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Egyptian Regional Human Rights Authority
Report of Findings
11-110-9014
Chester Mental Health Center
February 22, 2011

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 240 male recipients. The specific allegation is as follows:

At Chester Mental Health Center the placement of security cameras outside recipients' rooms and near the showers do not allow for recipients' privacy.

Statutes

If substantiated, the allegation would be a violation of the Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/2-100 (a)).

Section 5/2-100 (a) states, "No recipient of services shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of the receipt of such services."

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 a Representative of the facility's Human Rights Committee (Representative) and three recipients. The Team also toured Unit E to observe the security cameras. The Coordinator spoke via telephone with a recipient and an Administrator from an area workshop for persons with disabilities. The Authority reviewed the facility's policy entitled, "Use and Monitoring of Video Equipment".

I: Interviews:

A...Representative:

The Representative informed the Team that security video cameras were recently installed to augment the security and safety of recipients at the facility, as well as staff members. The Representative stated that the video cameras are not installed where recipients have a realistic expectation of privacy, such as restrooms, treatment rooms, and recipients' rooms. He informed the Team that the video cameras are installed in communal areas and are not directed toward any of the areas determined to be private.

B...Recipients:

During the site visit, the Team spoke to three recipients regarding the newly installed video cameras. All of the recipients interviewed indicated that they perceived the cameras as a benefit and a safety protection rather than an invasion of privacy. When the Coordinator spoke with another recipient via telephone, the recipient related that he felt more secure since the installation of the video cameras.

C... Workshop Administrator

The Coordinator spoke with an Administrator of a supported employment program at an area workshop. The Administrator informed the Coordinator that video cameras had been installed at the workshop for approximately two years. He stated that the cameras were mounted in public areas to provide for the safety of the consumers and staff at the workshop and as a protection of the agency's assets. The Administrator stated that the cameras have been very beneficial for the intended purposes, and have not been viewed by consumers or staff members as an invasion of privacy.

D...Tour of Unit E

During the tour, the Team noted that the video cameras were mounted in corner areas near the ceiling in the public areas. The cameras were fixed, rather than movable, and pointed toward the common areas, such as the hall and activity areas. The team did not observe any cameras in or directed toward recipients' rooms, bathrooms, shower areas, etc.

E...Use and Monitoring of Video Equipment Policy (Policy):

Documentation indicated that the Policy was implemented on 10/29/10. According to the Policy Statement, "It is the policy of the Chester Mental Health Center (CMHC) that the use of video monitoring equipment will enhance the safety and security of patients and staff."

According to the policy, it is necessary for the Facility Director to approve the location of the video monitoring equipment. A list of the locations is to be provided annually and whenever any new cameras are installed to the president of each union representing the direct care workers at the facility. The Officer of Inspector (OIG) Liaison is assigned to coordinate the use of the video monitoring equipment, as well as to coordinate providing copies of videos related to an investigation.

Documentation indicated that the video cameras are not to be installed in areas where recipients and employees have a reasonable expectation of privacy. Areas such as inside restrooms, shower rooms, patient bedrooms, locker rooms, changing rooms, and treatment rooms will not have camera installation. Neither will cameras be installed in nurses' stations, private offices, employee break rooms and any other area where recipients are not located.

According to the Policy, video monitoring will not be installed for the purpose of eavesdropping. If additional cameras are required to assist with recipient and staff security, the unions representing the direct care staff will be notified.

The Policy mandates that video recordings be only used in bona-fide investigations based upon probable cause as determined by the Facility Director, OIG or their designee and the Business Administrator for Worker Compensation Investigation. The video recordings cannot be used to monitor routine job performance.

To the extent practicable all video feeds from the security cameras are to be preserved for the duration of the hard drive capacity. The Facility Director, Assistant Hospital Administrator and the OIG Liaison are directed to review stored video footage during the preservation periods for records that have been reported to contain incidents subject to review, such as but not limited to training, investigations, serious injuries and work compensation cases.

All requests to preserve a recorded event received by the Facility Director or OIG Liaison are logged and placed in a binder with the following documented: 1) name of the agency/name making the request; 2) the case number, 3) the date the request was received; 4) the date, time, location of the alleged event; 5) a general description of the event, if known; and 6) the reason a copy is needed.

The OIG Liaison will take all steps necessary to preserve the security video footage related to request. After the Facility Director's approval, the OIG Liaison will make a master copy of the requested event and place in a case which is sealed with evidence tape. The OIG Liaison will write on the evidence tape the time, date, assigned case number and personally initial the evidence tape. The Person/agency making the request is required to sign a log book upon receipt of the copy. The Policy mandates that the master copy is to be placed in a locked file cabinet in the OIG Liaison's office and a copy placed in the case file.

Additionally, the Policy requires that all DVD recorders be kept in a locked enclosure with the OIG Liaison being the only individual with the key. All copies of the DVDs are also to be kept in a locked file cabinet in the OIG Liaison's office.

Any video recording related to pending or threats of litigation or determined by the reviewing staff to be relevant to possible future litigation should be preserved indefinitely. When copies of the DVDs are needed for pre-disciplinary packets distributed to the union, grievance hearings, etc, the copies will be made from the master diskette in the custody of the OIG Liaison.

According to the Policy requirements, the OIG Liaison shall not provide copies of the DVD to any person/entity for purposes other than listed in the procedure until approval is obtained from the Facility Director, and an Illinois Department of Human Services or a Department of Central Management Service Attorney.

Summary

According to the complaint, the facility installed video cameras near recipients' rooms and the shower areas which resulted in the lack privacy for recipients. During the investigation, the four recipients who were interviewed did not perceive the cameras as an invasion of privacy, but as a measure to provide additional security and safety. The Representative stated that the cameras, which were placed in public areas, were installed as a safety measure to recipients, as well as staff. An Administrator from a community workshop, a much less restrictive setting, informed the Coordinator that security cameras were installed in the workshop public areas to provide a safer environment for consumers, staff and agency property. When the Team conducted a tour of Unit E it was noted that the placement of the fixed cameras were directed toward the common areas rather than recipients' room, shower areas, etc. The facility's written Policy provides stringent guidelines regarding placement of the camera, privacy issues, access to the videos, and security of the recordings.

Conclusion

Based on the information obtained during the course of the investigation, the allegation that Chester Mental Health Center placed security cameras outside of recipients' rooms and near the showers resulting in a lack of privacy is unsubstantiated. No rights violation was found; therefore, no recommendations are issued.

Comments and Suggestion

During the investigation process, HRA was informed that within approximately 30 days the video recording footages are recorded over unless the information is designated to be preserved for investigations. However, the method of destruction is not clarified in the "Use and Monitoring of Video Equipment Policy". Therefore the following suggestion is offered:

1. The Use and Monitoring of Video Equipment Policy should explain the facility's procedure of destroying information by recording over videoed footage to record new visual information.