



FOR IMMEDIATE RELEASE

HUMAN RIGHTS AUTHORITY- CHICAGO REGION

REPORT 17-030-9008

JOHN J. MADDEN MENTAL HEALTH CENTER

Case Summary: The HRA did not substantiate the complaint that the facility did not follow Mental Health Code requirements when a patient was allegedly given forced emergency medication for no adequate reason.

INTRODUCTION

The Human Rights Authority of the Illinois Guardianship and Advocacy Commission opened an investigation after receiving a complaint of possible rights violations at John J. Madden Mental Health Center (Madden). It was alleged that the facility did not follow Mental Health Code requirements when a patient was allegedly given forced emergency medication for no adequate reason. If substantiated, this would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5/100 et seq.).

Madden Mental Health Center is a 155-bed, Illinois Department of Human Services (DHS) facility located in Hines, Illinois.

To review these complaints, the HRA conducted a site visit and interviewed the Acting Medical Director, the Nurse Manager, the Quality Management Director and the Director of Nursing. Hospital policies were reviewed, and the recipient's clinical records were reviewed with written consent.

COMPLAINT SUMMARY

The complaint alleges that a recipient was administered forced psychotropic medication for no adequate reason.

FINDINGS

The clinical record shows that the recipient was admitted to Madden on 8/11/16 and discharged on 8/30/16. During this time, the record shows, she was administered forced emergency treatment on three occasions:

8/14/16 at 5:35 p.m. Nursing Progress Notes state, "Olanzapine 10 mg IM [intramuscular], Diphenhydramine 25 mg IM given as emergency meds with ROR [Restriction of Rights] per doctor's orders. Extremely agitated, screaming, yelling, spitting all over the floor, very disruptive, not eating or showering since admission. Unable to calm down with verbal redirection, when staff tried to redirect [her she] slammed the door, kicking night stand. Agitated, paranoid, delusional, imminent danger to self and others." A Restriction of Rights Notice is included for this event and it describes the reasons for the restriction: "Extremely agitated, screaming, yelling, spitting all over on the floor, very disruptive, not eating or showering slamming door, kicking night stand and unable to calm down with verbal redirections, imminent danger to self/others. Dr. notified Xyrex 10 mg IM, Diphenhydramine 25 mg IM given." The Notice states that the recipient refused to state her preferences for emergency treatment and that she wished no one to be notified.

8/15/16 at 12:00 p.m. Nursing Progress Notes state, "Emergency medication Olanzapine 10 mg and Ativan 1 mg IM given in right deltoid muscle. Patient extremely agitated, screaming and yelling. Very disruptive in the milieu. Not eating or showering. Spitting all over the floor, not listening to verbal redirection. Extremely agitated. Imminent danger to self and others." A Restriction of Rights Notice is included for this event and it describes the reasons for the restriction: "Patient extremely agitated, screaming and yelling. Very disruptive, not showering or eating spitting all over the floor and Ativan 1 mg IM given in right deltoid muscle. Imminent danger to self and others." The Notice states that the patient refused to designate preferences for emergency treatment and that she wished no one to be notified.

8/22/16 at 8:15 a.m. Nursing Progress Notes state, "Restriction of Rights/ emergency meds given. Patient is screaming and yelling, slamming door, spitting on the floor. Verbal redirection ineffective. Olanzapine 10 mg IM given injection to left deltoid muscle with Restriction of Rights. A Restriction of Rights Notice is included for this event and it describes the reason for the restriction: "Patient extremely agitated screaming and yelling slamming door spitting on the floor, verbal redirection ineffective. Dr. ordered Olanzapine 10 mg IM given injection left deltoid muscle." The Notice states that the patient refused to designate preferences for emergency treatment and that she wished no one to be notified.

A physician statement of decisional capacity is included in the record as well as informed consents for all medications signed by the recipient.

FACILITY REPRESENTATIVES' RESPONSE

Facility representatives were interviewed about the complaint. They indicated that the recipient was very ill when she came to the facility and suffered from lifelong repeated and extensive hospitalizations. Although she initially required emergency medication several times, after her scheduled medication was adjusted she improved considerably. Staff indicated that they make careful and deliberate determinations for emergency medication and they showed that this recipient had on two occasions been ordered emergency medication and it was then cancelled when she was able to calm herself. Staff felt that the recipient exhibited a threat of imminent physical harm in the instances when she received emergency injections. Staff were

asked about the recipient's preferences for emergency treatment and they indicated that she had been asked several times for this information however she refused to identify any preference.

STATUTES

The Mental Health Code guarantees all recipients adequate and humane care in the least restrictive environment. In determining whether care and services are being provided in the least restrictive environment, the facility shall consider the views of the recipient, if any, concerning the treatment being provided. The recipient's preferences regarding emergency interventions under subsection (d) of Section 2-200 shall be noted in the recipient's treatment plan. Section 2-200 d states:

"Upon commencement of services, or as soon thereafter as the condition of the recipient permits, the facility shall advise the recipient as to the circumstances under which the law permits the use of emergency forced medication under subsection (a) of Section 2-207, restraint under section 2-208, or seclusion under Section 2-109. At the same time, the facility shall inquire of the recipient which form of intervention the recipient would prefer if any of these circumstances should arise. The recipient's preference shall be noted in the recipient's record and communicated by the facility to the recipient's guardian or substitute decision maker, if any, and any other individual designated by the recipient. If any such circumstances subsequently do arise, the facility shall give due consideration to the preferences of the recipient regarding which form of intervention to use as communicated to the facility by the recipient or as stated in the recipient's advance directive."

The Mental Health Code describes the requirements for the administration of psychotropic medication and its refusal:

"If the services include the administration of...psychotropic medication, the physician or the physician's designee shall advise the recipient, in writing, of the side effects, risks, and benefits of the treatment, as well as alternatives to the proposed treatment, to the extent such advice is consistent with the recipient's ability to understand the information communicated. The physician shall determine and state in writing whether the recipient has the capacity to make a reasoned decision about the treatment. If the recipient lacks the capacity to make a reasoned decision about the treatment, the treatment may be administered only (i) pursuant to the provisions of Section 2- 107 [to prevent harm]...." (405 ILCS 5/2-102 a-5).

Should the recipient wish to exercise the right to refuse treatment, the Mental Health Code guarantees this right unless the recipient threatens serious and imminent physical harm to himself or others:

"An adult recipient of services...must be informed of the recipient's right to refuse medication... The recipient...shall be given the opportunity to refuse generally accepted mental health or developmental disability services, including but not limited to medication... If such services are refused, they shall not be given unless such services are necessary to prevent the recipient from causing serious and imminent physical harm to the recipient or others and no less restrictive alternative is available. The facility director shall inform a recipient...who refuses

such services of alternate services available and the risks of such alternate services, as well as the possible consequences to the recipient of refusal of such services" (405 ILCS 5/2-107).

FACILITY POLICY

Madden provided their policy and procedure regarding Refusal of Services/ Psychotropic Medication (Section No. 200 Patient Rights Specific). It states, "In compliance with the Illinois Mental Health and Developmental Disabilities Code and Department of Human Services directives, an adult patient (age 18 and over), or a patient's guardian of person, if any, are to be given the opportunity to refuse generally accepted mental health services, including but not limited to medication. If such services are refused, they are not to be given unless such services are necessary, based upon clinical judgement of an MD or RN, in order to prevent the patient from causing serious and imminent physical harm to self or others or are court ordered. The patient or guardian who refuses such services is to be informed of the clinically appropriate alternate services available and the risks of such services, as well as the possible consequences to the patient of refusal of such services."

CONCLUSION

The clinical record for this recipient's hospitalization indicates that she received forced emergency medication on three occasions and that on two other occasions the medication was ordered but then cancelled after the recipient was able to calm herself. For the three forced emergency medication situations the record includes progress notes as well as Restriction of Rights Notices, both of which describe a level of dangerousness that might necessitate an emergency response. Additionally, the record includes all the Code mandated requirements regarding the administration of psychotropic medication. The HRA does not substantiate the complaint that the facility did not follow Mental Health Code requirements when a patient was allegedly given forced emergency medication for no adequate reason.