



---

**FOR IMMEDIATE RELEASE**

---

North Suburban Regional Human Rights Authority  
Report of Findings  
HRA #11-100-9009  
Elgin Mental Health Center

Case Summary: the HRA did not substantiate the allegations presented. The HRA's public record on this case is recorded below; the provider's response immediately follows the report.

In February 2011, the North Suburban Regional Human Rights Authority (HRA) opened this investigation regarding Elgin Mental Health Center, Forensic Treatment Program. A complaint was received that alleged that a recipient was unjustly transferred to another Department facility, he was not advised of the transfer, the Notice of Transfer was not given in a timely manner and the Utilization Review was not held within the mandated timeframe. If found substantiated, the allegation would be a violation of the Illinois Mental Health and Developmental Disabilities Code (405 ILCS 5).

Recipients receiving services at EMHC's Forensic Treatment Program, a medium security facility, have been remanded by Illinois County Courts to the Illinois Department of Human Services (DHS) under statutes finding them Unfit to Stand Trial (UST) and Not Guilty by Reason of Insanity (NGRI). Placement evaluations determine the most appropriate inpatient or outpatient setting for forensic treatment based on a number of factors including age, gender, mental health diagnosis, and security need. Unless a person is specifically ordered to receive services in an outpatient setting, court ordered referrals under state forensic statutes call for placement in a secure inpatient setting. The Forensic Treatment Program has 315 beds.

To pursue this investigation, a site visit was conducted in April 2011, at which time the allegation was discussed with Center personnel involved in the transfer. The HRA discussed the allegation with the recipient whose rights were alleged to have been violated via telephone. The HRA reviewed portions of the recipient's clinical record, with written consent. Also reviewed were Center policies specific to the allegation.

**Findings**

As stated above, it was alleged that a recipient was transferred to a maximum security facility without cause and the procedures surrounding the transfer were not completed according to mandates. The recipient stated that he had been discussing a book with treatment staff members and subsequent to that discussion, he was placed on a two-to-one staff member precaution. He stated that he was not told that he was being transferred until security personnel showed up. He stated that he had to sign the Notice of the Transfer as he was going out the door.

The Request for Transfer to the Chester Mental Health Center document (11/11/2010) noted that during a meeting (11/10/10) with the recipient's covering psychiatrist, psychologist and social worker, the recipient indicated that he was "Christ", that his parents were "alien shape shifters" that were seeking a code from him and that they planned on having him escape the hospital

on 11/11/10. During this meeting the recipient reported that violent events were going to happen on 11/11/10 and that aliens were going to take over and that the aliens were going to do human sacrifices at a staff member's retirement party scheduled that same day. The recipient reported that the three staff members at the meeting were targets and that the only way for them to save themselves was by killing themselves. It was documented that the recipient's current belief that aliens are going to take over his body, have him escape and do violence on 11/11/10 presented him as a danger and in need of a maximum treatment setting. The transfer document indicated that interventions were attempted prior to the transfer request, which were counseling, and a special precaution of two-to-one. The document also noted that the recipient announced during his May 2010 staffing that he had not been taking his psychotropic medications since his admission to the Center (November 2008).

After this meeting, the psychiatrist documented that she met with the Center's Medical Director, the Director of the Forensic Program and the Assistant Medical Director of the Forensic program to discuss the recipient's behavior. It was decided that the recipient would be placed on a two-to-one observation, that a referral would be made for Chester Mental Health Center and a petition would be filed for involuntary medication. It was noted that since the recipient was "not acting out" at this time, they could not restrict his rights for the administration of emergency medication. During the evening of the 10<sup>th</sup>, progress notes documented that the recipient verbalized understanding why he was placed on the 2:1 observation, but that it was not necessary. Progress notes showed that he did yoga, meditation, no delusional thoughts were verbalized and no physical or verbal aggression was demonstrated. On the morning of the 11<sup>th</sup>, it was documented that the recipient slept for five hours the previous night, he was restless, slept on the floor for part of the night and tossed and turned. It was documented that he had a shower at 5:00 a.m. and he did his usual morning routines - yoga and ADL's. He was observed to be "uptight" and he was not talking to staff or peers. It was noted that he was not aware that he was to be transferred that day. He was transferred at about 7:30 a.m.

At the site visit, Center personnel reiterated what was documented in the chart, in that the recipient told staff members that the only way to save themselves was to kill themselves with some twine he had purchased; he mentioned a human sacrifice at an up-coming retirement party and that aliens were going to help him escape. The staff also told the HRA that the symptoms displayed appeared to be similar to his level of illness at the time of the original crime (attempted murder) in addition to a previous incident of aggression (attempted to choke a sleeping peer) that had occurred since being remanded. It was stated that the recipient was not advised of the transfer for safety reasons.

The chart contained a Notice of Transfer form dated 11/11/10 which was signed by the recipient. The form states that an individual may object to his or her transfer or the individual's attorney, guardian or responsible relative may object on his or her behalf. The form contains the following explanation on how to object to the transfer: "Prior to transfer (or within 14 days after an emergency transfer), send a written and signed objection to the facility director. Upon receipt, the facility director will schedule a hearing to be held at the facility within 7 days. The individual will remain at the facility until a decision is made after the hearing. The hearing takes place before a special committee of professional staff. The hearing is informal and you can bring in persons to make statements and present facts on your behalf. The committee will send its recommendations to the facility director, who will notify you of his or her decision within 7 days. If you do not agree with the decision, you may ask the Secretary of the Department of Human Services to review it."

The chart contained a letter to the recipient indicating that the Utilization Review Hearing would be held on November 16, 2010, via videoconference. A second letter was in the chart, indicating that the Hearing had been re-scheduled to November 19, 2010. The HRA obtained a

copy of the Utilization Review Hearing held on November 19, 2011. The meeting was held in the Video Conference Rooms at Chester Mental Health Center and Elgin Mental Health Center. It was recommended that the recipient remain at Chester Mental Health Center until such time that he has achieved appropriate stability to continue treatment at Elgin Mental Health Center.

The HRA met with the Utilization Review Hearing Chairperson and the UR process was explained. He stated that the Committee includes Center personnel (taken from a 10-member pool) that are not involved with the treatment of the recipient. As an example, the recipient's Case Worker is part of the UR Committee pool. He could not be part of this review due to his involvement with the recipient. The Chair stated that within 14 days after an emergency transfer, a written objection must be submitted to the facility director of the facility where the recipient is located. The request is then sent to him; upon receipt of an objection, he schedules a hearing to be held within 7 days- if possible. It was stated that the 7 day timeframe can be challenging to meet because he must give the recipient and anyone he chooses to have at the UR a 72 hour notification, plus ensuring that the treatment team members and UR members are available to meet. But, he stated that he does have the option to set the meeting past the 7 day mandate if need be.

The Center's Utilization Review Hearings policy states (in part) that the committee shall consist of at least three and not more than seven members. They shall represent at least two different professional clinical disciplines, and be trained and equipped to deal with the patient's clinical and treatment needs. The Hospital Administrator, or any staff members involved in the decision to admit, transfer or discharge the patient shall not be a committee member or have participated in the committee's decision on any request for review or objection. The patient and objector and the representative attorney of each, shall be informed, in writing, of the time, place and date of the hearing either personally or by first class mail at least 72 hours before the hearing. The hearing chairperson in his or her sole discretion may grant a continuance of the hearing at the request of the facility or the patient and/or objector, if he/she determines that a continuance would not adversely affect the rights of either of the parties to present evidence and witnesses. Upon receipt of a request for review or objection, the Hospital Administrator shall promptly notify the Chair of the Human Rights committee or designee to schedule a hearing to be held at the facility within seven days. If the hearing is to review an objection to a transfer, the hearing shall be held at the transferring facility. When an emergency transfer has taken place, the hearing will be held at the receiving facility. However, if the receiving facility finds that either of the parties would not be able to completely present witnesses or evidence at a hearing at the receiving facility within the specific time, the Facility Director/Hospital Administrator (or designee) or the receiving facility may determine the hearing is to be held at the transferring facility.

### **Conclusion**

Pursuant to the Illinois Mental Health and Developmental Disabilities Code Section 3-908. "The facility director of any Department facility may transfer a recipient to another Department facility if he determines the transfer to be clinically advisable and consistent with the treatment needs of the recipient." Section 3-910 (a) of the Code states that "Whenever a recipient who has been in a Department facility for more than 7 days is to be transferred to another facility under Section 3-908, the facility director of the facility shall give written notice at least 14 days before the transfer to the recipient, his attorney, guardian, if any, and responsible relative. In the case of a minor, notice shall be given to his attorney, to the parent, guardian, or person in loco parentis who executed the application for his admission, and to the minor himself if he is 12 years of age or older. The notice shall include the reasons for transfer, a statement of the right to object and the address and phone number of the Guardianship and Advocacy Commission. If the recipient requests, the facility director shall assist him in contacting the Commission. (b) In an emergency, when the health of the

recipient or the physical safety of the recipient or others is imminently imperiled and appropriate care is not available where the recipient is located, a recipient may be immediately transferred to another facility provided that notice of the transfer is given as soon as possible but not more than 48 hours after transfer. The reason for the emergency shall be noted in the recipient's record and specified in the notice. (c) A recipient may object to his transfer or his attorney, guardian, or responsible relative may object on his behalf. In the case of a minor, his attorney, the person who executed the application for admission, or the minor himself if he is 12 years of age or older, may object to the transfer. Prior to transfer or within 14 days after an emergency transfer, a written objection shall be submitted to the facility director of the facility where the recipient is located. Upon receipt of an objection, the facility director shall promptly schedule a hearing to be held within 7 days pursuant to Section 3-207. The hearing shall be held at the transferring facility except that when an emergency transfer has taken place the hearing may be held at the receiving facility. Except in an emergency, no transfer shall proceed pending hearing on an objection. (d) At the hearing the Department shall have the burden of proving that the standard for transfer under Section 3-908 is met. If the transfer is to a facility which is substantially more physically restrictive than the transferring facility, the Department shall also prove that the transfer is reasonably required for the safety of the recipient or others. If the utilization review committee finds that the Department has sustained its burden and the decision to transfer is based upon substantial evidence, it shall recommend that the transfer proceed. If it does not so find, it shall recommend that the recipient not be transferred."

Based on the verbal and written information obtained, it is concluded that a recipient's rights were not violated when he was transferred to another Department facility. The recipient was not advised of the transfer for safety reasons; it is concluded that rights were not violated. The Notice of Transfer was given in a timely manner and the Utilization Review was held within the mandated timeframe; the allegation is unsubstantiated.

**Comment**

The Center's Utilization Review Hearings policy allows for continuances - the Mental Health Code does not; the policy must be amended to comply with Mental Health Code mandates.

---

## **RESPONSE**

**Notice: The following page(s) contain the provider response. Due to technical requirements, some provider responses appear verbatim in retyped format.**

---



Pat Quinn, Governor

Michelle R.B. Saddler, 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

May 16, 2011

Mr. Dan Haligas - Chairperson  
North Suburban Regional Human Rights Authority  
9511 Harrison Street, W-300  
Des Plaines, IL 60016-1565

Re: HRA #11-100-9009

Dear Mr. Haligas:

Thank you for your recent review. As usual, it was very thorough. We are glad to hear that this allegation was unsubstantiated. We pride ourselves here at Elgin Mental Health Center on ensuring patient rights.

Please include our response in any publically released report.

Sincerely,

Paul N. Brock, M.P.A., M.H.A.  
Hospital Administrator

PNB/JP/aw

---

Elgin Mental Health Center  
750 S. State St.  
Elgin, IL 60123-7692  
Voice (847) 742-1040  
TTY (847) 742-1073

---

Singer Mental Health Center  
4402 N. Main St.  
Rockford, IL 61103-1278  
Voice (815) 987-7096  
TTY (815) 987-7072