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Egyptian Regional Human Rights Authority Report of Findings 13-110-9020 Chester Mental Health Center

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 provides services for approximately 240 recipients serving both forensics and civil commitments. The specific allegation is as follows:

A recipient's privacy has been violated due to mail tampering.

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

Statutes

The Mental Health and Developmental Disabilities Code (405 ILCS 5/2-103) states " Except as provided in this Section, a recipient who resides in a mental health or developmental disabilities facility shall be permitted unimpeded, private, and uncensored communication with persons of his choice by mail, telephone and visitation....Unimpeded, private and uncensored communication by mail, telephone, and visitation may be reasonably restricted by the facility director only in order to protect the recipient or others from harm, harassment or intimidation, provided that notice of such restriction shall be given to all recipients upon admission. When communications are restricted, the facility shall advise the recipient that he has the right to require the facility to notify the affected parties of the restriction, and to notify such affected party when the restrictions are no longer in effect. However, all letters addressed by a recipient to the Governor, members of the General Assembly, Attorney General, judges, state's attorneys, Guardianship and Advocacy Commission, or the Agency designated pursuant to 'An Act in relation to the protection and advocacy of the rights of persons with developmental disabilities, and amending Acts therein named', approved September 20, 1985, officers of the Department, or licensed attorneys at law must be forwarded at once to the persons to whom they are addressed without examination by the facility authorities. Letters in reply from the officials and attorneys mentioned above must be delivered to the recipient without examination by the facility authorities."

Complaint Statement

The specific allegation was that a recipient's mail had been tampered with because his brother would send money and a staff person at Chester was holding the money so that he missed commissary.

Investigation Information:

To investigate the allegation, the HRA Investigation Team (Team), consisting of two members and the HRA Coordinator, conducted a site visit at the facility. During the visit, the Team spoke with the Recipient whose rights were alleged to have been violated and the Chairman of the facility's Human Rights Committee (Chairman). With the Recipient's written authorizations, copies of information from the recipient's clinical chart were reviewed by the Authority. Facility Policies relevant to the complaints were also reviewed. The HRA also spoke with the brother who was sending the recipient money.

I. Interviews:

A. Recipient 1: The Recipient informed the Team that his constitutional rights have been violated. He stated that he is "being harassed by these cameras on a daily basis, the administration tamper with my mail and use the satellites to do this." He said that staff is tampering with his mail, specifically money orders sent by his brother. He said he knows when his brother sends him money and that the facility intentionally withholds it from him so that he misses commissary.

<u>B. Chairman:</u> The HRA checked with the chairman to make sure there was no other place where a restriction of money would be documented besides in the recipient's chart as the Team found none there. The chairman also checked with the business manager and neither of them could think of any instances where a recipient's money had been restricted and also stated that any restriction of mail "would be documented at the unit level save facility director signature. As per 405 ILCS 5/2-103 (c), there is a Restriction of Rights log that is maintained by the Unit Directors." The Chairman also searched for any restriction of rights forms for this recipient's mail during this time frame and he found none.

<u>C. Brother:</u> The HRA spoke with the recipient's brother who said he tries to send money once a month. He thinks the facility distributes the money to his brother but maybe it takes longer than it should because they have to wait for the money order to clear for some reason. He sends money in the form of currency exchange money orders made payable to the recipient and his identification number (assigned by Chester). He addresses the envelopes "Chester Mental Health for [recipient name]." The HRA requested that the brother provide specific dates between December, 2012 and March 2013 that he sent money orders to the recipient. He agreed to research his paperwork and let us know, however the HRA did not hear back from him.

The HRA advised the brother of Chester's policy which says that currency exchange money orders are subject to a 12 day hold if they are issued by a place that takes both checks and cash to ensure that a personal check has had time to clear the bank account. The brother was unaware of this policy.

II. Clinical Chart Review:

A. Treatment Plan Reviews (TPRs): The HRA reviewed TPRs from 11/27/12 and 5/15/13. Both TPRs state in the discussion section that he was present and his behavior remains stable with no incidents for a prolonged period of time. He continues to "communicate with the satellites and 'JC' (Jesus) on a daily basis and is observed responding to internal stimuli, often becoming upset and angry. "Reasoning with him is futile due to his entrenched delusional system." He is on court enforced medication but continues to refuse to take medication orally therefore he receives his medication by injections. It was noted that he responded well to Depakote in the past, but he refuses to take oral medication because he believes he does not need it and that he does not have a mental illness. Therefore he is only receiving medications that come in an injectible form. Chester has reduced and discontinued one of his injectible psychotropic medications but he remains on Haldol Decanoate. The recipient was found unfit to stand trial and his year to obtain fitness expired on 4/9/10. The TPR states "Treatment team continues to wait for court decision...and the treatment team concur he is unlikely to obtain fitness." It states in the TPR he returned to court in April and was returned on "extended UST." Both TPRs state the recipient attended and participated in his TPR meetings and "voiced no complaints."

<u>B...Progress Notes:</u> The progress notes reviewed note on several occasions where oral medication was offered first and refused so injectible medication was given per the court order. Case notes from 1/30/13 through 2/25/13 were reviewed since this was the timeframe the complaint came in about his money not being received. It was noted that he complained of back pain and received PRN medication Ibuprofen to treat that, but no other complaints were noted. There was no mention of him complaining or voicing concern that he was not receiving money that had been sent for him.

There was a case note dated 2/20/13 regarding his continued status as UST. Chester staff spoke with the recipient's attorney regarding the outcome of his court date. It was noted that "there are some difficulties with the case due to questionable DNA, witness and victim issues as the original issue is not being able to reinstate charge after it was being dropped. However, legally, [name] remains unfit but due to his entrenched delusional system, he has not obtained fitness within the statutory time frame of one year which was on 4/9/11. The treatment team concur despite treatment intervention he has not obtained fitness and is unlikely.....despite these delusions his last incident requiring restraints due to assaultive behavior was on 9/5/11 and last seclusion on 8/24/10."

C. Trust Fund Statements: The HRA reviewed quarterly statements dated 9/30/12-12/31/12 and 1/2/13-3/26/13 which is the timeframe when this complaint was filed with the HRA. There was no activity for the 4th quarter of 2012. The first quarter of 2013 shows 4 deposits:

1/2/13 \$20.00 from a family member 1/8/13 \$20.00 from his brother 2/27/13 \$50.00 from his brother 3/7/13 \$25.00 does not list who it is from

There were also 4 withdrawals listed:

1/9/13 \$20.00 1/22/13 \$20.00 3/1/13 \$50.00 3/26/13 \$25.00

The HRA found no restriction of rights notifications in the chart indicating that mail access had been restricted for any reason for this recipient.

III...Facility Policies:

A. RI.03.06.00.04 Patients Handling Their Own Funds: states "CMHC patients can request to handle their own funds. A patient can request to handle his own funds by asking the coordinating therapist to fill out a II.462-0623c Revocation of Authorization form. The patient and coordinating therapist will date and sign the II.462-0623c. Business Office staff go to each unit once per week to cash bank or postal money orders and to sell Commissary Credit Cards to patients who handle their own funds. The facility does not cash currency exchange money orders or personal checks. The patient should return these to the sender."

<u>B. RI.03.06.00.02 Patient Funds Received Via Mail:</u> states "CMHC processes funds received in the mail through the trust fund office. If an envelope is addressed to the Patient, it is sent directly to the unit by the Switchboard Operator. If the envelope is addressed to Chester Mental Health Center or to Chester Mental Health Center for the Patient (as in this case) it is brought to the Trust Fund Office.

Funds sent to the unit: patients who handle their own funds are given the funds they receive in the mail as long as they do not violate the \$100 limit. Funds for patients who have signed a trust fund deposit authorization are brought to the trust fund office with 2 copies of form CMHC-145 receipt-patient's trust fund...any checks or money orders are endorsed by the patient and also stamped with a restrictive endorsement by the unit manager (i.e. 'for deposit only, Chester mental health center')...All personal checks and currency exchange money orders are deposited in the trust fund but not disbursed for 12 working days in order to make sure that the check/money order clears the payers' bank...If the funds are in the form of a currency exchange money order, the place of purchase is called to see if they take cash only or take personal checks; if cash only the C.E. is released for immediate use. If they accept checks, the funds are held for 12 working days." In this case, money was sent in the form of currency exchange money orders, therefore the funds were subject to the 12 working days hold as per Chester policy.

C. RI.03.06.01.01 Disbursing Patient Monies: states in the Disbursement of Monies to Commissary section "In Order for patients to make purchases, funds must first be available in the commissary. Every other working day funds are transferred from the Trust Fund into the patients' commissary accounts. Patients are afforded the opportunity to purchase items from the commissary twice each week unless the week has been shortened due to a holiday." This policy further outlines how the money is transferred and when reports are printed. It also states "If money has been deposited into the trust fund from a personal check or currency exchange money order, it will be noted as a 'hold' for twelve (12) working days from the date the money was

deposited in the bank. The release date for the money shall be listed on the trust fund computer printout. When the release date is reached, the funds can be transferred to the commissary."

<u>D. RI.01.02.02 Commissary Restrictions:</u> states "CMHC Commissary maintains an orderly process for implementing, reviewing and removing restrictions regarding patients' use of Commissary privileges. If a patient's treatment team decides that a restriction of the patient's ability to order commissary items is appropriate, the commissary will honor that request, if: the commissary receives the notification in writing on completed form CMHC-161 and the form has been approved (signed) by the unit director...All commissary restrictions are to be in compliance with the restriction of rights notification procedure in that they are to be incorporated into the patients' treatment plan and documented in the clinical record."

Summary

The trust fund quarterly statement reviewed shows that money was deposited into the recipient's account and withdrawn in 6 days for the first deposit, withdrawn in 13 days for the second deposit, withdrawn in 2 days for the third deposit and withdrawn in 19 days for the last deposit. There was no restriction of rights forms in the chart indicating that the recipient could not have access to his money and as stated above, some withdrawals occurred within 2 or 6 days. This shows that the money was sent in a form that could be accessed immediately either because it was a regular money order or a currency exchange money order from a place that only takes cash. It is also possible that the two withdrawals that took longer, could have been due to the currency exchange money order being issued by a place that takes checks not just cash. Since Chester policy states that funds are transferred from the Trust Fund into the patients' commissary accounts every other working day, it is possible that a money order came on the day in between and would have been transferred on the next scheduled transfer date.

Conclusion

There was no restriction of rights forms in the recipient's chart indicating he did not have access to his mail. The recipient's brother also indicated that he always sent regular money orders, which by Chester policy could be accessed right away without a hold being placed on them. Trust fund records show that money was sometimes withdrawn within 2-6 days. Therefore, the allegation that privacy has been violated due to mail tampering is **unsubstantiated.** The HRA makes the following suggestion:

Ensure that trust fund policies, including those relating to possible holds on funds, are clearly explained to and understood by recipients who utilize that service. If a recipient is unable to understand this process, the facility should ensure that family members sending money to recipients understand the policies.

The HRA acknowledges the full cooperation of the facility throughout the course of its investigation.