



FOR IMMEDIATE RELEASE

North Suburban Regional Human Rights Authority
Report of Findings
HRA #17-100-9003
Elgin Mental Health Center

Introduction

In August 2016, the North Suburban Regional Human Rights Authority (HRA) opened this investigation regarding Elgin Mental Health Center (hereafter referred to as the Center), Forensic Treatment Program after receiving a complaint of alleged rights violations. The complaint accepted for investigation was that a patient's Social Worker was disrespectful when interacting with the patient. It was also alleged that the Social Worker insisted that all of the patient's business mail (Public Health/Social Security correspondence) be opened in his presence.

The rights of patients receiving services at the Center are protected by the Illinois Mental Health and Developmental Disabilities Code (405 ILCS 5).

Patients receiving services at EMHC's Forensic Treatment Program have been remanded by Illinois County Courts to the Illinois Department of Human Services (DHS) under statutes finding them Unfit to Stand Trial (UST) and Not Guilty by Reason of Insanity (NGRI). Placement evaluations determine the most appropriate inpatient or outpatient setting for forensic treatment based on a number of factors including age, gender, mental health diagnosis, and security need. Unless a person is specifically ordered to receive services in an outpatient setting, court ordered referrals under state forensic statutes call for placement in a secure inpatient setting. The Forensic Treatment Program has 344 beds.

Methodology

Relevant policies were reviewed as were sections of the patient's record with authorization. In September 2016, the HRA met with the Social Worker, the unit's Nursing Manager, the Psychologist and the Psychiatrist. This issue was also discussed with the patient whose rights were alleged to have been violated.

Findings

The patient reported to the HRA that he had a money order ready to be deposited in the trust fund. The Social Worker took the money order out his hand, saying that the patient had to write his identification number on the back of the order. The patient told the Social Worker that that was not necessary. The patient reported that the Social Worker gave the money order back, saying - then take care of it yourself, further saying that it is this type of attitude that is preventing the patient from getting discharged. The patient reported that this exchange was disrespectful. Regarding the mail, the patient reported that he does not feel that his Social Security correspondence needs to be opened in the presence of a staff member.

At the site visit, the patient was described as being argumentative, loud, wanting to always be right and becomes upset when things do not go his way. It was stated that the patient is highly

addicted to nicotine, and when his grounds pass is pulled which prevents him from smoking, he becomes increasingly uncompliant. It was offered that during the time of this complaint (July 2016), his pass had been pulled. He was often described during the course of the meeting as disrespectful. When asked to define the disrespectful behavior, it was stated that the patient becomes loud and talks over the person talking to him. When asked if he swore or threatens staff, it was stated that this patient does not show these behaviors. The Psychiatrist noted on a few occasions that the patient is doing much better now.

The Social Worker remembered the incident with the money order. He stated that it is facility procedure to have the patient write his/her identification number on the back of the order which ensures accurate transactions at the Trust Fund. He did not recall the entire exchange, but remembered that he told the patient that he needed to write the ID number on the back of the check per policy, and further telling the patient that this procedure is also common when doing community banking. He stated that the patient began to argue, saying that they knew him in the Trust Fund and that this was not necessary. The Social Worker stated that he then left it alone; he did not inquire any further about the money order. He stressed to the HRA that at no time was he disrespectful to the patient. The HRA reviewed the Center's patient Trust Fund policy and noted that it states that deposits of monies into the Trust Fund require the signed authorization of the patient and the patient's DHS (Department of Human Services) identification number.

Regarding the mail, it was stated that all personal mail must be opened in the presence of a staff member to ensure that it does not contain contraband and/or money. This is done for safety reasons. It was explained that business correspondence does not need to be opened in the presence of a staff member. However, the Social Worker stated that he does ask the patients on his caseload to open that mail in his presence so that he can make, for example, a copy of documents such as insurance card, social security card, etc. If the patient does not want to do this, that is the patient's choice.

The Center's Patient Mail policy states (in part) that it is the policy of the Center, that patients shall be permitted unimpeded, private, and uncensored communication by mail with persons of their choice. Unimpeded, private and uncensored communication by mail may be reasonably restricted only in order to protect the patient or others from harm, harassment, or intimidation. The policy goes on to state the procedure, which documents that prior to handing mail to the patient receiving it, unit staff shall inform the patient that staff much check the mail for contraband, check, money orders and money in excess of the applicable program limits. If the patient agrees to the inspection, the patient shall open the mail in the presence of a staff member.

The Center's Code Of Ethics policy states (in part) that acceptable behavior promotes teamwork and communication among all employees and patients. It includes courtesy, active listening, responsiveness to requests and participation in planning and team action. The Interpersonal Relations Between Staff and Patients policy states (in part) that staff shall relate to patients in an objective, ethical, professional, and humane manner which demonstrates an awareness of the formal helping relationship between the employee and the patient for which the employee receives monetary compensation. The human rights and dignity of patients shall be respected at all times.

Conclusion

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-103, "Except as provided in this Section, a recipient who resides in a mental health or developmental disabilities facility shall be permitted unimpeded, private, and uncensored communication with persons of his choice by mail, telephone and visitation. (a) The facility director shall ensure that correspondence can be conveniently received and mailed, that telephones are reasonably accessible,

and that space for visits is available. Writing materials, postage and telephone usage funds shall be provided in reasonable amounts to recipients who reside in Department facilities and who are unable to procure such items. (b) Reasonable times and places for the use of telephones and for visits may be established in writing by the facility director. (c) Unimpeded, private and uncensored communication by mail, telephone, and visitation may be reasonably restricted by the facility director only in order to protect the recipient or others from harm, harassment or intimidation, provided that notice of such restriction shall be given to all recipients upon admission.”

All personal mail must be opened in the presence of a staff member to ensure that it does not contain contraband and/or money. The patient is not required to open business correspondence in the presence of a staff member; the allegation is unsubstantiated.

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-103, “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.”

The HRA cannot ignore the claim that the patient felt disrespected; however no evidence was found to support the claim; the allegation is unsubstantiated. However, the HRA takes issue with the statement that the patient is disrespectful. This implies that the staff member is taking the patient's behavior personally and/or that it is directed toward him. Center administration must ensure that all staff members relate to the consumers in an objective and professional manner, that includes courtesy, active listening, and responsiveness to requests.

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*

Illinois Department of Human Services

James T. Dimas, *Secretary*

**Division of Mental Health – Region 2
Elgin Mental Health Center**

RECOVERY IS OUR VISION

Recovery is a Personal Journey of Hope, Healing, Growth, Choice, and Change

October 16, 2017

Ms. Patricia Getchell- Chairperson
North Suburban Regional Human Rights Authority
9511 Harrison Street, W-300
Des Plaines, IL 60016-1565

Re: HRA #17-100-9003

Dear Ms. Getchell:

Thank you, as always, for your thorough review. We are happy to hear these allegations were unsubstantiated. We agree that all staff should relate to patients in an objective, ethical, professional, and humane manner. All clinical staff are required to complete annual competencies that include effectively demonstrating the vision and principle of recovery as evidenced by displaying respect and empathy when engaged with patients, encouraging patients with hope and positive expectation for recover, demonstrating respect and validating cultural and personal beliefs, values, feelings, enabling choice whenever possible, and treating patients in a dignified and respectful manner.

To this end, new staff receive in-person training with a Hospital based Mental Health Recovery Specialist, and receive training on Introduction to Recovery, Hope and Resiliency, Applying the Concept of Recovery, Facilitating Recovery Through Communication, and Introduction to Trauma Informed Care. Annual training is provided with a minimum of 2 hours of recovery oriented training. Retraining is provided when opportunities for improvement in the staff-patient interaction are identified.

We strive to provide safe and therapeutic care to all our patients housed in our Forensic Treatment Program. If I can be of any further assistance, please contact me.

Please feel free to include our response with any public release of your Report of Findings.

Sincerely,

Brian Dawson, B.S.
Hospital Administrator

BD/JP/aw