



FOR IMMEDIATE RELEASE

North Suburban Regional Human Rights Authority
Report of Findings
HRA #17-100-9017
Elgin Mental Health Center

Introduction

The North Suburban Regional Human Rights Authority (HRA) opened this investigation regarding Elgin Mental Health Center (EMHC), Forensic Treatment Program (FTP) after receiving a complaint of alleged rights violations. The complaint accepted for investigation was that security personnel are not trained in how to properly interact with and/or deescalate mental health patients. It was also alleged that a patient in the forensic program had difficulty filing a grievance with unit personnel.

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 approximately 315 beds.

Methodology

The specific incident that prompted the allegation about the security personnel was investigated by both internal and external entities. Thus the HRA focused its investigation on department policy and practice and reviewed the same. The HRA also met with EMHC personnel to discuss the allegations. The HRA acknowledges the full cooperation of Center personnel.

Findings

The Center's Chief of Security stated that the Department of Central Management Systems (CMS administers various state employee programs and services for both active and retired employees) conducts all the interviews for security personnel positions. The Chief observes each interview and can recommend potential candidates, but CMS has the final decision. All new hires receive eight weeks of On the Job Training –four weeks on the day shift, and two weeks on the afternoon and evening shifts. Each employee also receives CPI (Crisis Prevention Institute is an international training organization that specializes in the safe management of disruptive and assaultive behavior) training provided on-site by certified CPI trainers. The Chief explained that during the training period new employees shadow with a seasoned employee and should they be called to a unit for a code, there is to be no hands-on by the new employee. At the completion of the training period, each new employee must demonstrate competency in the following areas: building checks, walkthroughs, report writing, metal detector hand and walk through scan, squeeze

search (person search), unit search, vehicle transport, vehicle inspection, patrol procedures, response to calls, communication desk, use of radios, Forensic & Goldman (Civil program) Desk, forensic building assignment, patient escorts on and off grounds, processing of new admissions, use of computer, sally port operations, scanning employees, and emergency cut-off switches. In addition, each new employee receives training in identifying, avoiding and reporting any abuse or neglect of a patient. The Chief acknowledged that occasionally they get a *bad apple* and weed him/her out as soon as possible.

The HRA obtained and reviewed a copy of the Security Office job description. It states (in part) that “Under supervision, performs safety and protection work at a state facility enforcing regulations, safety and security controls, responding to disturbance calls and taking the initial trained response to protect lives and property; physically restrains hostile and combative individuals to restore peace and order to permit the application of medication or restraint device; monitors suicidal or homicidal clients; searches for and returns escaped residents; administers first aid, CPR, initial fire response and other emergency procedures when necessary; patrols buildings and grounds checking for breaches of security and unsafe conditions; provides training to less experience officers; prepares written reports of incidents”. Education and experience requires knowledge, skill and mental development equivalent to the completion of high school.

To discuss the allegation that a patient had difficulty filing a complaint, the HRA met with the Unit’s Nursing Supervisor. It was stated that when a patient voices a concern, unit staff are instructed to have the patient complete the complaint form. The form is then given to her so that she can address the issues. She stated that she encourages patients to complete complaint forms, and that she meets with each patient to try to resolve the matter quickly. She stated that she attends the morning community meetings to hear about how the unit is running and address any concerns at that time. The Supervisor offered that she will remind staff to always tell the patient about completing the complaint form. She did say that patients on her unit are often psychotic – citing examples of complaints such as – her piece of bread is bigger than mine; stuff is coming out of the walls, etc. But she stressed that all of these are claims are taken seriously and she tries to help the patient to the best of her ability.

The Center’s Patient/Family/Guardian Concerns & Grievances policy states that patients, families, significant others, and other interested parties have open recourse and opportunity to identify and resolve concerns and complaints concerning treatment, other services, or conditions at Elgin Mental Health Center. The policy goes on to say (in part) that for non- Office of Inspector General (OIG) complaints, staff receiving verbal complaints/concerns on the unit will attempt to satisfactorily resolve the complaint at the unit level, with the involvement of the treatment team or through the community meeting. Staff will hand forms completed by patients to the Nurse Manager or back-up for review and response. Verbal concerns/complaints on the unit that are not resolved within 3 day can be called in to the Recovery Specialist or submitted in writing to the Nurse Manager. Within 2 working days of receipt of complaint, the Nurse Manager will deliver or send a written acknowledgement that the complaint was received. The Nurse Manager will attempt to resolve the complaint and will indicate the proposed solution on the form, as well as whether it was accepted, returning the response to the consumer within 2 working days.

Conclusion

The Mental Health Code calls for adequate and humane care pursuant to an individual service plan. (405 ILCS 5/2-102a). The Center has policies and procedures in place to ensure that security personnel are trained in how to properly interact and/or deescalate mental health patients. Based on these measures and no supporting evidence, the allegation that security personnel are not trained in how to properly interact with and/or deescalate mental health patients is unsubstantiated.

However, the HRA is not naive to the fact that personnel problems can and do occur, and, as stated – sometimes a bad apple is found. Center management must be ever diligent to ensure that all employees interact with every patient with respect and with dignity and that safe measures are taken during a disruptive or assaultive situation.

According to the CMS Conditions of Participation for Hospitals, Patient's Rights (42 C.F.R. 482.13): *A hospital must protect and promote each patient's rights.(a) Standard: Notice of rights--(1) A hospital must inform each patient, or when appropriate, the patient's representative (as allowed under State law), of the patient's rights, in advance of furnishing or discontinuing patient care whenever possible. (2) The hospital must establish a process for prompt resolution of patient grievances and must inform each patient whom to contact to file a grievance. (i) The hospital must establish a clearly explained procedure for the submission of a patient's written or verbal grievance to the hospital.*

The Center has policies and procedures in place to ensure that patients have a means to file a grievance with unit personnel. In addition, the Unit Supervisor seemed very genuine in her explanation that she encourages patients to complete complaint forms and that she addresses all complaints brought to her attention. The HRA acknowledges her offer to remind staff members to have patients complete the form. Based on this information and no supporting evidence, the allegation is unsubstantiated.

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

February 22, 2017

Ms. Patricia Getchell - Chairperson
North Suburban Regional Human Rights Authority
9511 Harrison Street, W-335
Des Plaines, IL 60016-1565

Re: HRA #17-100-9017

Dear Ms. Getchell:

Thank you for your letter of February 8, 2017. I assure you we take very seriously all aspects of the training of our Security Officers, including interactions with and de-escalation of mental health patients. Likewise we take very seriously our patients' rights, including their right to file a grievance and to receive a timely response.

Your review of these matters and report of your findings is appreciated as are your agency's efforts in accomplishing the same. We look forward to continued cooperation in improving the lives of Illinois citizens who suffer from mental illnesses.

I would request that this response be attached to the report and be included with any public release of your Report of Findings.

Sincerely,

Brian Dawson, B.S.
Hospital Administrator

cc: Diana Hogan, Director of Nursing

BD/DH/tms