



FOR IMMEDIATE RELEASE

**Egyptian Regional Human Rights Authority
Report of Findings
Case #12-110-9004
Southern Illinois Regional Social Services, Inc.**

The Egyptian Regional Human Rights Authority (HRA), a division of the Illinois Guardianship and Advocacy Commission, accepted for investigation the following allegation concerning the Southern Illinois Regional Social Services, Inc. (SIRSS):

An individual who has a disability has been inappropriately restricted from receiving mental health services at Southern Illinois Social Services.

If found substantiated, the allegation represents a violation of the Mental Health and Developmental Disabilities Code (405 ILCS 5/1 et seq.) and regulations that govern community mental health centers (59 Ill. Admin. Code 132).

The SIRRS is a community mental health center, located in Carbondale, that provides mental health, substance abuse and youth and family services to more than 2,000 individuals every year.

To investigate the allegations, an HRA team met with agency representatives, reviewed a record, with consent, and examined pertinent policies and procedures.

Complaint Statement:

According to the complaint, an individual with mental health needs is being unfairly "banned" from services. He specifically referenced a particular apartment complex thought to be operated by the SIRSS.

Staff Interviews:

Staff began the interview by reporting that the client continues to receive services and that there has been no break in, or restrictions from, services. According to staff, the client has been dissatisfied with the agency serving as his representative payee for his social security income and would prefer to handle this income himself. However, upon interacting with the Social Security Administration, the agency and client both learned that the payeeship would continue due to a previously determined identified need for the client to receive money management assistance. If the agency was removed as representative payee, another provider would need to carry out the payeeship as per the Social Security Administration. A goal has been established for the client to handle his own payeeship and SIRSS will work with him on opening a bank account and managing his income. The client is issued two checks per week but, at times, he runs out of

money due to purchases of cigarettes and lottery tickets. The client has also cancelled appointments to discuss money management and will not always keep budget documentation. Staff stated that they are trying to find a balance between what needs to be done and client choice.

With regard to the particular apartment complex, the staff confirmed that the complex provides residential services but explained that the complex is owned by a different entity and that it has been some time since the individual resided there. Staff confirmed that the client was banned from residing over reported past conflicts; however, he left that complex and moved to his own apartment for a couple of years and has since moved to another apartment. Some group sessions are offered at the apartment complex in question, but SIRSS staff reported that they received the complex's approval for the client's attendance at the group sessions held there.

Staff stated that there are approximately 40 clients in the intensive mental health program in which the client is a participant and not all receive representative payee services. Assessments are done to monitor a client's functioning and needs. With regard to agency services, the staff explained that services are delivered pursuant to treatment plans which are reviewed at least every three months and more frequently, if needed. Treatment teams meet twice per week; clients may be brought into team meetings, but not always. A case manager will review treatment team discussions with the client. There is also an advocate on staff. If clients have concerns, they can voice concerns to respective case managers who will then report to an agency administrator for follow-up. Client rights are reviewed with clients every six months and the grievance process is included in the client rights review. Staff stated that they had not received any complaints from the client regarding the allegation. Staff indicated that the client is showing progress in most of his goals, including a goal to reduce medication.

Record Review:

With client consent, the HRA team reviewed pertinent records. A treatment plan in effect for the time frame of 08-28-2011 through 02-21-2012 includes goals for medication management, independent living skills, and budgeting skills. An Axis I diagnosis of Schizoaffective disorder is listed along with an Axis II diagnosis of a Personality Disorder, not otherwise specified. The recipient also has a history of digestive problems. The treatment plan's diagnostic review form indicates a history of inappropriate public behaviors, verbal aggression and physical aggression. The treatment plan states that the client participated in the development of the plan although there is no client signature. Staff have signed the plan electronically.

Progress notes confirm the client's current residence and document case management contact with the client multiple times per week to work on treatment plan goals. Notes document SIRSS contact with the Social Security Administration confirming the continued need for payeeship and the client's interest in receiving continued payeeship services through SIRSS. Notes also confirm some current issues with peers at residence over noise, etc.

Policy Review:

The Authority examined the Client Rights Policy which indicates that clients will be informed of their rights prior to receiving services and then annually, thereafter. The policy includes a section on client grievances and guarantees clients the right to file complaints by submitting

written statements to the "Access Manager" which will result in a response within 30 days. The response is to be provided in writing or in a manner understandable to the client. The Executive Director is to be informed of the complaint and provided with a copy of the response. The grievance process is to be provided in application packets for new clients. For appeals of agency decisions, the Executive Director is to provide a response within 15 days. The policy concludes by stating verbal complaints and appeals are also considered.

The new client packet was reviewed and includes agency contact information, a list of rules, a notice of privacy practices, rights information, the attendance policy, the complaint process, and information about the mental health treatment preference declaration. The client's rights statement includes the right to participate in the development of the client's treatment plan, the right to services in the least restrictive environment, the right to refuse services, the right to file complaints and the right to terminate services. The rights statement concludes with contact information for external advocacy services, including the Illinois Guardianship and Advocacy Commission.

The Authority also examined the agency's general consent for services which states that the client is sharing information that will be used for assessment purposes and to determine a course of treatment but signing the consent does not obligate the client to treatment, including medication or therapy, for any specified period of time. The consent form also allows for the recipient to sign that he/she has received and been explained client rights information.

Other Information:

In reviewing the SIRSS website, the HRA found that the apartment complex that "banned" the resident is listed on the SIRSS website under residential services and is described as a supportive housing arrangement in which residents live in their own apartments with the SIRSS providing residential support and assistance. A review of the Secretary of State's website listing of corporations lists the apartment complex in question as being privately owned. A newspaper article from 2002 indicates that the apartment complex was renovated and renamed to provide affordable housing for individuals with special needs with SIRSS providing on-site services.

MANDATES

The Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/2-102) guarantees the right to "...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....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."

Regulations that govern community mental health centers (59 Ill. Admin. Code 132.142) guarantee rights consistent with the Code and include the right to present grievances. Section 132.145 requires community mental health providers to, at a minimum, provide mental health assessment and then treatment plan development, review and modification; the provider can also arrange for subcontractors.

With regard to treatment planning, the regulations state in Section 132.148 the following:

Treatment plan development, review and modification is a process that results in a written ITP, developed with the participation of the client and the client's parent/guardian, as applicable, and is based on the mental health assessment report and any additional evaluations. The ITP is also known as a rehabilitation treatment plan or a recovery treatment plan. Active participation by the client and/or persons of the client's choosing, which may include a parent/guardian, is required for all ITP development, whether it is the initial ITP or subsequent reviews and modifications. Participation by the client or parent/guardian shall be documented by the client's or parent's/guardian's signature on the ITP. In the event that a client or a client's parent/guardian refuses to sign the ITP, the LPHA, QMHP or MHP shall document the reason for refusal and indicate by his or her dated signature on a progress note that the ITP was reviewed with the client and that the client or his or her parent/guardian refused to sign the ITP.

Service provision, including the provision of intensive mental health services, is addressed in Section 132.150. Intensive services include, assessment, treatment planning, service coordination, crisis intervention, counseling/therapy, medication assistance, assistance with activities of daily living, residential supports, substance abuse services, interpersonal relationship building, and environmental and support services. Persons eligible for intensive services are persons who require significant levels of support to remain connected with mental health services and "...maintain stable community living and who have not benefited from traditional services and modes of delivery." Individuals receiving intensive services have typically had frequent psychiatric inpatient admissions, increased use of crisis services, periods of homelessness, arrests, multiple needs and deficits, and persistent psychiatric needs, including behavioral difficulties. Service termination is also addressed in this section and states that services can be terminated for the following reasons:

- A) Determination that the client's acute symptomatology has improved and improvement can be maintained;
- B) Determination that the client's level of role functioning has significantly deteriorated to a degree where referral or transfer to a more intensive mental health treatment is indicated; or
- C) Documentation in the client's clinical record that the client terminated participation in the program.

CONCLUSION

According to the complaint, a client of SIRSS has been inappropriately restricted from receiving mental health services at Southern Illinois Social Services. Specifically, an individual with mental health needs is being unfairly banned from a particular residence, operated by SIRSS.

Staff reported and records confirm that the client continues to receive intensive support and mental health services from SIRSS. He has changed apartments twice in the past few years. He has been "banned" from one apartment complex which may have been the source of the complaint to the HRA. The staff stated and records confirm that the apartment building in question is not owned by SIRSS; SIRSS staff did not have much information on the reasons behind his being banned. Although SIRSS does not own the complex, it is also apparent from the agency's website and a newspaper article that SIRSS is closely affiliated with the provision of support services at the apartment complex and should have known his history of being banned from the complex. Regardless, the client continues to receive support to live in an apartment although recent problems with peers at his current residence were documented in case manager progress notes.

Staff indicated that they were not aware of any client complaints regarding being banned from the apartment complex. Instead, they reported that his current complaints focus on having a representative payee. The agency has established goals related to both independent living and money management although the client's signature was not on the treatment plan reviewed by the HRA and staff reported that treatment planning participation is usually accomplished by having the case manager meet with recipients regarding the treatment plan.

Mandates require that individuals receiving community mental health services, particularly more intensive services, are entitled to a wide range of support and services to facilitate success with their mental health needs and in community living. The Mental Health Code requires the participation of the client in treatment planning and community mental health regulations require a client/guardian signature on the treatment plan.

Due to the continued provision of intensive support, mental health services and the client's continued residence in a community apartment, the HRA does not substantiate the complaint that a client of SIRSS has been inappropriately restricted from receiving mental health services at Southern Illinois Social Services.

The HRA does offer the following suggestions for consideration:

1. Regardless of the ownership of an apartment in which a SIRSS client resides, if the client is to receive support services, particularly intensive services, the HRA suggests that SIRSS work with the client toward a successful apartment living experience to prevent a client from being banned from a residential option.
2. Utilize a client's history, even if problematic, as a resource for future success. Determine what transpired with the prior residence that reportedly banned him to help ensure the provision of adequate supports in current and future residences. Discuss this issue with the client, including any concerns he has over what happened at the prior residence and any new residential concerns.
3. The HRA noted that the client had not signed his current treatment plan and staff reported that recipients do not attend treatment team meetings but are involved in the treatment planning process through a case manager. Regulations require that clients sign off on

treatment plans and be involved in treatment plan development. The HRA suggests that the client in this case review and sign his current treatment plan. The HRA also suggests that the agency consider directly involving recipients in treatment team meetings instead of handling most planning through the case manager.