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Egyptian Regional Human Rights Authority  
Report of Findings  
09-110-9036  
Jefferson County Comprehensive Services, Inc.  
November 9, 2009

The Egyptian Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation concerning Jefferson County Comprehensive Services, Inc., a community agency that provides comprehensive services for individuals in Jefferson and Hamilton counties. The agency provides the following: services for seniors, mental health services, rehabilitation/workshop programming and substance abuse services. This report is regarding services within the mental health division of the agency. The mental health division provides the following services: assessments; individual, group, and family counseling; sexual abuse treatment; crisis intervention, case management, psychiatric/psychological evaluation, Psychosocial Rehabilitation (PSR) and Community Integrated Living Arrangements. The specific allegations are as follows:

1. Jefferson County Comprehensive Services, Inc. does not have wheelchair accessible vans or busses.
2. The representative payee program is inadequate in that the agency repeatedly is late in paying a client's bills.
3. A client's complaints about the above issues have been ignored.

Statutes

If substantiated, the allegations would be violations of the Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/2-102), the Code of Federal Regulations pertinent to a Social Security Representative Payee (20 CFR 404 et seq.), the Americans with Disabilities Act (Vehicle Accessibility Guidelines) (49 CFR 37.1192.21) and the facility's grievance policy.

According to 405 ILCS 5/2-102 of the Code, "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."

According to 20 CFR 404.2010, Social Security pays benefits to a representative payee on behalf of a beneficiary 18 years old or older when it appears to Social Security that this method of payment will be in the interest of the beneficiary. Social Security's decision to have a

representative payee on behalf of the beneficiary is determined when there is information that the beneficiary is 1) legally incompetent; 2) mentally incapable of managing benefits payments; or 3) physically incapable of managing or directing the management of his or her benefits payments.

The responsibilities of a representative payee are outlined in 20 CFR 404.2035. According to the mandates a representative payee has a responsibility to: 1) use the benefits received on behalf of and in the best interest of the individual who is receiving the benefits; 2) keep any benefits received on the individual separated from his or her own funds; 3) treat any interest earned on the benefits as property of the individual receiving the benefits; 4) notify the Social Security Administration of any event or change of circumstances in the individual who is receiving the benefits that would affect the amount of benefits received, the individual's right to receive benefits and how the benefits are received; 5) submit to Social Security, upon request, a written report accounting for the benefits received on the individual's behalf and make all supporting records available for review if requested by Social Security and 6) notify Social Security of any changes in the payee's status that would affect his/her payee responsibilities.

Use of Social Security benefit payments are delineated in 20 CFR 404.2040. According to the mandates, a representative payee is to use the payments for the benefit of the beneficiary's current maintenance, institutional care, support of legal dependents, and claims of creditors. Current maintenance includes cost incurred in obtaining food, shelter, clothing, medical care, and personal comfort items. If the beneficiary is receiving care in a Federal, State or private institution because of a mental or physical incapacity, current maintenance includes the charges made by the institution, as well as expenditures for the items which will aide in the beneficiary's recovery, release from the institution or expenses for personal needs which will improve the beneficiary's condition while he/she remains in the institution. If the current maintenance needs of the beneficiary are met, the mandates allow the payee to use a part of the payments for the support of the beneficiary's legal dependent spouse, child, and/or parent. The payee may not be required to use the benefit payment to satisfy a debt of the beneficiary, if the debt arose prior to the first month to which Social Security certified payments to the payee. If the debt arose prior to this time, the payee may satisfy the debt if the current and reasonably foreseeable needs of the beneficiary are met.

The ADA Vehicle Accessibility Guidelines (49 CFR 37.1192.21) mandate that all new, used or remanufactured buses or vans provide a level-change mechanism or boarding device, such as lift or ramp, and to have sufficient clearances to permit a wheelchair or other mobility aide user to reach secure locations. At least two secure locations and devices should be provided on vehicles in excess of 22 feet in length, and at least one secure location and device shall be provided on vehicles 22 feet or less in length.

The facility's grievance procedure is outlined in A Statement of Rights that is given to clients upon admission to the agency's programming. Clients are advised to discuss their concerns with their assigned case manager as the first step to attempt to resolve the problem. If after talking with the case manager the issues have not been satisfied, the concerns should be presented in writing to the Program Coordinator. Within five working days, a written response will be provided. If the matter is not resolved to satisfaction, clients are informed that they may

present a written appeal to the Executive Director, who will provide a written response within five working days. If the problems still exists, clients may request that the matter be reviewed by the members of the agency's Board of Directors through the Executive Director. Clients are also provided with the address and telephone numbers of the following agencies: The Illinois Guardianship and Advocacy Commission, the Department of Human Services, the Office of Mental Health and Equip for Equality.

### Investigation Information

Allegation 1: Jefferson County Comprehensive Services, Inc. does not have wheelchair accessible vans or busses. To investigate the allegation, the HRA Team (Team), consisting of one member and the HRA Coordinator, conducted a site visit at the facility. During the visit, the Team spoke with the Executive Director (Director) and the Director of Mental Health Services (MH Director). The Team observed the facility's vehicles at the time of the site visit. The HRA Coordinator spoke via telephone with the client whose rights were alleged to have been violated. Additionally, the HRA reviewed information from the client's clinical chart, which included a copy of the client's Consumer Service Plan, Progress Notes, and invoices/payments pertinent to charges for taxi services.

#### A...Interviews:

##### Director:

During the site visit, the Director informed the Team that some of the busses/vans are owned by the agency, while others are obtained through contracted services. He informed the Team that agency and contracted services busses/vans have wheelchair lifts that enable a client to board the vehicles in a secure manner.

##### MH Director:

The MH Director informed the Team that the client whose rights were alleged to have been violated is a client in the agency's PSR Program. The MH Director stated that the client has numerous physical conditions and at various times has required a wheelchair for ambulation. The MH Director informed the Team that there was an occasion when the client had an infection that prohibited her from coming to the facility for PSR programming; however, those services were provided in her home.

The MH Director stated that some clients in the PSR program need training in community access and as a part of their training may have a goal in their Consumer Service Plans to access transportation services in order to move about the community. However, accessible transportation to program services at the agency is always available to all clients.

According to the MH Director, the client has informed the agency that she will be moving out of state and plans to discontinue services at the agency. The MH Director stated that facility staff members have offered to assist the client in findings services at the new location; however, she has declined the agency's proposal.

## Client:

According to the client, she has been unable to fully participate in agency services because the agency does not have wheelchair accessible transportation. The client informed the Coordinator that due to some of her physical problems; there have been occasions when she has required the use of a wheelchair to move from place to place. It was during those times that she was unable to attend the PSR Program. The client stated that she had to use her own money to pay for transportation to facility programming.

## B...Clinical Chart Review:

### Consumer Service Plan (Plan)

According to the documentation in the 09/19/09 Plan, the client has the following diagnoses: AXIS I: Schizoaffective Disorder 295.7; AXIS II: Borderline Personality Disorder; AXIS III: Seizure Disorder; Diabetes Mellitus; Supraventricular Tachycardia; Mitral Valve Prolapse; Allergies or Intolerance to Demerol, Nitroglycerin, Tetracycline, Ferrous Sulfate, Lithium, Toradal, ND X-Ray Dye; Degenerative Disc Disease; Chronic Pancreatitis; and Paralyzed stomach; Axis IV: Inadequate support group, problems with current living arrangement, and recent housing change.

The client's problem areas were listed as follows: 1) depression and anxiety; 2) frequent hospitalizations; 3) problems with being in crowds; 4) the need to make friends; 5) the need for enhanced coordination of services between agencies, providers from other agencies, and significant others; 6) difficulty with finding resources and the need for case management to access those services; 7) difficulty with paying bills and budgeting money and; 8) numerous medical problems.

According to the Plan, the client attended the PSR Program to enhance her skills, and goals were established to address each of the problem areas.

## Progress Notes:

The client's case manager recorded in a 01/30/09 Progress Note that when she called the client on the phone to discuss her monthly budget, the client informed her that due to having an infection which was contagious she would not be able to come to the agency for a face-to-face meeting. The case manager recorded that during the phone conversation she went over the client's monthly bills and suggested that she cut down on her cab bill each month. The case manager suggested that the client call staff ahead of time so that they might transport her to various appointments. The client stated that she would attempt to arrange her doctors' appointments so that medical transportation could be obtained and be paid for by her medical card instead of from her private funds.

Documentation in a 02/25/09 Progress Note indicated that the case manager went to the client's home so that she could accompany her to the orthopedic center. However, when the

client came to the door she informed the case manager that she had cancelled her appointment. The client stated that she had been at the emergency room most of the previous night due to problems with elevated blood sugar. During that visit, the client informed the case manager that she was not sure if she was going to continue attending the PSR program; however, she would call the PSR supervisor when she made a decision.

#### Invoices for Taxi Cab Payment:

The HRA reviewed Invoices for payment of taxi cab services for November and December 2008. According to the November Invoice, there were 18 trips to and from two area hospitals and the client's physician. The record indicated a trip from the client's home to the mall, and another entry on 11/14/08 indicated that the client had called the cab to transport her home from the Jefferson County Comprehensive Services. Documentation in the December 2008 Invoice indicated that the client had been transported to two area hospitals and an area physician on 17 occasions and to area businesses on 3 occasions. There was no documentation in the December 2008 Invoice that indicated the client had to acquire her own transportation from the PSR Program to her residence or from her residence to the PSR program.

The Invoices were a part of the client's clinical chart because the agency was acting as Social Security Payee for the client during the targeted period.

#### C...Observations:

During the site visit, the Team observed two small buses that were parked in the parking lot at the facility. Both buses were equipped with level change mechanisms that allowed a wheelchair to be placed on a ramp and brought up to the level of the bus to enable a client to board the bus while in the wheelchair, and when the client was ready to exit the bus, the wheelchair could be placed on the ramp and lowered to the ground level. The buses had sufficient clearance to permit wheelchairs to reach the desired location in a secure manner. Both buses were less than 22 feet in length and had one lift. The Team observed clients boarding and exiting the busses.

#### Summary

According to the complaint, the agency does not have wheelchair accessible vans and busses. Both the Director and the MH Director stated that the agency had contracted services, as well as agency owned vehicles which are equipped with wheelchair lifts. However, the client whose rights were alleged to have been violated indicated that agency did not have wheelchair accessible transportation in order to attend the PSR Program. She informed the Coordinator that she was required to use her own funds for transportation to programming at the facility. When the HRA reviewed invoices pertinent to the client's transportation for November and December 2008, there was only one documented payment to the cab company for the client's transportation from the agency to her home. However, there were numerous payments for transportation to medical services and some payments to community businesses. Additionally, the HRA Investigation Team observed the clients boarding and exiting two busses that contained wheelchair lifts.

## Conclusion

Based on interviews, record review, and observations during the course of the investigation, the allegation that Jefferson County Comprehensive Services does not have wheelchair accessible vans or busses is unsubstantiated. Therefore, no recommendations are issued.

Allegation 2... The representative payee program is inadequate in that the agency repeatedly is late in paying a client's bills. To investigate the allegation, the Team spoke with the Director and MH Director during a site visit at the facility. The Coordinator spoke with the client whose rights were alleged to have been violated via telephone. With written authorization, the client's clinical chart was reviewed.

### A...Interviews:

#### Director

During the site visit at the agency, the Team spoke with the Director about the allegation. He stated that agency had acted as the client's Social Security representative payee for a period of time. However, the client requested a change in payee from the agency to one of her roommates, a change which had been implemented prior to the site visit. The Director stated that the client had accumulated a large cable bill without having adequate resources to cover all of the charges. The Director informed the Team that facility staff had counseled with the client regarding the need to reduce some of the services in order that her bills might be paid in a timely manner.

#### MH Director

When the Team spoke with the MH Director, she stated that this individual has been a client in the PSR program for some time. She stated that she is living with a couple and paying them \$300 monthly for rent. The MH Director stated that the client has a bedroom, access to the kitchen and utilities included in the rental payment. However, she pays the phone, cable and internet bill for all of the household members. The MH Director informed the Team that the client receives \$627 Social Security Disability Insurance (SSDI) on a monthly basis.

According to the MH Director, the agency had acted as Social Security payee until 03/01/09 when the payee was changed to one of the individuals with whom the client is living. The MH Director stated that when the client amassed a cable bill of approximately \$300 the entire bill could not be paid. She stated that the cable company did not discontinue services, and the client continued to accumulate additional charges. She stated that the client's case manager met with her, explained her financial situation and offered suggestions regarding ways for her to live within her budget. Conversely, the client chose to have her Social Security payee changed from the agency to one of the individual's who lived in the household and collected rent from the client.

#### Client

The client informed the HRA Coordinator that when the agency acted as her payee, the staff members failed to pay her bills in a timely manner resulting in a disruption in her cable services. The client stated that she requested that the payee be changed from the agency to a member of her household and that request had been granted.

#### B...Clinical Chart Review:

##### Plan

Documentation in the client's 09/19/08 Plan indicated that the client stated that she had trouble "managing her money during a manic episode and blowing it on unnecessary items", which caused her stress. Documentation indicated that the client had a deficiency in the area of money management which required a need for a representative payee as evidenced by her self report and staff observation/notes. A long term goal was listed in the Plan for the client "to demonstrate the ability to budget on a fixed income by being as independent and self sufficient as deemed by her self report". The short term goal was recorded as, "She will increase her budgeting skills to be able to identify a need or want and lessen her impulsivity to purchase items without considering the outcome."

Documentation in the Plan indicated that the client continued to have problems with budgeting money. However, she had agreed to representative payee services to enhance and empower her to be more self sufficient. The client also agreed to practice and build budgeting skills during Community Support Individual or Group Activities in the PSR program at the agency.

##### Progress/Activity Notes:

In a 10/03/08 Activity Note, the client's case manager documented that she had spoken on the phone with the client regarding her financial situation. The case manager recorded that she went over a printout of the bills paid from the payee account. The case manager documented that the client's cable bills were almost three hundred dollars each month, and she discussed with her the need to cut down on some of the services. According to the record, the client was receptive to the case manager's suggestion and stated that she would call the cable company and have some services discontinued. The case manager documented that she suggested to the client that she should use medical transportation to her many medical appointments so that she might reduce her monthly cab bill. The case manager recommended that the client call at least a week in advance to set up the medical transportation. According to the case manager's record, the client thanked her for assisting and did not voice any other complaints.

The case manager recorded in an 11/13/08 Progress Note that she had spoken with the client after she made a request to schedule an appointment to discuss her financial situation. According to the documentation, the client informed the case manager that she had changed cable providers and her bill should be much less after the change. The case manager stated that she had a copy of the current bill and went over it with the client. The case manager recorded that there were several charges on the bill that seemed very extreme. When she questioned the

client about the charges, the client stated that she was paying for multiple receivers for the computer and several TVs, which were used by all of the people living in the household. According to the documentation, the case manager suggested that since other people also used the TVs they should share the cost with her. The record indicated that the client also discussed the problems that she was having in the home setting, and when the case manager asked the client if she wanted to move, she stated that she was unable to have utilities in her name due to owing the power company for a bill that she had not paid several years ago.

The case manager documented that on 12/03/08, she met with the client to discuss her finances and to figure a new budget. The case manager recorded that she suggested that the client call the cable company and enquire as to why she had received a bill for services that weren't provided. Documentation indicated that the client requested that the case manager stay in the room while she made the call and the case manager agreed. The case manager recorded that the client was able to resolve the situation herself and was informed that the bill had been a mistake. According to the record, during a review of the client's bill, the case manager discussed with her the need to consider how much she was paying for wrestling pay-per-views each month and reminded the client that this was causing her to be without any money for her personal needs. The record indicated that the client agreed that she would prefer to have a weekly allowance and would no longer spend \$50 for each per view that she ordered.

On 01/23/09, the PSR clinical supervisor (supervisor) recorded that the client called to speak with her regarding her account. According to the record, the client stated that she was considering switching cable companies again and wanted to update her budget. The supervisor stated that she reminded the client that she had just signed a contract with the present cable company, and there is a fee from cancelling before the contract was over. The client stated that she had spoken with the cable company and if someone from the agency would write a letter stating that she was unable to sign contracts because the agency acted as payee, she would not have to pay for breaking the contract. Documentation indicated that the supervisor discussed with the client her continuous changing of companies and how her other bills will have to be paid even if she switched. The supervisor recorded that she discussed how much the client receives monthly and how she is not having enough money to pay her bills in full so the amount rolls over for the next month and continues for the months thereafter. The supervisor recorded that the client was confused, but accepting of the explanation. The record indicated that staff planned to continue to work with the client in the area of understanding, money management, and not changing companies continuously.

The case manager recorded that the client was unable to come to the agency for a face-to-face meeting to discuss her monthly budget because she had a contagious infection. The case manager recorded that they discussed via telephone the client's monthly bills. According to the record, the case manager suggested that the client call her ahead of time and if possible staff would attempt to transport her to appointments so that she could save money on her cab bills. Documentation indicated that the case manager spoke with the client about her responsibility to pay the bill at the cable company that she no longer used. The case manager documented that the client had shown little progress in recognizing her financial limitations; however, staff would continue to work with her to develop skills in budgeting and money management.



When the case manager spoke with the client 02/23/09, the client discussed her wish to have one of her roommates become her representative payee, stating that the change would be easier since she lived in the same household. The client also stated that due to her many health issues she had been unable to come to the agency for her PSR groups and to meet with staff to discuss her finances. According to the documentation, the case manager suggested to the client that her financial issues could be dealt with over the phone and reminded her that she had complained in the past about conflicts with her roommates. However, the client was not receptive and stated that she was going to change her payee.

The case manager recorded that when she went to the client's home on 02/25/09 to accompany her to the orthopedic center, the client did not immediately answer the door. However, after several minutes the client came outside and stated that she had cancelled her appointment because she had been at the hospital emergency room most of the previous night due to problems with her blood sugar. According to the record, the client once more informed the case manager that she intended to have her roommate become her representative payee. When the Case Manager asked the client if she was going to continue attending the PSR group, the client stated that she had not made a decision regarding the matter.

#### Monthly Statements and Payments.

Documentation indicated that the client's cable, internet and telephone bills from the original cable company for the service period from 08/1/08 until 09/10/09 was \$435.88. These charges were paid 09/05/08. In a statement dated 09/06/08, the charges were listed as \$218.32 and documentation indicated that charges were paid 10/10/08, two days after the date of the statement issued on 10/06/08 for services from 10/11/08 through 11/10/08. The charges were listed as \$508.40 on the 10/06/08 Statement. The record indicated that after the 10/10/08 payment of \$218.32, an additional payment was made for \$172.62 on 11/13/08. In a 10/24/08 statement, the total due was listed as \$1,321.27, with \$1,157 dollars listed as unreturned equipment. According to an 11/24/08 receipt the account was paid in full for a charge of \$265.84 after the issue regarding the returned equipment had been resolved.

The 11/16/08 statement from the second cable company listed charges of \$252.96 due with \$104.99 listed for premier monthly charges and \$48.95 for pay-for-view services. The record indicated that \$150.00 of the bill was paid on 12/03/08. According to a 12/16/08 statement, the client owed \$196.01 and \$70 of the bill was paid on 01/15/09 and an additional \$181.37 paid later in the month. No date was listed for that payment.

#### Summary

According to the client, when the agency acted as representative payee her bills were not paid in a timely manner. However, interviews with staff and documentation in the client's clinical chart indicated that the client had some problems with money management. The client's Consumer Service Plan listed money management as a problem area and contained a goal for her to be involved in programming to address the issue. The record indicated that the client had amassed a large cable bill and had spent a great deal of her monthly benefits for transportation to medical appointments. According to documentation, facility staff counseled with the client

regarding the need to discontinue some of the services to lower the cable bill and the need to contact medical transportation or facility staff so that she did not have to use her personal finances for transportation to medical services. The record indicated that the client's expenses were more than her income; therefore, she had an outstanding balance on her cable bill. Documentation specified that the client appeared to be agreeable to the staff members' suggestions to reduce some of her expenses. However, ultimately she chose to have her representative payee changed to one of her roommates rather than comply with the staff's recommendations.

### Conclusion

Although there was evidence that verified the client's cable bill was not paid in its entirety, there was also documentation that indicated her monthly expenses were more than her monthly income. Therefore, the allegation that the representative payee program is inadequate is unsubstantiated. No recommendations are issued.

Allegation 3: A client's complaints about the above issues have been ignored. To investigate the allegation, the HRA reviewed the information obtained for the examination of allegation 1 and 2, interviewed the MH Director, the client whose rights were alleged to have been violated and reviewed the facility's grievance policy.

### Interviews:

#### MH Director:

The MH Director stated that facility staff had spoken with the client about her need to watch expenditures, partially those involving cable services. She stated that program goals were established and suggestions were provided in counseling sessions with facility staff to assist the client in the money management issues. The MH Director stated that the client had appeared to be agreeable with the suggestions given by staff, and had voiced concerns with her present living situation. However, she had ultimately decided to have her representative payee changed to one of the individuals living in the household rather than attempting to make changes in her spending practices.

The MH Director informed the Team that the facility has a grievance policy, and information regarding the policy is provided to all clients upon admission to the facility. The MH Director stated that the client did employ the steps outlined in the grievance policy to resolve the problem.

#### Client:

The client stated that when she reported the issues regarding late payment of her bills and not having accessibility to transportation staff ignored the information rather than addressing the issues. To resolve the financial concern she chose to have her representative payee changed to a member of her household rather than continuing with services at the facility.

According to the client, the only step that she took to resolve the matter was talking to her case manager.

#### Grievance Policy:

Steps outlined in the facility's Grievance Policy are as follows: 1) Clients are advised to discuss their concerns with their assigned cases manager as the first step to attempt to resolve their problems. 2) If after talking with the case manager, the issues have not been satisfied, the concerns should be presented in writing to the Program Coordinator. Within five working days, a written response will be provided. 3) If the matter is not resolved to satisfaction, clients are informed that they may present a written appeal to the Executive Director, who will provide a written response within five working days. 4) If the problem still exists, clients may request that the matter be reviewed by members of the agency's Board of Directors through the Executive Director. 5) Clients are also provided with the address and telephone numbers of the following agencies: The Illinois Guardianship and Advocacy Commission, the Department of Human Services, the Office of Mental Health and Equip for Equality.

#### Record Review:

Documentation indicated that the client was provided with information regarding the agency's Grievance Policy in a Statement of Rights, which was given to her upon admission to the agency.

The HRA did not observe any documentation that indicated that the client had followed the entire process outlined in the Grievance Policy to resolve her issues of concern.

#### Summary

According to the client, she had spoken to her case manager about the transportation and late payment of her bills without resolution to the matter. Investigation information pertinent to allegation 1 revealed that the agency does have wheelchair accessible transportation. Examination of information obtained for allegation 2 indicated that the client's case manager had spoken with the client numerous times regarding the budgetary problems and had offered suggestions to assist the client in living within her budget. Suggestions such as discontinuing some cable services and using medical transportation rather than personal funds for medical appointments were offered. The case manager suggested that the client call ahead of time to inform facility staff of her medical appointments so arrangements could be made for facility staff to transport her to the medical appointments. The PSR Clinical Supervisor spoke with the client and attempted to explain that the reason her bills were not being paid in entirety was due to the lack of funds. The Supervisor recorded that she discussed how much the client receives monthly and when she doesn't have enough money to pay her bills in full, the amount rolls over for the next month and continues to accumulate the months thereafter. The record indicated that the client was accepting of the explanation. Documentation indicated that the client was provided with information about the facility's Grievance Policy that is listed in the Statement of Rights, which was presented to the client when she was admitted to agency programming. The HRA did

not observe any documentation to indicate that the client has progressed past Step 1 of the Grievance Policy to resolve the matter.

### Conclusion

Based on the information obtained, the allegation that the client's complaints about the issues regarding wheelchair inaccessible vans/busses and the late payment of the client's bills were ignored is unsubstantiated. No recommendations are issued.