



FOR IMMEDIATE RELEASE

Egyptian Regional Human Rights Authority
Report of Findings
08-110-9037
Chester Mental Health Center
December 2, 2008

The Egyptian Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation concerning Chester Mental Health Center, a state-operated mental health facility located in Chester. The facility, which is the most restrictive mental health center in the state, provides services for approximately 300 male residents. The specific allegations are as follows:

1. Staff at Chester Mental Health Center confiscated a recipient's legal papers.
2. A recipient at the facility has not been allowed to speak with his therapist.

Statutes

If substantiated, the allegations would be violations of the Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/2-102 (a) and 5/2-104). Section 5/1-101.2 of the Code is pertinent to the allegation.

Section 5/2-102 (a) states, "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."

Section 5/2-104 states, "Every recipient who resides in a mental health or developmental disabilities facility shall be permitted to receive, possess and use personal property and shall be provided with a reasonable amount of storage space therefor, except in the circumstances and under the conditions provided in this Section. (a) Possession and use of certain classes of property may be restricted by the facility director when necessary to protect the recipient or others from harm, provided that notice of such restriction shall be given to all recipients upon admission. (b) The professional responsible for overseeing the implementation of a recipient's services plan may, with the approval of the facility director, restrict the right to property when necessary to protect such recipient or others from harm. (c) When a recipient is discharged from the mental health or developmental facility, all of his lawful personal property which is in the custody of the facility shall be returned to him."

Section 1-101.2 states, "Adequate and humane care and services' means services reasonably calculated to result in a significant improvement of the condition of a recipient of services confined in an inpatient mental health facility so that he or she may be released or services reasonably calculated to prevent further decline in the clinical condition of a recipient of services so that he or she does not present an imminent danger to self or others."

Investigation Information for Allegation 1

Allegation 1: Staff at Chester Mental Health Center confiscated a recipient's legal papers. To investigate the allegation, the HRA Investigation Team (Team), consisting of two members and the HRA Coordinator (Coordinator) conducted a site visit at the facility. During the visit, the Team spoke with the recipient whose rights were alleged to have been violated and the Chairman of the facility's Human Rights Committee (Chairman). The HRA reviewed the following: copies of pertinent information from the recipient's clinical chart, the facility's Patient Handbook, the facility's Policy entitled "Patient Personal Property/Procedure" and a Department of Human Services, Office of the Inspector General (OIG) Report of Findings.

Interviews:

Recipient

According to the recipient, "Security Therapy Aides (STAs) will change rules, are disrespectful and have caused recipients mental anguish." The recipient stated that he was distressed when several STAs came into his room to conduct a "shakedown" for no apparent reason. He stated that he did not have any contraband; however, the STAs confiscated some of his legal papers. He stated that he was informed that the papers would be placed in the facility's property storage area. He informed the Team that he believed that it was a restriction of his rights to have the legal papers removed from his room.

Chairman

When the Team spoke with the Chairman about the allegation he stated that the recipient has requested numerous copies of information from his clinical chart and frequently has an excessive amount of papers in his room. He stated that it is facility policy to provide recipients with a single copy of information from their charts without charge. Each recipient is allowed to have approximately 10 books or magazines, ten personal letters, and stationary supplies, consisting of two tablets and five envelopes in his room. If an individual has an excessive amount of items, the items are placed in the property storage area at the facility. The items in storage can be accessed upon request to a staff member. The items that are currently in the recipient's room are then placed in the storage area in order to maintain adequate housekeeping and safety procedures. According to the Chairman, recipients are permitted to keep personal property in their rooms based upon their ability to maintain the items in an orderly fashion.

Clinical Chart Review:

Treatment Plan Review (TPR)

Documentation in a 05/14/08 TPR indicated that the recipient was admitted to the facility on 08/15/07 from a less restrictive state-operated mental health center where he had been hospitalized since 08/09/06. His legal status was listed as Not Guilty by Reason of Insanity (NGRI) with a them date (anticipated date of discharge) listed as 07/04/2011.

The recipient's diagnoses were listed as follows: AXIS I: Bipolar I Disorder (manic, with psychotic features), History of Alcohol and Cannabis Abuse, History of Neuroleptic-Induced Acute Akathisia (resolved); AXIS II: Personality Disorder (Antisocial); AXIS III: Hypertension, Suspicious Herpetic Keratitis (left eye); AXIS IV; Chronic Mental Illness, History of numerous arrests and incarcerations, History of treatment non-compliance and registered sex offender.

According to the record, the recipient "...continues to make delusional statements and display labile moods. He thinks staff are treating him unfairly. Also, he thinks he did not get a fair trial and wants his case to be reopened and retried. He keeps stacks of legal papers in his room and remains preoccupied with legal matter, law suits...."

Additional Chart Review Information:

According to the recipient's property inventory, miscellaneous papers were listed as being placed in the property storage area. The inventory did not contain an itemization of each paper.

The HRA did not observe any records that indicated that the recipient had received a restriction regarding access to any type of his personal documents.

Patient Handbook (Handbook):

Recipients are provided with a Handbook when they are admitted to the facility. The Handbook provides the following information: 1) introduction to various staff members, 2) a description of the facility, 3) unit information, 4) a statement of the facility's mission and vision, 5) a recovery statement, 6) a list of recipients' rights and responsibilities, 7) information about mail delivery, phone calls and visits, 8) food, clothing, and personal property information, 9) services available to recipients, 10) cost of services and use of money, 11) transfer or return to court and 12) contraband items.

In the Personal Property Section of the Handbook, recipients are informed that all of their personal property is inventoried and sent to the facility's property control supervisor for storage. According to the Handbook, each recipient is informed that if he has a Bible he may take it to the unit. If he wishes to have something out of the personal property, he can speak with his therapist in order to secure the item.

According to documentation in the Recipient Rights Section of the Handbook, a recipient is entitled to receive, possess, and use personal property unless it is determined that certain items are harmful to self and others. Whenever any of a recipient's rights are restricted in order to

protect the recipient or others from harm, harassment or intimidation the recipient is provided with a Restriction of Rights Notice.

Documentation in the Contraband Section of the Handbook is listed as follows, "Our goal at Chester Mental Health Center is to provide you with the safest and most therapeutic environment possible. In an attempt to achieve this goal, the items listed below are considered contraband. If it is believed that you have contraband, you and your personal property will be searched. Any contraband found will be taken from you." Items specified as contraband are listed in this section. Excessive amounts of papers are not specified as contraband. The number of allowable paper items was not documented in the Handbook nor was the procedure for obtaining the items that were placed in storage. Recipients are informed that they may speak to their therapist about getting items out of property storage.

Patient Personal Property Policy/Procedure (Policy).

According to the Policy Statement, "Patients who reside at Chester Mental Health Center shall be permitted to receive, possess and use personal property and shall be given storage space for such property items. Possession and use of certain property may be restricted by the Hospital Administrator to protect the patient or others from harm. As a result of Chester Mental Health Center's maximum secure status, some property items will be considered contraband and will not be allowed in the facility and will not be considered a restriction of patient rights."

According to the Policy, recipients are informed of their right to have personal property and the possibility of restriction of such property in the Patient's Handbook that is provided to each recipient upon admission to the facility.

Documentation in the Policy indicated that recipients are permitted to keep and display personal property in their rooms based upon their ability to properly maintain these items in an orderly fashion. Items approved for use by recipients in their room were listed as follows: 1) a maximum of ten books or magazines, 2) stationary supplies consisting of two tablets and five envelopes, 3) ten personal letters/papers, 4) one AM/FM cassette facility approved radio, 5) five cassette tapes without cases, 6) a hand held radio with plastic head phones, 7) one hand held video game and 8) an eight ounce plastic tumbler cup purchased from the commissary. Rosary beads are to be kept in the room, not worn around the neck and only taken off the unit to church or programming authorized by the treatment team or shift supervisor.

According to the Policy, recipients are allowed a maximum of three cubic feet of storage in the personal property department. Any excess personal property will be sent to the person or person designated by the recipient. Personal property will be forwarded to the recipient as soon as possible after he is transferred from the facility.

The Policy states, "Patients shall store personal property items in an orderly manner in their assigned room. Patients shall not attach items to the wall. Patients are not allowed to trade, sell, or loan personal property to other patients. Staff shall be available to address patient's questions regarding the acceptability of particular property items or displaying of items. Concerns shall be discussed and reviewed by the treatment team and/or unit management."

The Policy allows the Hospital Administrator and the treatment team to restrict property that is a danger to the recipient or to others through the restriction or rights process. Some property items identified as contraband included the following: 1) any items in staff's judgment that could be used or fashioned into a weapon, particularly glass or metal items; 2) matches and lighters or any items that could produce sparks or flames; 3) video cassette cases, audio cassette cases, compact discs and DVDs due to the possibility of fashioning them into a weapon; 4) cameras and any type of audio/video recording devices; 5) cell phones, pagers, any type of two-way communication devices, TVs personal data assistants, computers, typewriter/word processors and other electronic devices/appliances; 6) Batteries with the exception of AA, AAA, or 9-Volt; 7) Shoes weighing over three pounds or containing metal, spiked heels or pointed toes; 8) scissors, manicure tools (nail clippers shall be supervised by staff); 9) razor blades; 10) telescoping antennas and metal antennas; 11) pens of any type and pencils over three inches long; 12) canes; 13) over the counter pharmaceutical supplies without a physician's order; 14) any items that interferes with the function of locks; 15) keys and tools; 16) perishable food items or consumable items not sealed in the original packaging; 17) loose wire, rope or twine, strong thread, cords or shoe strings greater than 18 eighteen inches; 18) rubber bands, carbon paper, staples and paper clips; 19) tobacco items, caffeinated coffee, tea or soda; 20) any clothing or items that are displayed to suggest gang activity or may be deemed detrimental to the recovery process, and 21) plastic bags larger than nine inches by nine inches.

Office of the Inspector General (OIG) Report of Findings

Documentation indicated that on 04/28/08, the OIG received a reported allegation of physical abuse and abuse through mental injury regarding the recipient whose rights were alleged to have been violated.

According to the OIG report of findings, all of the staff members named in the allegation admitted that they had worked with the recipient, but denied that any abuse occurred. Two STAs admitted that they entered the recipient's room to perform a search. During the search some of his legal papers had to be taken due to the voluminous amount he had in his room. Documentation indicated that the STAs informed that recipient that the items would be stored in a cabinet in the storage area with the understanding that the recipient would have access to them whenever he wanted them.

The allegation of physical abuse and mental injury were considered to be unfounded in the OIG report of findings.

Summary of Allegation 1

According to the recipient whose rights were alleged to have been violated, his legal papers were confiscated from his room during a shake down. He stated that the STAs who took the items informed him that the items were placed in property storage. According to the Chairman, the excessive amount of papers that the recipient wants to keep in his room presents a housekeeping and safety problem. The Chairman stated that the recipient has been informed that

he is permitted to keep ten personal papers, ten magazines, two writing tablets and five envelopes in his room and will be provided with the personal papers that he has in storage upon his request to a staff member. The HRA's review of the recipient's records did not indicate that the recipient had been restricted from having access to his legal papers. An OIG report of findings indicated that some of the recipient's legal papers were taken due to the voluminous amount that he had in his room; however, they were placed in storage with the understanding that he could have access to them whenever he wanted to review the items.

Conclusion of Allegation 1

Based on the information obtained during the investigation, the HRA does not substantiate a rights violation. Therefore, the allegation that the staff at the facility confiscated a recipient's legal papers is unsubstantiated. No recommendations are issued.

Suggestions:

The Authority suggests the following:

- 1) The facility should provide additional information in the Unit Information Section of the Patient Handbook regarding the amount of allowable personal papers that a recipient may have in his room and the procedure for obtaining the excess papers that are placed in a recipient's personal property storage. Staff should also inform recipients regarding the manner in which their personal papers that are kept in their room should be stored in order to prevent a safety hazard, such as a fire.
- 2) The facility's Patient Personal Property/Procedure should include the procedure that is required for recipients to obtain property from the property storage area.
- 3) When items are placed in a recipient's property storage, facility staff should explain to the recipient the reason(s) that the property is being stored, as well as the procedure and staff member(s) to contact in order to retrieve the items. Documentation of the notification should be incorporated in the recipient's clinical chart.

Allegation 2: A recipient at the facility has not been allowed to speak with his Therapist. To investigate the allegation, the Team spoke with the recipient whose rights were alleged to have been violated and reviewed his clinical chart with written authorization.

Interview:

During the site visit at the facility, the Team spoke with the recipient about the allegation. He stated that he was not allowed to speak with his Therapist about his issues of concern.

Chart Review:

TPR Review

Documentation in a 05/14/08 TPR indicated that the recipient's therapist met with him on a regular weekly basis for individual therapy. She recorded the following, "[NAME] continues to be preoccupied with legal issues regarding his placement in this facility. However, the patient has been increasingly cooperative and willing to explore TX issues without major resistance. The patient met with his clinician to delineate behavioral boundaries and treatment expectations. [NAME] has difficulties in conceptualizing symptoms of his mental illness, resulting in limited insight as to stressors contributing to his hospitalization. However, he has been willing to explore this topic with this clinician and for the most part has been compliant with his recommended TX activities."

Progress Notes:

The Authority reviewed Progress Notes for March and April 2008. Documentation indicated that the Therapist had met weekly for therapy sessions and recorded his progress for each of the sessions.

Summary for Allegation 2

According to the recipient whose rights were alleged to have been violated, he had not been allowed to meet with his therapist. However, documentation in the recipient's TPR and in progress notes in his clinical chart indicated that the therapist had conducted weekly therapy sessions with the recipient.

Conclusion for Allegation 2

Based on documentation reviewed during the investigation, the Authority does not substantiate that the recipient was not allowed to speak with his therapist. No recommendations are issued.