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**FOR IMMEDIATE RELEASE**

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North Suburban Human Rights Authority  
Report of Findings  
Amita Health  
Adventist GlenOaks Hospital  
HRA #15-100-9020

The North Suburban Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation of alleged rights violations at Adventist GlenOaks Hospital. In August 2015, the HRA notified GlenOaks of its intent to conduct an investigation, pursuant to the Guardianship and Advocacy Act (20 ILCS 3955). The complaint accepted for investigation was that consumers are not given any information at the time of admission regarding unit expectations/rules; and when in restraints, a consumer was not allowed to use the restroom free from restraints.

If found substantiated, the allegations would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-102, 5/2-108).

To pursue this investigation, a site visit was conducted at which time the allegations were discussed with hospital personnel. Since the HRA was unsuccessful in its attempts to secure authorization for a clinical record review, the investigation will focus on hospital policy and practice. The HRA requested and reviewed the hospital's Patient Handbook and the Restraint Management policy.

**Background**

According to its web-site, Adventist GlenOaks Hospital is a faith-based, non-profit organization backed by the strength of Adventist Health System, one of the nation's top ten health systems. The hospital offers a full range of services, including emergency care, cardiology and cardiac catheterization, electrophysiology, interventional radiology, surgery, behavioral health, oncology, obstetrics, digital mammography, diagnostic imaging and more. The hospital is a Level II Trauma Center, an Accredited Chest Pain Center, Joint Commission Accredited and Chest Pain Center Certified.

Adventist GlenOaks Hospital has nearly 60 beds (hospital rooms) designated for patients with behavioral health concerns. Adults experiencing acute crises or ongoing or serious mental illness may be admitted to the inpatient treatment program. Physician-directed programs offer intensive, holistic care on a short-term basis. The inpatient Behavioral Health Center includes four hospital units focusing on the different needs of specific patient groups. Within each unit, staff and programs are targeted to the unique needs of that patient sector. Specialized units include:

1. Geriatric patients, including diagnoses of Alzheimer's and other dementias.
2. Chronic (long-term) psychiatric disorders.
3. Acute (crisis oriented) mental health issues.
4. Less severe or shorter-term needs.

## **Findings**

The hospital has a Restraint Management policy that is used company wide, meaning that it is used for both medical and behavioral health patients in the various states that the company serves. The policy includes a Restraint Management Addendum that addresses the mandates staff members are to follow when using restraints in the Adventist Midwest Health region (GlenOaks being part of this region). The Addendum policy states that restraints and/or seclusion shall not be used as a means of punishment, coercion, retaliation, discipline or for the convenience of the staff. The policy states that all patients in restraints shall be reassessed, monitored and reevaluated minimally every two (2) hours, or more frequently, based upon the patient's condition and/or physician's order, after application of a restraint device. The policy goes on to state that for patients that are displaying violent, self-destructive behavior that are in restraints must be continuously monitored and documentation of continuous monitoring will occur every 15 minutes. The 15-minute Restraint Monitoring Patient Care document records hygiene/elimination.

At the site visit, in addressing the allegation that a consumer was not released to use the bathroom free from restraints, the staff member stated that consumers are not released to use the bathroom. She stated that consumers are given bedpans when needed. She stated that if a consumer is stable enough to be released to use the bathroom, then the consumer is stable enough to be released from the restraint. It was indicated that data is collected on restraint usage and provided to the Quality Assurance department.

Regarding the allegation that the hospital does not provide admission information or rules, the HRA was given a copy of the Patient Handbook that is given to all consumers at the time of admission. The Handbook is included in the admission packet and includes information such as safety, visitation, and unit expectations (use appropriate language, maintain personal boundaries, maintain personal hygiene, etc.) as well as a description of the treatment team and program. When asked if management observes the admission process, it was stated that the admission process is audited and monitored; an audit is performed at least two times per month. The charge nurse performs an overview and spot checks are performed on documentation as part of Quality assurance. It was also stated that a daily community meeting is held at which time the Patient Expectations process is reviewed along with patient rights and responsibilities.

## **Conclusion**

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 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, it is concluded that consumers are given information at the time of admission regarding unit expectations/rules; the allegation is unsubstantiated.

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-108, "restraint may be used only as a therapeutic measure to prevent a recipient from causing physical harm to himself or physical abuse to others. Restraint may only be applied by a person who has been trained in the application of the particular type of restraint to be utilized. In no event shall restraint be utilized to punish or discipline a recipient, nor is restraint to be used as a convenience for the staff. (f) Restraint shall be employed in a humane and therapeutic manner and the person being restrained shall be observed by a qualified person as often as is clinically appropriate but in no event less than once every 15 minutes. The qualified person shall maintain a record of the observations. Specifically, unless there is an immediate danger that the recipient will physically harm himself or others, restraint shall be loosely applied to permit freedom of movement. Further, the recipient shall

be permitted to have regular meals and toilet privileges free from the restraint, except when freedom of action may result in physical harm to the recipient or others.”

The Mental Health Code (MHC) mandates that a consumer have toilet privileges free from restraint except if that freedom results in physical harm to the recipient or others. It was stated that if a consumer is stable enough to be released from restraints to use the bathroom, then the consumer is stable enough to be released from the restraint. Although in theory the HRA concurs, the MHC contains a provision that the consumer be free from the restraint prior to the permanent release for toilet privileges unless such release would result in physical harm.

### **Recommendation**

Should a consumer request to use the restroom free from the restraint, the consumer must be permitted the toilet privileges free from the restraint, except when freedom of action may result in physical harm to the consumer or others.

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## **RESPONSE**

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

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November 17, 2015

Arthur A Savage, Vice Chairperson  
North Suburban Regional Human Rights Authority  
9511 Harrison Street W-335  
Des Plaines, IL 60016-1565

**RE: HRA #15-100-9020**

Dear Mr. Savage,

Thank you for your letter, dated November 4, 2015, summarizing the findings of the investigation into the above referenced case. Our response to the recommendation by the Commission is addressed below.

1. **“Should a consumer request to use the restroom free from the restraint, the consumer must be permitted the toilet privileges free from the restraint, except when freedom of action may result in physical harm to the consumer or others.”**

Response: When a patient requests to use the toilet while restraints are being utilized, staff continuously evaluates to determine if the patient can be released from restraints without causing physical harm to self and/or others.

We would like to thank you for your recommendations and welcome the opportunity to work with the Commission to ensure patient rights are not violated. If additional information is needed, please do not hesitate to contact me at the number below.

Sincerely,

A handwritten signature in black ink that reads "Kathryn Petrovic".

Kathryn Petrovic, MSN RN-BC  
Director, Behavioral Health Department  
Adventist GlenOaks Hospital  
630-545-5105