



FOR IMMEDIATE RELEASE

North Suburban Regional Human Rights Authority
Report of Findings
HRA #17-100-9024
Elgin Mental Health Center

Introduction

In February 2017, the North Suburban Regional Human Rights Authority (HRA) opened an investigation regarding Elgin Mental Health Center (hereafter referred to as Center), Forensic Treatment Program. A complaint was received that alleged that a patient was denied access to the telephone during the scheduled telephone times; a male staff member entered the bedroom of a female patient while she was dressing, and that a patient was given emergency medication absent an emergency.

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 approximately 315 beds.

Methodology

To pursue this investigation, the HRA interviewed the patient whose rights were alleged to have been violated via telephone. Also interviewed, in person, were the Unit's Supervisor, the patient's Case Worker and a representative from the Nursing Department. The HRA requested and reviewed the patient's clinical record with consent.

The HRA acknowledges the full cooperation of Center personnel.

Findings

The clinical record revealed data on a female patient who was remanded to the Department of Human Services when she was found Unfit to Stand Trial in October 2016. She was admitted to the Center in November 2016 for fitness restoration. She was found fit to stand trial in late December 2016.

The record contained a 90-day progress report that documented that since admission, the patient has "been highly opinionated but appropriate and logical. She is noted to react to staff in varying but nonaggressive ways overall, depending on her perceived level of mutual respect or lack thereof." The patient was also noted to be very demanding and assertive, and that she has appropriate interactions with the majority of her peers.

The chart contained a few entries pertaining to telephone use. One entry noted that she was talking to her lawyer; another entry noted that she demanded to talk to her lawyer and she was

allowed to use the telephone. A few entries noted that she was on the telephone either after her time was up or on the telephone when it was not her telephone time. One entry noted that she was on the telephone after two calls; the telephone was subsequently turned off. The patient responded to this by saying staff were targeting her.

At the site visit, it was stated that the unit has one telephone and that the other telephone is broken and will not be getting fixed. Patients are asked to sign-up to use the telephone daily, getting two fifteen-minute calls per shift. It was further stated that patients can use the designated attorney telephone and that a patient can use the telephone in his/her Social Worker's office.

The FTP Phone procedures policy states that patients shall be permitted telephone communications in compliance with the Illinois Mental Health and Developmental Disabilities Code. Telephones shall be reasonably accessible during the hours of 6:30 a.m. and 10:00 p.m., and telephone usage shall be provided in reasonable amounts to patients (15 minutes).

When discussing the allegation that a staff member entered the room while the patient was dressing, Center personnel stated that this absolutely could have happened. The unit employs both male and female Security Aides and they simply cannot have male staff members work only with male patient and likewise for females. It was stated that when a bedroom door is closed (the door cannot be locked) staff members are instructed to knock once and briefly wait for a response; if no response is given, a second knock is given but then they must enter the room at that point for safety reasons. Staff members interviewed had not received a complaint from the patient regarding this allegation.

The FTP has a Safe Practices policy that states (in part) that it is the expectation of the program that "staff working with Forensic patients as well as within the Forensic Complex shall conduct themselves in a manner that ensures the safety of the patients, co-workers, visitors, and themselves. Staff must use prudence and caution while carrying out their duties. Staff must utilize safety and safe practices at all times. Failure to do so can create dangerous situations."

In looking into the allegation that the patient was given emergency medication absent an emergency, documentation showed one incident where the patient was observed as hyperverbal, manic, agitated, muscles tense, attempting to invade staff space, yelling, fists clenched, hostile, displaying riot-like behavior-yelling at others about staff, unresponsive to redirection. She was monitored, counseled and refused to go to her room after several prompts by different staff members. A physician order was obtained and medication was subsequently given. The Notice Regarding Restriction Rights stated that the patient's individual preference of seclusion was not utilized as it was not a safe option.

At the site visit, the Nurse stated that before medication is given, all least restrictive measures are attempted, such as, talking to the patient, asking the patient to go to his/her room to calm down, removing other patients' from the area, calling security personnel for a walk-thru, etc.. Staff members try to use the patient's preferred emergency preference but sometimes it is not an option.

The Center's Refusal of Services/Psychotropic Medication policy states that (to summarize) an adult patient is to be given the opportunity to refuse 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 to prevent the patient from causing serious and imminent physical harm to self or others or are court ordered. It goes on to say that a rights restriction notice must be completed.

Conclusion

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, and that space for visits is available. (b) Reasonable times and places for the use of telephones and for visits may be established in writing by the facility director." Based on the information obtained, the allegation

that a patient was denied access to the telephone during the scheduled telephone times is unsubstantiated.

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-102” (a) A recipient of services shall be provided with adequate and humane care and services...” Center personnel explained that a male staff member might have to enter the bedroom of a female patient while she was dressing if that patient did not respond to the knocks on the door. It is concluded that this procedure does not violate patient rights; the allegation is unsubstantiated.

Pursuant to the Illinois Mental Health and Developmental Disabilities Code, Section 2-107, “(a) An adult recipient of services or the recipient's guardian, if the recipient is under guardianship, and the recipient's substitute decision maker, if any, must be informed of the recipient's right to refuse medication or electroconvulsive therapy. The recipient and the recipient's guardian or substitute decision maker shall be given the opportunity to refuse generally accepted mental health or developmental disability services, including but not limited to medication or electroconvulsive therapy. 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.” Based on the documentation, the patient received emergency medication to prevent her from causing serious and imminent physical harm to herself or others. 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*

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

May 9, 2017

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

Re: HRA #17-100-9024

Dear Ms. Getchell:

Thank you for sharing with us your thorough and thoughtful report in the above captioned case. We are glad to hear that these allegations were unsubstantiated.

We look forward to continue working with you and your agency for the welfare of our patients.

Please feel free to contact me if you require any additional information.

Sincerely,

Brian Dawson, B.S.
Hospital Administrator

BD/tms