

FOR IMMEDIATE RELEASE

North Suburban Human Rights Authority Report of Findings Elgin Mental Health Center HRA #08-100-9017

Case Summary: Although the HRA could not discount the allegation that staff members make negative comments about the consumers loud enough so that the consumers can hear them and they have laughed at the behavior of some consumers, nothing was found to support the claim; the allegation was unsubstantiated. By their own admission, Center personnel acknowledged that at least once, a staff member used a personal phone on the unit in the presence of consumers- a violation of Center policy; the allegation was substantiated. The HRA's public record on this case is recorded below; the provider's response immediately follows the report.

On November 6, 2007, the North Suburban Regional Human Rights Authority voted to open an investigation of possible rights violations within Elgin Mental Health Center's Community Psychiatrist Services Program (CPS), Jenks Unit. The complaint accepted for investigation is as follows: staff members make negative comments about the consumers loud enough so that the consumers can hear them and they have laughed at the behavior of some consumers. It was also stated that staff members talk on their cellular telephones instead of interacting and or helping the consumers. If found substantiated, the allegations would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-112 and 5/1-102).

To pursue this investigation, a site visit was conducted at which time the allegations were discussed with the unit's Nursing Supervisor, the Program Director and three consumers receiving services. Center policies relevant to the allegations were reviewed.

Background

The Community Psychiatric Service Program provides treatment for voluntary and court ordered patients who are referred by suburban community hospitals and outpatient programs. Each treatment team has a Psychiatrist, a Physician, a Psychologist, Social Workers, Activity Therapists, Mental Health Technicians and Nursing staff. They work together to provide for the assessment, clinical treatment, patient and family education, and therapeutic environment to promote recovery. It is a 75-bed program.

<u>Findings</u>

At the site visit, Center personnel stated that the unit has monthly staff meetings and during these meetings, staff are reminded to treat each consumer with respect and to treat each consumer the way the staff would want his or her family member treated. When asked about staff training, it was stated that employees receive formal training once per year and that in-services are held throughout the year. It was stated that consumers can voice concerns to the treatment team, their caseworker, the unit manager or during the community meetings, which are held twice per day. Center personnel stated that they had not received or heard of an incident(s) of staff members laughing or making negative comments about the consumers. The HRA requested and received copies of the unit's community minutes and copies of the monthly staff meetings. The community meeting minutes did not show that consumers made any reports about staff members. The November staff meeting showed that the unit had been notified of this HRA investigation and noted that staff were not to discuss either their personal lives or a consumer's personal life and that staff are not to be talking on their cell phones in view of the patients.

Regarding the cell phone matter, Center personnel explained that staff members can have their phones on the unit and they are to be used for emergencies only; when an incoming call is received, the staff is to converse in a non-patient area. Each employee must receive prior permission from the supervisor to be able to have his/her phone on the unit. The Supervisor did say that recently she observed a staff member taking on her cell phone with consumers present; the staff received a supervisory letter, meaning that the Supervisor spoke to her and it was understood that should this happen again, formal steps would be initiated. The Supervisor also relayed that she observed another staff receive a phone call and heard this staff tell the caller that he could not talk and terminated the call.

When discussing the allegations with the consumers, the first consumer (who has received services for two months) said that a few staff on the unit are not friendly and act like they would rather be somewhere else. When asked to explain this statement, she was unable to give specific incidents. When asked about the cell phones, this consumer stated that she has seen staff textmessaging on the phones. The second consumer (who has received services for two weeks) said that staff members are *great* and have been *very helpful*; he was very pleased with the staff on the unit. When asked about cell phones, he stated that he has never seen a staff member use a cell phone. The third consumer (who has received services for over a year) said that staff members ignore him like he is not there; he did not explain this further. When asked about staff members using cells phones, he said I don't know- when asked again, would not give a direct answer.

The Center's Code of Ethics policy states that deliberate harm whether physical, psychological, or as a consequence of neglect must never be tolerated, or allowed to pass unreported. The Center's (7-page) Interpersonal Relations Between Staff and Patients policy states that staff shall at all times relate to patients in a objective, ethical, professional, and humane manner which demonstrates an awareness of the uniqueness of the formal positive interaction and helping relationship between the employee and the patient for which the employee receives monetary compensation. The Center's Prevention of Abuse and/or Neglect of Patients policy states that it is the policy of the Center to prevent the abuse and neglect of patients and to ensure a safe and secure environment for patients.

The Center's Use of Telephones, Cell Phones, Fax Machines and Pagers and Review of Telecommunication Invoices policy states that "Employees are prohibited from using personal cellular telephones or pagers at DHS work sites without prior supervisory approval, per the Employee Handbook. Supervisory approval is limited to emergency use of the cell phone or pager only. In the event that cellular phone use is approved, safety and the welfare of clients remain priorities. The owner of the cell phone or pager is responsible for any damage or loss that may occur on state property. The policy goes on to say (in part) that the intent of the restriction is to prevent staff from being distracted from performing their work duties. With prior approval for the specified emergency use, private cell phones may be kept on the person of the employee during work hours and may be used for the approved purpose only. Cell phones shall not be worn in plain view on patient care units and shall not be used in plain view of patients in the facility. If an

employee receives a call for an approved use the private phone, the employee will absent himself from the work setting until the call is complete.

Conclusion

Pursuant to Section 5/2-102 of the Mental Health and Developmental Disabilities Code, every recipient of services shall receive adequate and humane care and services. Pursuant to Section 5/2-112, every recipient of services shall be free from abuse and neglect. Although the HRA cannot discount the allegation that staff members make negative comments about the consumers loud enough so that the consumers can hear them and they have laughed at the behavior of some consumers, nothing was found to support the claim; the allegation is unsubstantiated.

By their own admission, Center personnel acknowledged that at least once, a staff member used a personal phone on the unit in the presence of consumers- a violation of Center policy; the allegation is substantiated.

The HRA questions whether staff members should be allowed to have personal cells phones on the unit. Firstly, how does the staff know that the incoming call is an emergency if the phone is not answered - thus every incoming call must be answered to determine if an emergency existstaking time away from the consumers. And, since the staff member has been approved to have this phone, he/she can be in a non-patient area on the phone and simply say that it is an emergency without repercussion. And, as the one consumer noted, calls can be conducted without the use of verbal conversation, and phones now have cameras, which of course could open up another area of concern, including patient confidentiality. The unit has numerous telephones from which staff members can make outgoing and receive incoming calls in the event of an emergency. The HRA strongly urges Center Administration to revisit its Use of Cell Phones policy. RESPONSE Notice: The following page(s) contain the provider response. Due to technical requirements, some provider responses appear verbatim in retyped format. Rod R. Blagojevich, Governor



Carol L. Adams, Ph.D., Secretary

Division of Mental Health - Region 2

Elgin Mental Health Center - Singer Mental Health Center

RECOVERY IS OUR VISION

Recovery is a Personal Journey of Hope, Healing, Growth, Choice, and Change March 5, 2008

Ms. Kori Larson, Chairperson North Suburban Regional Human Rights Authority 9511 Harrison Street, W-300 Des Plaines, IL 60016-1565

RE: HRA #08-100-9017

Dear Ms. Larson:

Thank you for your Report of Findings regarding the above mentioned case. We take your recommendation seriously and have performed a review of the our policy regarding Cell Phone Usage.

Due to the serious nature of your findings, the following guidelines were reinforced with all staff:

- 1) Staff were reminded that at all times the safety, confidentiality, and the welfare of our clients remains a top priority.
- 2) We will continue to monitor staff closely to ensure that cell phones shall not be used in plain view of the patients of this facility.
- 3) We will reinforce the rule that if an employee receives a call for an approved use of their private cell phone, the employee will absent himself/herself from the work area only after ensuring there is appropriate coverage for the duties that he/she has been assigned, until the call has been completed. It will be stressed to staff that all emergency calls must be brief.
- 4) We will also reinforce the part of our Cell Phone Policy that states that no cell phone with a camera will be allowed at Elgin Mental Health Center.
- 5) Staff will be reminded that Management reserves the right and will revoke approval on an individual basis if the cell phones are used inappropriately, and disciplinary measures may be taken.

Thank you for your thorough Report of Findings. Please include the response in any public Report of Findings.

Sincerely,

Tajudeen Ibrahim, BA Acting Hospital Administrator

TI/RP/mjp

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