



FOR IMMEDIATE RELEASE

North Suburban Regional Human Rights Authority
Report of Findings
HRA #13-100-9014
Elgin Mental Health Center

Introduction

In December 2012, the North Suburban Regional Human Rights Authority (HRA) opened this investigation regarding Elgin Mental Health Center (hereafter referred to as Center), Forensic Treatment Program, Hartman Unit. A complaint was received that stated a consumer on the unit uses a wheelchair and it was alleged that staff members frequently take away the wheelchair from the consumer. It was also alleged that the consumer's nutrition is not being adequately monitored, in that the consumer eats sweets to the point of sickness; staff members do not assist this consumer with her ADL's, and the consumer is unable to manage her trust fund account. It was further alleged that staff members frequently take way another consumer's clothing which results in the consumer wearing the same clothing for weeks and this consumer does not maintain proper hygiene.

The rights of consumers are protected by the Illinois Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102, 5/2-104 and 5/2-105).

Recipients receiving services at EMHC's Forensic Treatment Program 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.

Methodology

To pursue this investigation, the HRA requested masked (identifiable data removed) clinical data for all consumers on the Hartman Unit that use a wheelchair during a specific period; one record was received and reviewed. Also requested were masked clinical data for all consumers that had received a personal possession restriction (clothing) within a specific timeframe; the Center stated that there had been no documented clothing restrictions during the period in question. The HRA conducted a site visit in March 2013, at which time the allegations were discussed with the unit's Nursing Manager and a unit Social Worker.

Findings

The complaint alleged the above noted allegations on behalf of another consumer on the unit.

According to a treatment plan (September 2012), the consumer was to use a wheelchair for gait instability as needed. The chart showed that she threw the chair and broke it and no longer had a chair to use for stability. After throwing the chair it was documented that if the consumer could, she would use the wheelchair all the time even though she is capable of walking. A few days later it was documented that the consumer seemed to be managing very well with her independent ambulation.

At the site visit when asked why the consumer needed the chair, staff members stated they really did not know why. It was stated that this consumer is overweight and does complain of knee pain. She had been evaluated by orthopedic services and there was no medical reason indicating that she needed a wheelchair. It was stated that she is able to ambulate around the unit without difficulty. She is provided with a wheelchair when she leaves the unit as long distances seem difficult for her. Center staff stated that she has twice thrown a wheelchair and broke it (the HRA did see the broken chair). It was stated that a wheelchair would be taken away from a consumer only if it were a danger to the consumer or others. The need for wheelchairs on the unit is being evaluated and consideration is being given to providing new wheelchairs for the unit.

Regarding the allegation that the consumer's nutrition is not being adequately monitored and she eats sweets to the point of sickness, it was stated that the consumers have access to snacks in two ways. They have access to snacks twice a day at 1:15 p.m. and 8:15 p.m. At 8:15 p.m. the unit provides nutritious snacks (fruit etc.) for all the consumers on the unit. Each consumer can have one snack. In addition each consumer has a personal snack bin in which they can store their personal snacks, which are given to them by their family or friends. During snack time, the consumers can also obtain items from the unit vending machine using a debit card. They can only take and/or buy two snacks each time from their personal store or vending machine. All snacks must be consumed within 15 minutes and cannot be stored or returned to their personal bins. It was stated that all consumers are provided with an adequate general diet. Special diets may be ordered for specific medical reason, but the consumers are not obligated to accept these as they are a form of medical treatment, and can ask for – and will receive - the general diet.

On the first and third Fridays of the month, the consumers are allowed to order out food from a nearby restaurant (that they decide on by group consensus). They are limited to \$13 worth of food each. They are not allowed to exceed this limit.

In response to a question, the staff volunteered that snacks are never restricted as a disciplinary action unless the consumer had been caught stealing snacks or storing food. The HRA directed their attention to an entry in the masked record that said “On 10/5/2012 she was placed on a 24 hour snack restriction for threatening staff, slamming a chair against the staff, and shouting profanities.” The staff speculated that this behavior might have been as a result of an issue with snacks, but that was not documented.

To address the concern that staff members do not assist this consumer with her ADL's, it was said that there are no difficulties with this consumer's ADL's. They said that she occasionally asks for a shower after the official time and they try to accommodate her if possible. It was also stated that she has no difficulties managing her account, but that she uses her money to buy junk food from the vending machine.

Conclusion

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 5/2-102, "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."

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-104, "Every recipient who resides in a mental health or developmental disabilities facility shall be

permitted to receive, possess and use personal property and shall be provided with a reasonable amount of storage space therefor, except in the circumstances and under the conditions provided in this Section."

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-105, "A recipient of services may use his money as he chooses, unless he is a minor or prohibited from doing so under a court guardianship order. A recipient may deposit or cause to be deposited money in his name with a service provider or financial institution with the approval of the provider or financial institution. Money deposited with a service provider shall not be retained by the service provider. Any earnings attributable to a recipient's money shall accrue to him."

A complaint was received that stated a consumer on the unit uses a wheelchair and that staff members frequently take away the wheelchair from the consumer. Based on the information obtained, the wheelchair was taken away from the consumer because the chair was dangerous to the consumer and others, there was no medical reason that justified the use of the chair, and it was documented that the consumer was managing without using the chair for stability; it is concluded that the consumer's rights were not violated.

Since consumers have limited access to sweets/snacks, the assertion that the consumer's nutrition is not being adequately monitored in that she eats sweets to the point of sickness is unsubstantiated. The HRA found nothing to support the allegation that staff members do not assist this consumer with her ADL's or that the consumer is unable to manage her trust fund account; the allegation is unsubstantiated. According to Center personnel, no consumer had received a clothing restriction; the allegation that staff members frequently take way another consumer's clothing which results in the consumer wearing the same clothing for weeks; this consumer does not maintain proper hygiene is unsubstantiated.

The HRA takes this opportunity to address a few issues raised in this case investigation. Center administrator must ensure that when restrictions are imposed, the punishment fits the crime and that documentation reflects the same. In this case, the consumer should not have lost snack time for threatening staff members, unless as speculated, the inappropriate behavior resulted in an issue with snacks. The Mental Health Code affords each consumer the right to use his personal possessions (food items from the personal bin) and his/her money as chosen. The HRA suggests that the Center revisit the procedure regarding limiting personal snack items and the monetary amount allowed for ordering out food.

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

RECOVERY IS OUR VISION
Recovery is a Personal Journey of Hope, Healing, Growth, Choice, and Change

May 22, 2013

Ms. Kori Larson - Chairperson
North Suburban Regional Human Rights Authority
9511 Harrison Street, W-300
Des Plaines, IL 60016-1565

Re: HRA #13-100-9014

Dear Ms. Larson:

Thank you for your thorough review. We are glad there were no findings of any rights violations. We agree a restriction of snacks in this case should not have occurred. We have reviewed this with the staff and the treatment team.

We have reviewed the HRA suggestions that snack items and order outs not be limited. The Facility provides reasonable access to their snacks and vending machines on a daily basis. In a hospital setting, there are numerous dietary, safety, and storage guidelines that have to be followed. We do not believe that unlimited access is healthy or safe. We do not feel that a change in policy is therefore appropriate at this time.

Please include our response with any public release of your Report of Findings.

Sincerely,

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

PNB/JP/aw