FOR IMMEDIATE RELEASE

North Suburban Human Rights Authority Report of Findings Streamwood Behavioral Health System

HRA #14-100-9026

The North Suburban Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation of alleged rights violations at Streamwood Behavioral Health Systems (SBHS). In May 2014, the HRA notified SBHS of its intent to conduct an investigation, pursuant to the Guardianship and Advocacy Act (20 ILCS 3955). The allegations investigated were that patients in the inpatient program are constantly watching television instead of receiving mental health treatment; authorization sent to a home school was not sent in a timely manner, and referrals given at the time of discharge were outdated.

If found substantiated the allegations would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5). To investigate the allegations presented, the HRA conducted an onsite visit in June 2014 and discussed the allegations with the Chief Operating Officer, the Program Manager, the Chief Nursing Officer, and the Director of Risk Management/Performance Improvement. The HRA reviewed hospital policies relevant to the allegations. The HRA interviewed patients receiving inpatient services.

The HRA acknowledges the full cooperation of hospital personnel.

Background

SBHS provides mental health services to children and adolescents that include: outpatient assessment and therapy, intensive outpatient programs, partial day hospitalization, and inpatient crisis stabilization. They offer a full staff of licensed social workers, professional counselors, nurses, psychologists and psychiatrists that provide treatment at every level of care. The facility is a subsidiary of Psychiatric Solutions, Incorporated, and a behavioral health management firm that serves thirty-one states from its headquarters in Franklin, Tennessee.

Findings

At the site visit, hospital personnel explained the inpatient programs, saying that the hospital has four 30-bed units. The acute inpatient program is designed specifically for children, adolescents and young adults. The children and young adults are programmed together while the adolescents are programmed separately based upon gender and differing developmental and psychiatric needs. These programs provide intensive evaluation, stabilization, and short-term treatment. SBHS has the following inpatient programs: Children – ages 3-12; Adolescent Males – ages 12-17; Adolescent

Females – ages 12-17; Young Adults – ages 18-21; Child and Adolescent Autism Spectrum – ages 8-17; and Intensive Restoration – males ages 13-17. It was stated that at the time of admission, the parent/guardian is asked to sign Authorization for Use to Release and Exchange Information consent forms for any professional that is involved in the patient's treatment and care. The home school consent form would be included in the consents to be signed. It was stated that at times, the parent does not want the school to know that the child/adolescent is in the hospital, so that parent obviously will not sign a consent form. The parent can obtain and provide the hospital with the home school assignments without involving the hospital. Or, the parent will provide consent that allows the hospital to communicate with the home school. Should the parent not provide consent and/or provide the home school assignments, the child/adolescent would receive the standard educational programs provided by the hospital. It was stated that if the consent is not obtained at the time of admission and the form needs to be mailed back to the hospital, which can take some time. And, the average length is stay is about 7 to 12 days, so this does not allow for much time to complete the process. At the site visit, the HRA obtained the Parent Handbook which explains the Authorization for Use to Release and Exchange Information consent forms process.

The hospital has a Release of Information policy that states (in part) that every patient who is admitted to an inpatient program must have a signed Release of Information allowing the Inpatient Education Department to contact a patient's attending school district. The policy further states that if the release of information is not received within 7 days of the intake date, the Inpatient Educator will make contact with the parent or guardian. He or she will check if the parent has received the materials or if new forms need to be sent.

Regarding the allegation that the patients just sit around and watch television all day, the HRA was given a copy of a unit schedule that shows what is expected of the consumer during the day. Therapy groups are listed throughout the day that include cognitive and play therapy, process groups and numerous skills groups. In addition, each patient receives an hour of individual therapy and an hour of family therapy a week. At the site visit, hospital personnel stated that the patients are given some free time during the day and the television can be watched at that time. It was also stated that the television is used for educational and therapeutic movies. In discussing this allegation with the patients receiving services, each patient stated that the program offers groups throughout the day. The daily schedule is posted and each patient receives a copy of the unit schedule. One patient noted that the groups occur less during the weekend. The HRA notes that upon entering the unit a group was being held.

In discussing the allegation that the discharge information was outdated, it was stated that the hospital works with the patient and parent/guardian with the aftercare plan. This plan might include outpatient programs, therapist appointments, home school contacts, etc. It was also stated that the hospital works closely with SASS workers for discharge disposition. Illinois developed the Screening, Assessment and Support Services (SASS) program for children and adolescents experiencing a mental health crisis. The SASS initiative is a cooperative partnership between the Department of Children and Family Services (DCFS), the Department of Healthcare and Family Services (HFS) and the Department of Human Services (DHS). The development of the tridepartment SASS program created a single, statewide system to serve children experiencing a mental health crisis whose care will require public funding from one of the three agencies. This program features a single point of entry (Crisis and Referral Entry Service, CARES) for all children entering the system and ensures that children receive crisis services in the most appropriate setting. It was stated that referral numbers are reviewed every quarter for updates (through business development)

and as made known. Hospital personnel acknowledged that an old list might be floating around and that especially in the private sector, numbers might be no longer in-service.

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".

Based on the information obtained, the HRA found that rights were not being violated. The allegations that the inpatient program are constantly watching television instead of receiving mental health treatment; authorization sent to a home school was not sent in a timely manner, and referrals given at the time of discharge were outdated are unsubstantiated.

Comment

During the patient interviews, we asked about discharge plans. Each patient was able to say when their last and/or next staffing would be held and the expected discharge plan. One patient also explained her current medication, explaining how the medication dosage would be decreased or increased as she and the physician saw fit. The HRA commends the hospital for ensuring that the patients are actively participating in the treatment plan process.