

FOR IMMEDIATE RELEASE

Egyptian Regional Human Rights Authority Report of Findings Chester Mental Health Center 08-110-9044 September 30, 2008

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

A recipient at Chester Mental Health Center is not receiving services in the least restrictive environment.

<u>Statutes</u>

If substantiated, the allegation would be a violation of the Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/2-102 (a)).

Section 5/2-102 (a) of the Code states, "A recipient of services shall be provided with adequate and humane care 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. In determining whether care and services are being provided in the least restrictive environment, the facility shall consider the views of the recipient, if any, concerning the treatment being provided."

Investigation Information

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 reviewed his clinical chart with written authorization. The Team also spoke with the Chairman of the facility's Human Rights Committee (Chairman). The Authority reviewed a facility internal investigation report.

Interviews:

Recipient

When the Team spoke with the recipient whose rights were alleged to have been violated, he stated that he had abided by the mandates established in his Treatment Plan Reviews (TPRs) and had not been involved in any aggressive action since January 2007. The recipient stated that he had not been in restraints or seclusion, had attended programming, and been medication compliant. The recipient stated that he had met the criteria for transfer to a less restrictive facility; therefore, the facility should have approved the transfer.

The recipient informed the Team that during his hospitalization at the facility he has spent time writing a book about his beliefs. He stated that since the facility does not allow a recipient to possess a computer, his writings were completed by using a small lead pencil. He related that as soon as he completed the manuscript in pencil he sent it to a family member who copied the information on the computer and sent a more legible form to the publisher. He informed the Team that he was successful in completing the book, having it published, and making it available for purchase on the Internet. However, the task was very difficult because of the lack of computer access. He informed the Team that he had met the criteria for transfer and if the transfer had been implemented completing the book would have been considerably less difficult.

Chairman

The Chairman informed the Team that the criteria for a recipient to be transferred to a less restrictive facility is determined during the recipient's TPR, and the progress toward reaching transfer status is accessed by the treatment team during the review process. He stated that each recipient is verbally informed of the criteria and provided with a copy of the TPR, which lists the criteria in writing. He stated that when the recipient is recommended for transfer, the receiving facility has to agree to accept the recipient before the move is implemented.

The Chairman stated that the recipient whose rights were alleged to have been violated has a legal status of Not Guilty by Reason of Insanity (NGRI) with an extended theim date (anticipated date of discharge). The Chairman informed the Team that there were two incidents that might be pertinent to the recipient being required to remain at the facility. He stated that the recipient obtained and took illicit drugs while hospitalized, and he was aggressive toward a secret service agent who came to the facility to interview him. The Chairman stated the recipient was sent to a community hospital for observation after the illegal drug incident. He related that the recipient has consistently refused to identify how he obtained the drugs, and both internal and local police investigations have failed to reveal the source.

Record Review

Treatment Plan Reviews

The HRA reviewed the recipient's TPRs dated 04/01/08, 04/29/08, 05/27/08 and 06/24/08. According to the 04/01/08 TPR, the recipient was admitted to the facility on 08/30/05 from a less restrictive mental health facility. The transfer was implemented after the recipient was involved in several aggressive acts toward recipients at the facility. Documentation indicated that the recipient's legal status is NGRI with a theim date listed as 07/26/2053. According to the recipient's records he was found Unfit to Stand Trial (UST) on 01/20/04 on charges of attempted murder and aggravated battery. His legal status was changed to NGRI in March of 2005.

The recipient's diagnoses were listed as follows: AXIS I: Schizophrenia (Paranoid Type Chronic) and Polysubstance Dependence (Controlled in a Controlled Environment); AXIS II: None; Axis III: None; and AXIS IV: Chronic illness, Poor Insight, Legal Issues (NGRI, Lengthy Theim Date-2053).

According to documentation in the 04/01/08 TPR, the recipient asked the treatment team for a timeline for a possible transfer recommendation to a less restrictive facility, and was informed that transfer would be considered in about a year if he continued to do well.

The recipient's psychiatrist recorded that the recipient had continued to stabilize after earlier psychotic decompensation. The psychiatrist documented that the recipient had remained free from any aggression toward others and had not made any additional threatening calls to the President of the U.S.A.

According to the recipient's 04/29/08 TPR, the recipient was compliant in taking prescribed medication and in following module rules. He had attended rehabilitation programs and unit activities on a regular basis without having any problems. He had also participated in the facility's consumer advisory council and been involved in getting his book published. The record indicated that the recipient's behavior had not warranted the use of seclusion, restraints or emergency medication. The recipient's therapist recorded that the recipient had not displayed aggression toward staff, peers or any other person during the reporting period.

Additional documentation in the 04/29/08 TPR indicated that the recipient had several family members who were interested in his recovery, and he had signed a release giving facility staff the authorization to speak with the family members about his progress. The record indicated that the family members had visited the recipient immediately following the event when he exacerbated into a psychotic break following the use of illicit drugs. According to the documentation, a psychologist met with two of the family members to insure a close coordination of his treatment plan, to respond to the seriousness of the incident and to inform the family that the plans for transfer had been suspended.

The criterion for transfer to a less restrictive environment were listed as follows: 1) The recipient will verbalize his desire to transfer to a les restrictive facility; 2) He will have no incidents of verbal or physical aggression for six consecutive calendar months: 3) The positive symptoms of schizophrenia, such as delusion and hallucination, will be controlled. 4) The recipient will be medication compliant for a period of six months.

Documentation in the 04/29/08 TPR indicated that the recipient had remained "status quo". He remained free of psychotic symptoms and aggressive behaviors and had been compliant with taking prescribed medication even though he continued to believe that he does not have a mental illness. The recipient's therapist recorded that the recipient no longer referred to himself as "the Christ" or any other religious figure, nor had he reported that he was receiving messages through the TV or radar.

Documentation in the recipient's 06/24/08 TPR indicated that the recipient's behavior had not warranted the use of seclusion, restraints, or emergency medication. Nursing staff reported that the recipient had not been verbally or physically aggressive. A facility psychiatrist recorded that the recipient continued to stabilize. His various delusions, paranoia, agitation and hostilities had resolved; but he has remained suspicious toward staff, denied that he has a mental illness, and rejected the need of treatment with medication for a mental illness.

In the Need for Mental Health Services and Basis for the Findings Section of the 06/24/08 TPR, documentation indicated that the recipient, while psychotic, had attacked family members. He had continued to verbalize the same delusion, which led to the attack on peers at the transferring facility. However, with the compliance and observation of medication taking, those delusional ideas have somewhat subsided at the time of the TPR. According to the documentation, the recipient remains a threat to not only his safety, but the safety of others if he is not taking medication for the psychosis. Additional documentation indicated that without the structure and accountability of a mental health facility, the recipient is "extremely" likely to again act on his delusions. The record indicated that the recipient had acquired illicit drugs in the controlled environment of the facility in October 2006. After taking the drugs, the recipient became psychotic and his aggressive outburst required him to be placed in restraints and to receive medical inpatient hospitalization at a community hospital. Documentation indicated that the recipient had refused to discuss the event and the sources from which he obtained the drugs. According to the record, the treatment team determined that due to the recipient's past history, he continued to be in need of inpatient treatment.

In the Criteria for Separation Section of the 06/24/08 TPR, documentation indicated that the recipient was to remain under the care and custody of the Illinois Department of Human Services. The recipient would be considered for transfer to a less restricted environment when the following had been met: 1) The recipient will consistently verbalize his desire to transfer to a less restrictive facility; 2) He will have no incidents of verbal or physical aggression for six consecutive calendar months; 3) The positive symptoms of schizophrenia, such as delusions and hallucinations will be controlled. Evidence of control would include the recipient having no incidents of refusing meals, while talking about his "food being poisoned", and saying/believing that "he is the Messiah and must perform human sacrifices as a part of his religious beliefs"; 4) He will be medication compliant for a period of six months without interruption.

Progress Notes

The HRA reviewed Progress Notes from April through June 2008. According to a social worker's monthly progress note dated 04/10/08, the recipient was free of psychosis, was active in programming, and had become a member of the consumer advisory council. In a 05/26/08

progress note, the social worker recorded that the recipient had continued to make progress. Documentation indicated that he had met with his therapist on a weekly basis and had communicated with his family at least weekly. The social worker documented on 06/17/08 that the recipient was compliant with module rules on Unit B1 at the facility. However, he would be moving to Unit C the following day, a move that was acceptable to the recipient. The social worker recorded that the recipient was "doing very well". He continued to be active in educational activities, activity therapy and the consumer's advisory council.

Facility Internal Investigation Report (Report)

According to the Report, the recipient barricaded himself in his room on 09/13/06. Staff noted that he was smoking something that had a very strong odor but did not smell like cigarette smoke. During the process of getting the recipient out of his room, he became combative. As a result of his aggressive actions he was placed in restraints. After examination by a facility physician, the recipient was transferred to a local emergency room for evaluation. He was admitted to the hospital for observation and remained there until 09/15/06.

Local police were informed of the incident and came to the facility to investigate. Documentation indicated that 3¹/₂ rolled cigarettes were confiscated, and tests were conducted. In the initial test the cigarettes tested positive for Marijuana. When a follow up test was conducted, the substances were identified as Marijuana and Benzodiazepines.

Documentation indicated the recipient has a legal status of NGRI with a theim date of 07/26/53 and for that reason no charges were pursued. However, the facility was concerned about how the illegal substances were brought into the facility. The record indicated that the recipient would not cooperate with the investigation and refused to give a statement. However, he informed a staff member that he had smuggled the substances into the facility two years prior to the incident. The internal investigator documented that he found this statement difficult to believe because numerous searches were done routinely, and he believed that the drugs entered by way of visit or mail.

According to the Report, staff had been asked to closely observe the recipient during visits and to process the mail by policy to prevent a similar incident.

Summary

According to the recipient whose rights were alleged to have been violated, he has met the criteria for transfer to a less restrictive hospital setting; however, the transfer has not been implemented. According to the documentation in the recipient's clinical chart the recipient had been recommended for transfer to a less restrictive facility; however, the recommendation was rescinded when the recipient acquired and used illicit drugs while he was hospitalized at the facility. After the recipient took the drugs, he became aggressive, actively psychotic, and medically unstable. The record indicated that he was taken to a community hospital where he was admitted and treatment administered. Additional documentation indicated that the recipient threatened the President of the United States, and when a Secret Service Agent came to the facility to speak with him about the matter, he hit the agent. Documentation throughout the recipient's chart indicated that he denied having a mental illness, and had a history of medication non-compliance. Conversely, the record denoted that with medication the recipient's condition had improved. The recipient's TPRs from April through June 2008 indicated that the recipient had been free of aggressive actions toward self or others. Additionally, the recipient had participated in educational programming and activity therapy; been medication compliant; and had become an active member of the consumer's advisory counsel.

Conclusion

The Authority acknowledges that the recipient's aggressive behaviors and psychotic symptoms have improved. However, based on documentation in the recipient's service plans reviewed during the investigation, the Authority is unable to determine that the recipient should be receiving services in a less secure setting. Criteria for transfer to a less restrictive setting have been identified as part of the TPR, which is reviewed on a monthly basis by professionals in charge of the recipient's treatment. The Treatment Team has not yet determined that the criterion for transfer has been met. Therefore, the allegation that the recipient is not receiving services in the least restrictive environment is unsubstantiated. No recommendations are issued.

Comment

The Authority expresses concern regarding the recipient's ability to acquire and take illicit drugs while hospitalized in the most restrictive mental health facility in the state. The Authority acknowledges that internal and local authority investigations were conducted. Recommendations in the internal investigation report included close monitoring of the recipient during visits and processing the recipient's mail in accordance with the facility's incoming mail procedure. The mail procedure allows for delivery of unopened mail to the Unit Manager of each unit, who opens the mail in the presence of the recipient. The procedure allows for letters from officials and attorneys mentioned in Section 2-103 (c) of the Mental Health and Developmental Disabilities Code to be given unopened without observation by the Unit Manager.

Suggestions

The Authority suggests the following:

- 1. The facility should continue to attempt to determine the source of the illicit substances and the manner in which it was brought into the facility.
- 2. Steps should be taken to ensure that similar incidents do not occur.