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**FOR IMMEDIATE RELEASE**

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**METRO EAST HUMAN RIGHTS AUTHORITY  
REPORT OF FINDINGS  
HRA CASE # 18-070-9002  
ALTON MENTAL HEALTH CENTER**

The Metro East Regional Human Rights Authority (HRA) has completed its investigation of a complaint at Alton Mental Health Center (AMHC), a state-operated, medium security mental health care facility located in Alton, Illinois. The facility serves 125 patients between the ages of 18-55. Of that number, approximately 110 (66 male and 44 female) are on the forensic unit. The civil unit houses a maximum of 15 patients and includes one overflow bed which is used for emergency purposes only. Alton Mental Health Center employs 250 staff members to ensure that patients are supervised 24/7.

The allegation being investigated is: The facility violates consumers' rights when it denies certain types of property; the rationale for property denial is inadequate; and the denial is applied inconsistently across the facility.

If found substantiated, the allegation represents violations of the Mental Health and Developmental Disabilities Code (405 ILCS 5).

**METHODOLOGY**

To pursue the investigation, an HRA team interviewed the AMHC Administrator, the Director of Quality Management, as well as other staff, and obtained and reviewed agency policies and the Alton Mental Health Center Consumer Handbook.

**FINDINGS**

The complaint states that a book was restricted by staff after a review due to non-therapeutic content. A Restriction of Rights (ROR) was obtained and the restriction was verified by the HRA to state "after discussion with treatment team and administration it was decided that this book was being denied due to non-therapeutic content on September 6, 2017." The date and time on the ROR was 9/13/17 at 1500, which is 7 days after the book was restricted.

On September 5, 2017, the HRA received a complaint that AMHC staff had restricted a patient from possessing a book due to its non-therapeutic value and the patient was not issued a ROR when the book was restricted.

The HRA Coordinator called AMHC and spoke with the Clinical Nurse Manager (CNM) who stated that the team was split on the decision of not allowing the patient to possess the book. The CNM stated that the patient purchased the book and it was delivered in the mail. All incoming packages are reviewed in a team meeting to ensure they do not qualify as contraband and are then distributed to the patient after the team review. The book is Pop Fiction, and is not pornographic. The book is written by a relationship therapist and is entitled "Lesbian Sex Secrets for Men." The book was reviewed by the Clinical Director and deemed to be non-therapeutic, thus the patient was not allowed the book. The HRA advised the CNM that a ROR had not been issued for the restriction of the book. On 9/6/17, the patient filed a consumer complaint which stated: "The treatment team failed to approve a personal property item (a book) that wasn't ever determined to be harmful. Nor could the treatment team offer an explanation, either verbally or in writing, as to why the book was harmful. This item is not present on the contraband and controlled items list, yet the treatment team refused to issue an IL 462-2004M (ROR)."

9/13/17 Action/Resolution to ROR filed on 9/6/17: "I spoke with (patient) @ approximately 1100 this am and I assured him I would look into the matter later today and no later than Monday... Due to scheduling, this writer was unable to visit with (patient) again until 9/13/17. Restriction of rights was given for above mentioned book.

A ROR was issued that stated, "after discussion with treatment team and administration it was decided that this book was being denied due to non-therapeutic content on September 6, 2017." The date and time on the ROR is 9/13/17 at 1500.

The patient and staff members, when interviewed by the HRA Coordinator, stated that the Clinical Director stated that reading a book is not a right, it is a privilege.

In previous conversations between the HRA and the Clinical Director, he has also threatened to restrict makeup, jewelry and all pornography because these items have no therapeutic value.

AMHC Policy 2B.01.008 Patients' Rights and the Restriction Thereof states: "Patients' rights may be temporarily restricted only when there is a need to protect the patient and/or others from harm, harassment or intimidation... This determination should be made after thorough clinical assessment of the treatment team, or, at minimum, by a registered nurse and licensed physician...A Notice Regarding Restricted Rights of Individuals (IL462-2004M must be completed in its entirety each time patient rights are restricted." AMHC's Consumer Handbook states that patients "may have personal property, provided it is not on the contraband list."

### **MANDATES/REGULATIONS**

According to the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-104):

Sec. 2-104. Every recipient who resides in a mental health or developmental disabilities facility shall be permitted to receive, possess and use personal property and shall be provided with a reasonable amount of storage space therefor, except in the circumstances and under the conditions provided in this Section.

(a) Possession and use of certain classes of property may be restricted by the facility director when necessary to protect the recipient or others from harm, provided that notice of such restriction shall be given to all recipients upon admission.

(b) The professional responsible for overseeing the implementation of a recipient's services plan may, with the approval of the facility director, restrict the right to property when necessary to protect such recipient or others from harm.

According to the Mental Health and Developmental Disabilities Code (405 ILCS 5/2-201):

§ 2-201. (a) Whenever any rights of a recipient of services that are specified in this Chapter are restricted, the professional responsible for overseeing the implementation of the recipient's services plan shall be responsible for promptly giving notice of the restriction or use of restraint or seclusion and the reason therefor to:

- (1) the recipient and, if such recipient is a minor or under guardianship, his parent or guardian;
- (2) a person designated under subsection (b) of Section 2-200 upon commencement of services or at any later time to receive such notice;
- (3) the facility director;
- (4) the Guardianship and Advocacy Commission, or the agency designated under "An Act in relation to the protection and advocacy of the rights of persons with developmental disabilities, and amending Acts therein named", approved September 20, 1985,<sup>1</sup> if either is so designated; and
- (5) the recipient's substitute decision maker, if any.

The professional shall also be responsible for promptly recording such restriction or use of restraint or seclusion and the reason therefor in the recipient's record.

### **CONCLUSION**

The Mental Health and Developmental Disabilities Code (405 ILCS 5/2-104) states, every recipient who resides in a mental health or developmental disabilities facility shall be permitted to receive, possess and use personal property and shall be provided with a reasonable amount of storage space therefor, except in the circumstances and under the conditions provided in this Section.

The book, according to the staff and eventual ROR, was restricted solely on the belief that it was non-therapeutic. Being of non-therapeutic value is not an adequate reason to

restrict a patient's right to personal property, thus the HRA substantiates this complaint. The restriction of rights policy states that patients' rights may be temporarily restricted only when there is a need to protect the patient and/or others from harm, harassment or intimidation. An item being of non-therapeutic value does not meet this criteria.

According to the Code, when any rights of the recipient of services are restricted, notice must be given to the recipient. The professional shall also be responsible for promptly recording such restriction or use of restraint or seclusion and the reason therefor in the recipient's record (405 ILCS 5/2-201).

According to the patient staff and documentation on the ROR, a ROR was not issued until 7 days after the restriction occurred, thus the HRA **substantiates** that the patient's rights were violated due to the restriction notification not being issued.

### **RECOMMENDATIONS**

The HRA recommends that Alton Mental Health Center administration recognize that patients have rights to possess personal property and cease in the practice of restricting property outside of safety concerns for the patients. If a patients' rights are restricted due to a safety concern, a ROR must be issued to the patient at the time of the restriction and justification for the restriction must follow the Mental Health and Developmental Disabilities Code.

AMHC should provide training to staff and administration on the Mental Health and Developmental Disabilities Code to ensure that patients' rights to have property are not being violated and the facility is in compliance with the Code.

### **SUGGESTIONS**

The facility should involve patients in the decision-making processes when a team decision is being made.