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North Suburban Human Rights Authority  
Report of Findings  
Vista Health System  
HRA #17-100-9004

The North Suburban Regional Human Rights Authority (HRA) of the Illinois Guardianship and Advocacy Commission has completed its investigation of alleged rights violations at Vista Health System. In September 2016, the HRA notified Vista Health System of its intent to conduct an investigation, pursuant to the Guardianship and Advocacy Act (20 ILCS 3955). The complaint alleged that staff members' routinely administer psychotropic medication to minor mental health patients without consent from a parent/guardian and without a physician's order.

If found substantiated, the allegation would violate the Mental Health and Developmental Disabilities Code (405 ILCS 5).

The HRA was not provided with specific patient information, therefore the investigation focused on provider policy and practice. Upon receipt and review of the requested policies, a site visit was conducted at which time the allegations were discussed with hospital personnel.

The HRA acknowledges the full cooperation of hospital personnel.

### **Background**

According to its web-site, Vista Health System is a community healthcare provider that that includes two hospitals in Waukegan, Vista Medical Center East and Vista Medical Center West. The health system also has several locations for imaging, patient therapy and physician practices. Vista Health System's Behavioral Health Department (located at the Vista Health West site) offers comprehensive programs for adults, adolescents, children and families. After an initial evaluation, an individualized treatment plan is developed that may involve intensive outpatient care, inpatient care or partial hospitalization. The Department includes a team of psychiatrists, psychologists, licensed therapists, nurses and support staff that create an atmosphere of encouragement and help patients heal. The adult program is a 26-bed unit which services adults from the ages of 18-90+. The Child/Adolescent is a 16-bed unit; the child wing contains 6 beds and the adolescent wing contains 10 beds.

### **Findings**

According to hospital policy, patients and/or the patient's guardian/legal representative will be involved in the process of the patient's care. In addition to obtaining the patient's general consent to treatment, a specific consent form that documents the patient's authorization for any medications used to treat psychiatric symptomatology is required. All consents must be filed in the patient's medical records. The policy goes on to say that informed consent is the process whereby the prescribing practitioner assures that the patient or the patient's guardian/legal representative has received information about a proposed medication/treatment and the patient, in turn, provides the

prescribing practitioner with information about what is important to him/her. This process, in order to be effective, requires the active participation of both parties, the process ultimately results in the patient making a voluntary decision to allow or not allow the prescribing practitioner to prescribe/administer the medication/treatment. The prescribing practitioner will complete a consent form for all medication prescribed.

A review of the consent form shows that the patient has been given “verbal and written explanations of this medication’s actions, side effects and special precautions indicated. Patient has been informed of his legal right to refuse medication. Patient has verbalized understanding of these explanations.” The consent is signed by the Physician, Patient/Parent/Guardian and a Witness.

Another hospital policy addresses the Department of Children and Family Services (DCFS) guidelines to facilitate timely and legal admission of DCFS clients. This policy states that upon admission, the RN will contact the DCFS consent line for verbal permission for admission, documenting the name of the DCFS worker that gave consent, in addition to the date and time consent was received. If the patient requires the continuation of medication, the RN will request that the RTC (residential treatment center)/group home provide a copy of their consent for the medication. The RN will notify the physician of this is not obtained. While obtaining admission orders, the RN will request from the physician the date and time he will conduct the first staffing. The RN will then fax this information (to summarize) along with: #5, DCFS’s Psychotropic Medication Request Form (if applicable). The policy goes on to state that immediately upon completion of the paperwork identified in #5, the RN will fax to DCFS to their 24-hour available fax line.

At the site visit, it was explained that medication simply is not administered without consent from the patient or parent/guardian or without an order from the Physician. It was stated that the Physician reviews all medication risks and benefits with the patient, parent/guardian and addresses all concerns. It was stated that at times the consent is obtained via telephone and the written consent is then obtained as soon as possible.

### **Conclusion**

Pursuant to Section 2-102 of the Illinois Mental Health Code, “If the services include the administration of electroconvulsive therapy or 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. The physician or the physician's designee shall provide to the recipient's substitute decision maker, if any, the same written information that is required to be presented to the recipient in writing.”

Pursuant to the Medical Patient Rights Act (410 ILCS 50/) Section 3, “The following rights are hereby established: (a) The right of each patient to care consistent with sound nursing and medical practices, to be informed of the name of the physician responsible for coordinating his or her care, to receive information concerning his or her condition and proposed treatment, to refuse any treatment to the extent permitted by law...”

To protect patient rights, the hospital has a policy in place to address obtaining informed consent prior to the administration of medication. Based on the available information, the allegation is not substantiated.