FOR IMMEDIATE RELEASE

REPORT 17-050-9009 Andrew McFarland Mental Health Center

INTRODUCTION

The Human Rights Authority (HRA) opened an investigation after receiving complaints of potential rights violations at Andrew McFarland Mental Health Center in Springfield. The allegation is that a patient's mental health information was shared without authorization.

Substantiated findings would violate facility policy and protections under the Mental Health and Developmental Disabilities Confidentiality Act (740 ILCS 110).

McFarland is a Department of Human Services hospital that cares for civil and forensic populations. Staff from administration and the patient's treatment team were questioned about the matter and relevant facility policies were reviewed, as were records with consent.

Complaints say that thirty-five pages of the patient's file were sent to a psychologist without his guardians' authorization. The guardians arranged an assessment with the psychologist on their own and took him to the appointment on discharge from the hospital. Allegedly, they never mentioned the appointment until they were leaving, and a social worker faxed the information as the appointment was underway.

<u>FINDINGS</u>

According to the administrator, the guardians informed members of the treatment team about the outside appointment during the discharge process. The information in question was subsequently entered in the patient's discharge summary, which, as per protocol, was sent to various providers including this psychologist to ensure appropriate linkage services.

The patient's social worker and his psychiatrist stated that contrary to the complaint, they were aware of the guardians' plan to see the psychologist prior to discharge and were told about it on multiple occasions. In fact, his time of discharge was arranged to get him straight to the appointment and avoid going home first. The guardians were concerned about getting him back in the car once he was at home.

The staff also verified that a transition record that included the psychologist's information among other providers was prepared prior to discharge and was reviewed and signed before the patient left the hospital.

A Discharge Summary/Transition Record totaling thirty-five pages including a fax cover sheet was reviewed. It was sent to the psychologist's office in a neighboring state at 2:37 p.m. on the day of the appointment; it showed that the discharge time was earlier that day at noon, and it was signed by a guardian at noon. Two agencies responsible for planning, providing and/or monitoring services were listed, one being the psychologist's agency. Instructions to the patient and guardians were documented as well. It said that the transition record had been reviewed with them as certified by the social worker's signature. A Health information management staff signed the record certifying that she faxed it to the aftercare facility at 2:30. The record contained the typical service transfer information such as the patient's hospital experiences and responses, current mental and medical conditions and medication. A signed authorization to release information was not included.

CONCLUSION

McFarland's Discharge Planning and Aftercare Procedures policy (#TS800) states that it is the responsibility of hospital staff and community providers to assure prompt linkage and continuity of care through adequate case coordination efforts. The discharge summary should confirm the need for aftercare services and it is expected that the provider will have in person contact within twenty-four hours of discharge. If an aftercare provider is not a Department of Human Services contracted agency, a signed authorization to release information is delivered to health information management along with the discharge summary, and that department is responsible for sending it to the appropriate aftercare agencies.

Under the Confidentiality Act, records and communications may only be disclosed by authorization from entitled persons including the guardian of an adult recipient (740 ILCS 110/4 and 110/5). Also,

For the purposes of continuity of care, the Department of Human Services (as successor to the Department of Mental Health and Developmental Disabilities), community agencies funded by the Department of Human Services in that capacity, licensed private hospitals, integrated health systems, members of an interdisciplinary team, federally qualified health centers, or physicians or therapists or other healthcare providers licensed or certified by or receiving payments from the Department of Human Services or the Department of Healthcare and Family Services, State correctional facilities, juvenile justice facilities, mental health facilities operated by a county, mental health court professionals as defined in Section 10 of the Mental Health Court Treatment Act, Veterans and Servicemembers Court professionals as defined in Section 10 of the Veterans and Servicemembers Court Treatment Act and jails and juvenile detention facilities operated by any county of this State may disclose a recipient's record or communications, without consent, to each other, but only for the purpose of admission, treatment, planning, coordinating care, discharge, or governmentally mandated public health reporting. (740 ILCS 110/9.2).

While there were no ill intentions by McFarland staff who reviewed the transfer record with the guardian, the facility failed its own policy by not attaching a signed release to the discharge summary that went to an agency that is not Department contracted. A violation is substantiated.

RECOMMENDATIONS

- 1. Reinforce with social work and health information management staff to secure releases before sending discharge/transition records to non-DHS-contracted facilities.
- 2. Add Section 110/9.2 exceptions to policy.

RESPONSE

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



Bruce Rauner, Governor

James T. Dimas, Secretary

McFarland Mental Health Center 901 Southwind Drive • Springfield, IL 62703

May 9, 2017

James Bakunas, HRA Chair Illinois Guardianship and Advocacy Commission # 521 Stratton Building 401 S. Spring Street Springfield, IL 62706

RE: Case #17-050-9009

Dear Mr. Bakunas,

This letter is in response to your recommendations for case # 17-050-9009 dated April 26, 2017 which include:

- -Reinforce with social worker and health information management staff to secure releases before sending discharge/transition records to non-DHS-contracted facilities.
- -Add Section 110/9.2 exceptions to policy.

On May 5, 2017, the Quality Manager met with the Health Information Management staff members to discuss the importance of ensuring there is a current up to date release on file prior to sending discharge information to a non-DHS-contracted facility. On May 8, 2017, the Treatment Services Administrator informed the unit Clinical Directors regarding the need for an active release of information prior to releasing information. The Clinical Directors will be including this information in the monthly unit meetings.

McFarland policy TS800 on Discharge Planning and Aftercare Procedures will be reviewed by PICC in the near future and adjustments will be made as needed.

Thank you for the opportunity to address systems issues that allow our hospital to improve performance and patient safety.

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Sincerely,

Greg Donathan, LCSW Hospital Administrator