequently completed, the HRA did not substantiate the allegation that the consumer was, without cause, sent to another hospital for mental health services. The HRA found nothing to indicate that the Social Worker's assessment was fabricated; the allegation was unsubstantiated. The HRA could not discount the claim that the Physician was ill-tempered to the consumer, however, nothing was found to support the claim; the allegation was unsubstantiated. **The HRA's public record on this case is recorded below.**

The North Suburban Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation of alleged rights violations at Alexian Brothers Medical Center. On October 2, 2007, the HRA notified Alexian Brothers Medical Center of its intent to conduct an investigation, pursuant to the Guardianship and Advocacy Act (20 ILCS 3955). The complaint investigated was that a consumer went to the hospital for medical reasons and was, without cause, subsequently sent to another hospital for mental health services. It was stated that the assessment made by the Social Worker was fabricated and that the Physician was very ill-tempered. If found substantiated the allegation would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102, 5/3-600 et seq.).

The HRA conducted an on-site visit in December 2007. While at the hospital, the HRA interviewed the Social Worker that completed the assessment, the Physician that treated the consumer and a representative from the Risk Management Department. The HRA interviewed the consumer whose rights were alleged to have been violated via telephone and reviewed, with written authority, his clinical record. Also reviewed were hospital policies relevant to the allegations.

**Background**

According to the Alexian Brothers Medical Center website, Alexian Brothers Medical Center is a 320-bed community hospital located in Elk Grove Village. The hospital has more than 750 physicians on the medical staff representing over 60 medical and surgical specialties. Alexian Brothers Medical Center has earned the Joint Commission's Gold Seal of Approval<sup>TM</sup> for Disease-Specific Certification as a Primary Stroke Center, in Heart Failure, Acute Myocardial Infarction, Bariatric Surgery, Joint Replacement and Oncology.

**Findings**

The consumer reported that on the morning of April 25, 2007, he awoke to acute pain and went to the emergency department. He stated that many tests were conducted and medication was subsequently given that did alleviate some of the pain. The consumer reported that the medical problems somehow turned into mental health problems and a Social Worker conducted an assessment. The consumer stated that he told the Social Worker that he had suicidal thoughts over 26 years ago, but that he was not actively suicidal. The consumer reported that the Social Worker's assessment contained outright lies and did not show that the suicidal ideation was over 26 years ago. The consumer also reported that the emergency department Physician was very ill-tempered; no specific examples were given.

According to the clinical record, the consumer arrived (via private auto) to the hospital at about 7:30 a.m. on April 25, 2007. The nursing triage narrative documented that the consumer presented with nausea, swelling to his ankles, left knee pain, wrist pain and a headache; the consumer stated that he was very depressed. The consumer was described as awake, alert, cooperative, oriented and with an affect that was calm and appropriate; it was noted that he was speaking coherently and that he denied wanting to harm himself or others. The consumer was medically assessed via labs and radiology.

The Physician documented that the consumer complained that he was horribly depressed and admitted to thoughts of suicide in the past, but that he had no current thoughts or plan of how to commit suicide. The Physician further documented that the consumer had a remote history (15+) years of major depression and three suicide attempts via medication and overdose, which were resolved after ECT (electroconvulsive therapy). It was noted that the consumer believed that his chronic pain and nausea were causing the depression. The Physician documented that a behavioral health assessment was indicated.

The behavioral health assessment summary documented that the consumer was brought to the hospital due to mysterious pains in his joints and throughout his body; all medical tests reported negative findings. It was documented that the consumer stated that he had suicidal ideation and wishes, but denied intent unless he could "just push a button." The consumer reported that he wanted someone to end his life for him. It was noted that the consumer had a history of severe depression with ECT treatment; three previous suicide attempts -two overdoses and one attempt by walking into traffic. It was documented that the consumer was very isolated and he had no identified support system; he denied homicidal thoughts and psychosis. The on-call Psychiatrist recommended in-patient services. It was documented that the consumer was not happy about the recommendation. The petition was completed around 3:00 p.m. and the certificate at about 3:30 p.m. The petition asserted that the consumer stated that he has suicidal thoughts, and wishes he could just push a button to die. The petition further asserted that the consumer stated that he no longer wished to live because he had no nearby family, no friends and a mysterious illness. The certificate asserted that the consumer admitted to severe depression due to four months of chronic pain and that the consumer had seen multiple doctors for this pain without etiology. The certificate further documented that the consumer was frustrated, wants to die, and he has a history of three previous suicide attempts. The consumer was transferred to a nearby behavioral health hospital.

Behavioral health notes documented that per the consumer's request, a community hospital that provides behavioral health services was contacted for the in-patient admission. At about 3:30 p.m., it was learned that a bed was available at this hospital and paperwork was processed to this hospital. About two hours later, the behavioral health notes documented that the consumer's significant other called the Elk Grove Police Department, reporting that the consumer was being held against his will. The police spoke to the consumer and the behavioral health specialist about the claim. The police reported that the significant other was very worked-up; the police had the consumer sign a release and explained to the significant other the situation. The police advised the

behavioral health specialist that should they (consumer and significant other) cause a disturbance, the police were to be called.

At the site visit, the Physician explained that the consumer entered the hospital with complaints of pain and medical tests were run to determine its cause. When nothing was found and the consumer reported that he had been depressed, the physician contacted a behavioral health representative for a further assessment. The Physician stated that although nothing was found medically, depression can cause the person to experience very real, unexplained pain and that the depression needs to be addressed so that the pain might subside. It was stated that although this consumer did not want to be there, they were concerned for his safety and could not let him go. The Behavioral Health Specialist concurred with the Physician's assessment, in that the consumer was depressed and he needed inpatient services for his safety.

Regarding the allegation that the Physician was ill-tempered, the Physician stated that he treats everyone with respect. He stated that he did not believe that he was ill-tempered with the consumer. He did say that the consumer's significant other was very disruptive and had this person made a claim, the Physician would take it with a *grain of salt*.

The hospital's Transfer of Psychiatric Patients to Mental Health Facilities from the Emergency Department policy states that its purpose is to assure a safe and appropriate transfer of psychiatric patients from the Emergency Department to another facility. The policy states that all patients transferred directly from the Emergency Department to Mental Health facilities must be transferred by ambulance or police vehicle. This applies even if the patient signs a voluntary admission form. The policy states that the original petition and certificate will accompany the patient during the transfer and be given to the receiving Mental Health facility. A copy will remain with the Emergency Department chart.

### **Conclusion**

Pursuant to the Mental Health and Developmental Disabilities Code, Section 2-102, a recipient of services shall be provided with adequate and humane care and services in the least restrictive environment.

Under Sections 3-601 and 3-602, a person who is suspected of needing inpatient psychiatric care may be held for evaluation involuntarily by a completed petition that asserts the reasons why and may be admitted involuntarily by a completed certificate that includes clinical justifications.

Pursuant to the Mental Health and Developmental Disabilities Code, Section 3-604, "No person detained for examination under this Article on the basis of a petition alone may be held for more than 24 hours unless within that period a certificate is furnished to or by the mental health facility. If no certificate is furnished, the respondent shall be released forthwith." Based on documentation in this record, those required procedures were followed.

The Physician documented that the consumer reported severe depression and wanted to die due to his pain; a petition and a certificate were subsequently completed, and the HRA does not substantiate the allegation that the consumer was, without cause, sent to another hospital for mental health services. The HRA found nothing to indicate that the Social Worker's assessment was fabricated; the allegation is unsubstantiated. The HRA cannot discount the claim that the Physician was ill-tempered to the consumer, however, nothing was found to support the claim; the allegation is unsubstantiated.