



FOR IMMEDIATE RELEASE

HUMAN RIGHTS AUTHORITY - NORTHWEST REGION
REPORT 15-080-9006
DEKALB COUNTY JAIL

INTRODUCTION

The Human Rights Authority (HRA) of the Illinois Guardianship & Advocacy Commission opened an investigation after receiving complaints of potential rights violations in the treatment provided to a detainee with disabilities in the DeKalb County Jail in DeKalb. Allegations were that the detainee received inadequate care and mismanagement of medications.

Substantiated findings would violate rights protected under the County Jail Standards (20 Ill. Admin. Code 701).

According to the website, the DeKalb County Jail opened in June 1980. The DeKalb County Sheriff's Department operates the jail and it is used by the local police department to hold detainees. The DeKalb County Sheriff's Office is a full service law enforcement unit that includes patrol, investigations, corrections, tele-communications and the civil process. In addition, the Sheriff's Office provides contract law enforcement services to other entities within the county. The Sheriff's Office is a 24/7 operation throughout the 650 square miles of DeKalb County.

To pursue the matter, the HRA team met at the facility and interviewed the following DeKalb County Jail staff: the Sergeant and Lieutenant, a Physician, a RN/Medical Director and a Counseling Supervisor. Policies were discussed as were relevant sections of the detainee's records with written authorization.

COMPLAINT SUMMARY

The complaint alleges that the detainee received inadequate care and the facility mismanaged his medications. While at the facility, the detainee received burns/sores on his face due to a self-administered bad shave, and received no medical care for it. The complaint goes on to allege that the detainee requested to see a psychiatrist and was told by the nurse that he could not see a psychiatrist.

FINDINGS

Interviews

According to the Lieutenant, written information regarding local mental health services including addresses and phone numbers, along with the jail rules and regulations was presented to the detainee as part of the regular procedures of the booking process.

While at the facility, due to a shave the detainee had administered to himself, he sustained facial burns. The nurse stated that if the detainee had open sores on his face, this would have been evaluated. Although on most cases similar to this (a bad shave), many times the sores do not require creams or bandages, but merely to keep an eye on the healing process. Both the nurse and the physician stated that the detainee did not request medical treatment for his facial sores, nor was it offered to him. The nurse stated that they did not want the sores to get worse. The physician added that he and the nurse made the best decision in that since the sores had scabbed and were healing fine on their own, this healing process should be allowed to continue without hindrance.

Both the physician and the nurse attempted to make it clear that the detainee made no request verbally or in writing to see a psychiatrist. A form is available that each detainee may complete when requesting to be seen by the physician and a copy of the form would be retained in the record. According to the Lieutenant and the nurse, there are no psychiatric services at the jail at this time. This remains a concern at the jail as they continue to seek and contract with a local provider for psychiatric services.

The physician stated that the initial process to verify medications can be difficult and time consuming due to the staff having

to re-verify the authentication of the medication as a preventive measure for drug abuse. When medications are appearing to be withheld, he continued, the staff are making every attempt to contact the physician's offices and the pharmacies. The physician went on to state that the detainee was on suicide watch periodically during his tenure at the facility. Per the nurse, for prompt refills, the medications are usually red-flagged 3 days before they run out. But in this particular case, added the Lieutenant, there was an oversight by staff of the refilled medications. Although the medications were indeed refilled, the staff left empty medication bottles in the drawer, which led other staff members to believe that the medication was not refilled. Consequently, the detainee missed a few scheduled dosages of the medicine Fluvoxamine, an antidepressant medication for the treatment of major depressive disorder (MDD), social phobia, and obsessive compulsive disorder.

The counseling supervisor stated that the detainee attended and cooperated in the group sessions. The detainee was quiet at times and did not volunteer much, but he did answer questions that were directed toward him. The counseling supervisor went on to say that detailed documentation of the group sessions is not required by staff, but only a brief written statement on whether the detainee attended and participated.

Per the Lieutenant, the detainee was released to the DuPage County Jail for outstanding charges. The nurse expounded that the current medication bottles will transfer with the detainee and she called in refills to the pharmacy of the detainee's choice to be available to him at the time he would be released from the DuPage County Jail.

The Lieutenant added that staff training is conducted annually according to the Illinois Police Training Act.

RECORDS

According to the 1/22/15 Booking Sheet, the jail staff were aware that the detainee had a schizophrenic disorder. The Sentencing Worksheet dated 3/27/15, reveals that the detainee was charged with domestic battery and was sentenced to 90 days.

The Inmate Medical Screening form dated 2/3/15 and completed by the booking officer, lists the medications that the detainee stated he was currently taking. Along with the history of a schizophrenic disorder and alcohol dependence, the 2/4/15 Management Services Physical Exam form denotes that the face of the detainee is “currently healing from a bad shave”.

There is no documentation regarding specific requests by the detainee to see a psychiatrist. Neither is there documentation that the staff informed the detainee that he could not see a psychiatrist.

The Prescription Medication forms dated January, 2015 and February, 2015 reveal that beginning on January 23, 2015 the detainee received all of his medications in a timely manner as scheduled, including the medication Fluvoxamine. Per the website, Fluvoxamine has been shown to effectively reduce the symptoms associated with Obsessive Compulsive Disorder (OCD), an anxiety disorder characterized by obsessions (unwanted, recurrent and disturbing thoughts) and compulsions (repetitive, ritualized behaviors that the person feels driven to perform in order to lessen the anxiety produced by the obsessions). In addition, during the month of February, 2015 the detainee was placed on suicide watch per the Suicide Watch forms dated 2/4/15 through 2/7/15.

For the month of March, 2015 the Prescription Medication form denotes that on 3/1/15 through 3/4/15 the detainee did not receive his Fluvoxamine medication. On the 3/5/15 Inmate Request Form (not an “Inmate *Medical* Request form”), the detainee wrote as an explanation of his request: “Homicidal. I need to be placed alone. I’m having thoughts of killing and I’m angry”. Thus, the detainee had to be placed on suicide watch per the Suicide Watch forms dated 3/5/15, 3/6/15 and 3/7/15. Reportedly, the Suicide Watch form that was completed on 3/7/15 had the specified time that medications were administered. Neither of the 3/5/15 or the 3/6/15 Suicide Watch forms contained this

information, howbeit, documentation for these 2 days is on the March, 2015 Prescription Medication form.

Notes written by the supervisor of counseling for the period of 2/7/15 through 4/18/15 briefly depict that the detainee was present at the group meetings with regard to the subjects of risk assessment and relapse prevention.

The Medical Examination Record dated 3/30/15 states that the current medication bottles belonging to the detainee have been approved to be released to him upon his transfer to another jail.

The April 2015 Prescriptions Medication List denotes that refills were called-in to a local pharmacy on behalf of the detainee to be available upon his release from DuPage County Jail. Per the Release Report 4/21/15, the detainee was released from DeKalb County Jail and transported to the DuPage County Jail on 4/21/15 on pending charges.

CONCLUSION

The policies provided by the DeKalb County Jail to the HRA are adopted from Title 20 of the Illinois Administrative Code.

In regard to physical and mental health assessments, the admitting officer shall determine by questioning, whether the detainee has any indications of acute mental or emotional disturbance, mental illness, developmental disabilities or a dual diagnosis.

When a detainee shows signs of or reports unusual physical or mental distress, he or she shall be referred to health care personnel as soon as possible. Detainees exhibiting psychiatric symptoms, such as acute psychotic features or mood disturbances, or detainees who have a known psychiatric history shall be evaluated by a mental health professional. Detainees exhibiting suicidal behavior or ideations shall

be placed in a reasonable level of care that provides for their safety and stability.

In regard to medication, medical staff shall obtain verification as soon as possible, no later than the time interval specified for administration of the medication on the prescription container and the medications shall be administered as prescribed.

Mental health services shall include a medical doctor being available to attend the medical and mental health needs of the detainees. Professional mental health services may be secured through linkage agreements with local and regional providers or independent contracts.

Mental health training shall be conducted annually on suicide prevention and mental health issues including first aid, CPR and identification of signs and management of the detainees with a mental illness or a developmental disability.

According to 20 Ill. Adm. Code 701.40 Admission Procedures:

i. Physical and Mental Health Assessments

The officer shall determine by questioning whether the detainee:

B) Has any indications of acute mental or emotional disturbance, mental illness, developmental disabilities or dual diagnosis;

C) Is at imminent risk of self-harm as determined by the use of an approved screening instrument or history of medical illness;

D) Is on medication;

2) Mental health screenings shall include either an assessment by a mental health professional or an assessment by a jail officer using an approved screening instrument for assessing mental health.

3) When a detainee shows signs of or reports unusual physical or mental distress, he or she shall be referred to health care personnel as soon as possible.

A) Detainees exhibiting psychiatric symptoms, such as acute psychotic features or mood disturbances, or detainees who have a known psychiatric history shall be evaluated by a mental health professional.

B) Detainees exhibiting suicidal behavior or ideations shall be placed in a reasonable level of care that provides for their safety and stability.

j) Medication

1) Any medication in the possession of a detainee at admission shall be withheld until identification and verification of its proper use is obtained and documented by a licensed medical professional. Medical staff shall obtain verification as soon as possible, no later than the time interval specified for administration of the medication on the prescription container.

2) Medications shall be administered as prescribed.

Section 701.90 refers to Medical and Mental Health Care:

a) Medical and Mental Health Services

All jails shall provide a competent medical authority to ensure that the following documented medical and mental health services are available:

3) Prescription of medications;

8) Administration of medications, including emergency voluntary and involuntary administration of medication, including psychotropic medication, and distribution of medication when medical staff is not on site.

A written record shall be maintained of over-the-counter medication, for example, aspirin, cough medicine, etc., issued by jail staff.

b) Physician, Mental Health and Dental Services

1) A medical doctor shall be available to attend the medical and mental health needs of detainees.

B) Professional mental health services may be secured through linkage agreements with local and regional providers or independent contracts. Linkage agreements and credentials of independent contractors shall be documented.

e) Written Record or Log

A written record shall be maintained, as part of the detainee's personal file, of all treatment and medication prescribed, including the date and hour the treatment and medication is administered.

h) Mental Health Training

Annually, jail officers and other personnel primarily assigned to correctional duties shall be trained on suicide prevention and mental health issues. The training shall be approved or provided by a mental health professional.

1) Suicide prevention training shall include the nature and symptoms of suicide; the specifics of identification of suicidal individuals through the recognition of verbal and behavioral cues, situational stressors, evaluation of detainee coping skills and other signs of potential risk; monitoring; evaluation; stabilization; and referral of suicidal individuals.

2) Mental health training shall include the nature of mental illness; symptoms; specifics of identification of mentally ill individuals through the recognition of verbal and behavioral cues symptoms of mental illness, situational stressors, evaluation of detainee coping skills and other signs of potential risk; monitoring; evaluation; stabilization; and referral of the mentally ill detainee.

And in Section 701.10 Administration:

1) All full-time jail officers shall be trained as provided by the Illinois Police Training Act [[50 ILCS 705/8.1](#)]. All personnel assigned jail duties shall be made familiar with these standards. The training shall include first aid, CPR and identification of signs and management of detainees with a mental illness or a developmental disability.

20 Ill. Adm. Code 701.60 Release Procedures establishes the standard when it says:

d) Personal Property

2) A record of any maintenance medication, including the amount, released with an offender shall be documented.

3) A copy of the itemized and signed receipt shall be maintained by the jail as a permanent record.

e) Discharge of Mentally Ill Detainees

1) When a mentally ill detainee is released, he or she shall be given a listing of community mental health resource addresses and telephone

numbers and provided with the opportunity to receive a copy of the jail's mental health, medical and medication records.

2) Linkage and after care may include a referral to a mental health provider, a prescription for medications, or a two week supply of prescribed medications.

Complaint: The detainee received inadequate care. Both the physician and the nurse stated that the detainee did not request medical treatment for his facial sores. Neither was there an Inmate *Medical Request Form* or any other documentation found with regard to this. Reportedly, the Management Services Physical Exam form dated 2/4/15 depicts that in the course of an overall examination, the facial sores were evaluated and noted to be in the healing process. It can therefore be concluded that the complaint of inadequate care with regard to the facial sores is not substantiated.

Complaint: The detainee did not receive adequate psychiatric care and medications of the detainee were mismanaged. Per the March, 2015 Prescription Medication form, the detainee did not receive the Fluvoxamine medication from 3/1/15 through 3/4/15. According to the Lieutenant, this was an oversight by the staff. In reference to 20 Ill. Adm. Code 701.40(j), medications shall be given as prescribed. Under Section 701.90 all jails shall provide a competent medical authority to ensure that medical and mental health services are available, including prescription of medications.

While *yet* receiving Fluvoxamine from 2/4/15 through 2/7/15, the detainee was still placed under suicide watch per the forms dated the same. While *not* receiving Fluvoxamine from 3/1/15 through 3/4/15 due to an oversight by the jail medical staff, on 3/5/15 the inmate completed a request form stating that he was having suicidal ideations and the staff placed him under suicide watch, as stated in the Suicide Watch forms dated 3/5/15 through 3/7/15. Although the jail continues their efforts in seeking to contract with psychiatrists in the surrounding communities in

order to provide psychiatric services to the detainees, the Illinois Code has established the standard that detainees exhibiting psychiatric symptoms, such as acute psychotic features or mood disturbances, or detainees who have a known psychiatric history shall be evaluated by a mental health professional. (20 Ill. Adm. 701.40(i)A-B) Mental Health Professional means a licensed or certified psychiatrist, physician, psychiatric nurse, or clinically trained psychologist, or an individual who has a master's degree in social work and clinical training. Although there is no documentation that the detainee requested to see a psychiatrist, the events of February, 2015 and March, 2015 clearly illustrate that the detainee needed one and the jail did not provide or at least seek a psychiatrist and in fact, stated that they could not. It is therefore resolved that the detainee was in need of psychiatric services that the jail did not make available to him. In addition, the mismanagement of medications during the month of March may have had a direct effect on the detainee being placed under suicide watch for 3/5/15 through 3/7/15. The complaint with regard to inadequate care due to a psychiatrist not being available and the mismanagement of medications is substantiated.

RECOMMENDATIONS

- 1.Ensure that mental health professionals are available to detainees who exhibit psychiatric symptoms or have a psychiatric history. (20 Ill. Adm. 701.40 i-A, B)
- 2.Administer medications as prescribed. (20 Ill. Adm. 701.40 (j); (20 Ill. Adm. 701.90 a-3)

SUGGESTIONS

1. Ensure that the detainee is provided the correct form and understands the difference between the Inmate Request form and the Inmate Medical Request form.
2. Consider medication chart audits to ensure there are no medication errors.
3. Revise suicide watch forms to include documentation of the medications administered to the detainee while on the watch.

RESPONSE

Notice: The following page(s) contain the provider response. Due to technical requirements, some provider responses appear verbatim in retyped format.

Office of the DeKalb County State's Attorney

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RICHARD H. SCHMACK

State's Attorney

June 16, 2016

Erin Wade, Ph.D., Chair
Human Rights Authority
Northwest Region
Illinois Guardianship and Advocacy Commission
4302 N. Main St., Ste. #108
Rockford, Illinois 61103-5202

Re: #15-080-9006 DeKalb County Jail

Dear Ms. Wade:

Please be advised that the DeKalb County Jail is in receipt of your letter and report dated April 13, 2016. We thank you for your time and patience in allowing additional time to respond. The DeKalb County Jail provides for the custody of individuals awaiting trial, serving sentences up to one year, or sentenced to periodic imprisonment. To that end, the DeKalb County Jail takes every complaint and concern regarding the prisoners that our housed at our facility very seriously. Thank you for bringing the Complaint to our attention.

While we appreciate the HRA's investigation, as a preliminary matter, the DeKalb County Jail must address some concerns with the way in which the Report was prepared and the information upon which the Report relies to establish the findings and recommendations. First, on page 4 of the Report cites to the "RECORD". This "RECORD" was never provided to DeKalb County Jail to assure that the HRA had all necessary information and/or relied upon all necessary documentation when making their assessment. In addition, no transcript or notes were provided from the "INTERVIEWS" that were conducted with the Jail personnel.

As a point of issue, every detainee is given a Handbook as part of the regular booking process. Jail personnel ensure an understanding by the detainee for compliance. DeKalb County Jail is in full compliance with 20 IL ADC 701.40(i) Admission Procedures for County Jail Facilities

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- (1) The admitting officer observes the detainee for obvious injuries or illnesses requiring immediate emergency medical care, rashes, unusual cough, high temperature, body pests and general mental status. The officer shall determine by questioning whether the detainee:
 - (A) Has any medical condition that requires medical attention, such as dependence on drugs or alcohol, diabetes, epilepsy allergies, asthma, heart conditions, etc;
 - (B) Has any indications of acute mental or emotional disturbance, mental illness, development disabilities or dual diagnosis;
 - (C) Is an imminent risk of self-harm as determined by the use of an approved screening instrument or history of medical illness;
 - (D) Is on any medication; and
 - (E) If female, is pregnant.

Based upon documentation provided to the HRA, the admitting officer completed and noted any and all medical conditions and mental health illnesses, as required by the Administrative Code. The detainee was then referred to our contract Nurse for determination of further medical treatment, which was determined by the medical professional to be unnecessary.

- (2) Mental health screenings shall include either an assessment by a mental health professional or an assessment by a jail officer using an approved screening instrument for assessing mental health.

Based upon additional documentation provided to the HRA, and the full evaluation conducted by the admitting officer, as required by the Administrative Code, a further evaluation was conducted as to the detainee's mental health condition. Based upon the results of the mental health assessment the detainee attend various counseling sessions with the on-staff mental health professional. It is true that the detainee did not request to see a psychiatrist nor was a psychiatrist provided, as previously stated, the detainee attended and cooperated in sessions with the on-staff Licensed Clinical Professional Counselor who has a Master's Degree from Eastern Illinois University. The detainee was also placed on two separate sessions of Suicide Watch, which all completed documentation was provided to the HRA. At all times a medical doctor was available to provide necessary evaluations and care if needed.

- (3) When a detainee shows signs of or reports unusual physical or mental distress, he or she shall be referred to health care personnel as soon as possible.
 - (A) Detainees exhibiting psychiatric symptoms, such as acute psychotic features or mood disturbances, or detainees who have a known psychiatric history shall be evaluated by a mental health professional.
 - (B) Detainees exhibiting suicidal behavior or ideations shall be placed in a reasonable level of care that provides for their safety and stability.

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The admitting officer made appropriate determinations that the detainee was taking certain medications in regards to his medical and mental health diagnosis. It appears from the documentation provided to the HRA that a miscommunication occurred between jail personnel in regards to medication that had been refilled after having been verified by the contract medical professionals. The moment the lapse was discovered, the situation was remedied and the detainee was under constant supervision for the next 48-72 hours. The detainee was seen by a mental health professional, the on-staff Licensed Clinical Professional, as required by 20 Ill. Adm. 701.40(i)(3)(A), as soon as possible following the alleged incident and during the detainees entire time in the care and custody of the DeKalb County Jail. Upon transfer to a neighboring county, all medications were refilled and sent along with the detainee.

The DeKalb County Jail adheres to the rules and regulations placed upon all correctional institutions under the Part 701, Title 20 of the Illinois Administrative Code. As has been provided to the HRA, the DeKalb County Sheriff's Department has enacted direct orders to the Jail Personnel which mirror the standards of the Illinois Administrative Code. The DeKalb County Jail is in full compliance with the Illinois Jail Standards. The DeKalb County Jail and Sheriff Roger Scott appreciates the recommendations and suggestions offered by the Illinois Guardianship and Advocacy Commission, Human Rights Authority; and will continue training protocols and compliance surveys to maintain our continued compliance with the Illinois Jail Standards.

Sincerely,



Sarah Gallagher Chami
Chief Civil Assistant State's Attorney

/sw

cc: Richard Schmack, State's Attorney of DeKalb County
Sheriff Roger Scott, DeKalb County Sheriff's Department
Chief Joyce Klein, DeKalb County Corrections
Lt. Carolyn Parnow, DeKalb County Corrections