Mayview State Hospital Closure
Frequently Asked Questions

In keeping with the Department of Public Welfare’s commitment to reduce reliance on institutional care and improve access to home and community-based services for Pennsylvanians living with mental illness, the DPW plans to close Mayview State Hospital, MSH, by December 31, 2008.

Mayview State Hospital currently serves 225 individuals from Allegheny, Beaver, Lawrence, Greene and Washington counties on its 335-acre campus with a staff of approximately 502 people. The hospital currently has a total operating budget of $63 million.

The department is also exploring the consolidation and privatization of forensic services currently provided by the state hospital system. The state hospital’s forensic centers currently serve approximately 217 patients at three locations: Mayview, Norristown and Warren State Hospitals. In combination, these facilities serve the entire Commonwealth of Pennsylvania. DPW will issue a request for proposals to create two privately run, regionally based forensic facilities located in eastern Pennsylvania on the campus of Norristown State Hospital and in western Pennsylvania at Torrance State Hospital.

1. Why is DPW closing Mayview State Hospital?
   People living with serious mental illnesses can and do recover and the department believes that they are best served in community settings through an array of services and supports. In addition, people formerly served in state hospital settings are enjoying great success in the community.

   Mayview was chosen for the following reasons:
   • Options for extended acute care and treatment services at other hospitals in the community;
   • Alternative employment opportunities for affected staff; and
   • Counties served by MSH are in the HealthChoices managed care program for Medical Assistance recipients.

2. Why is there such a focus on community-based care?
   The department is committed to building community partnerships and providing a unified approach to funding for community services and supports that promote recovery for people with mental illnesses while reducing our reliance on institutional care. Our intent is to expand the existing community infrastructure and invest millions of dollars used to run more restrictive, costly hospital services to the community to enhance and sustain recovery-supporting services as well as continue to improve Pennsylvania’s mental health service delivery system.

   The department estimates that all 225 residents will be discharged into less restrictive, community-based settings. Funding for community placements will be provided to county mental health/mental retardation programs for residents who are discharged from MSH through the Community-Hospital Integration Projects Program (CHIPP).

3. What is the time line for closure of Mayview State hospital?
   The department expects to complete the closure of the state hospital on or before December 31, 2008.

4. What will happen to the individuals living at Mayview State hospital? What types of illness do the current residents have? Are they violent?
   A majority of people receiving services at MSH have a mental illness that is stabilized with treatment, support and supervision. Diagnoses include: major depression, bi-polar disorder, schizophrenia, personality disorders and substance abuse disorders as part of a “co-occurring” condition. Some of the individuals have other medical conditions such as diabetes and obesity.
The link between violence and mental illness is promoted by the news and entertainment media however, most people with mental illnesses are not violent — they are people who have an illness and that can be treated.

5. Where will people live?
Each person will participate in a series of assessments (clinical, peer-to-peer/consumer and family) in order to determine the person’s wishes and needs. Placing individuals in the community will be done through an array of living options, including group homes, public housing and living with family. People who are determined to be in need of continuing, inpatient treatment will be considered for transfer to another state hospital.

DPW will work with its partners in the five-county service area to have people return to their home communities if that is their choice. Approximately 80 percent of MSH residents are from Allegheny County. The other individuals are from the surrounding counties of Beaver, Lawrence, Greene and Washington.

6. When will admissions end?
This will be determined in the very near future and be announced publicly at that time.

7. What will happen to a person if he/she is not successful in the community?
Every effort will be made to ensure that individuals are served in placements that are based on the person’s individual need. However, if the individual does not feel the placement is a viable solution for him/her, the department will work with the individual to find a suitable alternative support.

8. Will the people who move from Mayview join the ranks of the homeless in the years to come?
DPW has a strong track record of assuring that individuals leaving state hospitals do not become homeless. The counties in the Mayview service area are developing specialized housing resources and working with local housing and homeless shelters as well as local county jails to ensure that the individuals we serve do not become homeless and are not incarcerated.

DPW has been very proactive in working with those moving into the community to ensure they do not become homeless or placed in prisons or jails. A total of 2,539 individuals have been discharged and 12,387 individuals received diversionary services through the Community-Hospital Integration Program Project (CHIPP) from 1992 – 2007. Through this process, the department has transferred over $190 million that formerly supported those beds to community-based residential, rehabilitation and support programs. DPW works with former residents of the state hospital through the CHIPP which shows that less than two percent of those individuals were incarcerated.

9. What services are available in the community? Is there capacity to accept this number of people?
The local county human service systems have the capacity to serve people who will be discharged from MSH. The five counties utilizing MSH have a strong history of supporting individuals with mental illness and have all been supporting individuals discharged from MSH successfully. Each county has established a track record of over eight years with the management of the HealthChoices behavioral health program that provides for additional treatment and support options for the community. The MSH Service Area Plan has identified an array of community-based services that will be enhanced or developed to support this initiative.
These services include:
- Specialized personal care services;
- A variety of supported living arrangements;
- Long Term Structured Residence (LTSR) for a small group of individuals;
- Assertive community treatment teams;
- Peer-to-Peer services;
• Representative payee programs;
• Targeted case management; and
• Vocational opportunities.

10. Where will the community placements be located?
Community placements, where applicable will be located in the county of residence for the patients of Mayview State Hospital.

11. Why are some patients being transferred instead of placed in the community?
If a small number of patients at Mayview State Hospital are assessed as being in need of continued treatment, the most appropriate state hospital placement will be determined at that time. DPW fully expects to continue to develop additional community services for the people who will not be directly discharged during the implementation of the closure.

Torrance State Hospital has been designated for the consolidation of clinical services for the five counties served by MSH and will accept admissions from this service area if needed, after a date to be determined later.

12. How many state hospitals are there now and how many people live there?
Since fiscal year 1994-95, the patient census at Pennsylvania’s eight state hospitals decreased from 4,934 to 1,927 as of June 2007.

<table>
<thead>
<tr>
<th>Civil State Hospital</th>
<th>Census as of June 2007</th>
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<tbody>
<tr>
<td>Allentown</td>
<td>175</td>
</tr>
<tr>
<td>Clarks Summit</td>
<td>225</td>
</tr>
<tr>
<td>Danville</td>
<td>175</td>
</tr>
<tr>
<td>Norristown</td>
<td>270 (Civil) 120 (Forensic)</td>
</tr>
<tr>
<td>Torrance</td>
<td>220</td>
</tr>
<tr>
<td>Warren</td>
<td>200 (Civil) 27 (Forensic)</td>
</tr>
<tr>
<td>Wernersville</td>
<td>220</td>
</tr>
<tr>
<td>Mayview</td>
<td>225 (Civil) 70 (Forensic)</td>
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13. Who is responsible for monitoring community programs?
The Department of Public Welfare in concert with the County Human Services System monitors the local systems. The DPW licenses residential facilities and other community programs, and provides extensive monitoring for the HealthChoices Behavioral Health Program. In addition, during a closure, the DPW Secretary maintains an active role in assuring a smooth transition. The department maintains daily contact with the facility, has an established management team to monitor progress and maintains a tracking and quality improvement process and a community advisory committee. In addition, the five county programs have in place extensive monitoring including an incident management system.

14. What will happen to the employees and how many are there?
The department will work to provide state hospital staff with employment opportunities at other state operated facilities or with new or existing community programs. This is the process that has proven to be very successful in finding other opportunities for hospital staff in the past, including those affected by the closure of Harrisburg State Hospital.

15. Was the administration dissatisfied with the care individuals were receiving at Mayview State Hospital?
The department is committed to providing all those served at the state hospital with the opportunity to receive treatment and services in the least restrictive setting. DPW is focused on building community partnerships and providing a unified approach to funding of community services and supports that promote recovery for people with mental illnesses and reduce our reliance on institutions. The department will invest millions of dollars currently used to operate
these more restrictive, costly hospital services to the community to develop and sustain recovery-supporting services while continuing to improve the commonwealth’s mental health service delivery system.

16. What’s the mix of professions among the 502 civil section staff?
MSH currently has eight doctors, 51 registered nurses, 14 licensed practical nurses, and 147 psychiatric aides. There are also 40 other direct care staff such as social workers; psychologists; and therapeutic, vocational and recreational staff. There are 38 management employees between the civil and forensic divisions. The remaining staff is a variety of support service staff such as custodial, dietary, maintenance, clerical, financial and other classifications.

17. Will the employees be subject to furlough?
As it has in previous closures, the department will work to provide current hospital staff employment opportunities at other state operated facilities or with new or existing community programs. The department has a strong track record of finding opportunities for hospital staff, including those affected by the closure of Harrisburg State Hospital. The department has not requested furlough authorization at this time.

18. What is the annual budget of Mayview State hospital?
Mayview State hospital has a current operating budget of $63 million annually.

19. What is the cost of a community program versus state hospital programs?
There is a cost associated with closing a state hospital and anticipated savings over time. In the Governor’s budget as passed by the legislature, $18.9 million has been identified to support the discharge of 200 individuals from our state hospitals and this total will include 187 individuals from Mayview during this first year of the closure.

In fiscal year 2004-05, 3,644 individuals were served utilizing approximately 2,100 beds with an average yearly expenditure of $201,940 per bed; while for the same time in the community the dollars spent were considerably less. For example, in fiscal year 2004-05 over 220,000 individuals were served in the community with an average expenditure of under $7,000.

20. Are there alternate uses planned for Mayview State Hospital when it officially closes?
The Pennsylvania Department of General Services is responsible for commonwealth property and will work to determine the future use for the buildings that are vacated after the closure.

21. How many buildings, what kind and how many acres?
Mayview State Hospital is located on a 335-acre campus with 39 buildings, 12 of which are used for patient care and hospital administration.

22. How much money will be saved in the long run?
This initiative is not intended as a net savings to the commonwealth but rather to realign spending to be more appropriately used to serve people in more integrated community settings.

23. When did movement away from state hospitals to communities begin?
Pennsylvania has been on the leading edge of developing local partnerships and community-based service options that promote recovery for people living with mental illness for over 25 years. As a result, we have seen the number of people residing in state hospitals drop by 60 percent from almost 5,000 in the mid-1990’s to the current 1,927 resulting in the successful closure of more than 10 state hospitals during that time.

In 1969, 27,536 individuals were living in Pennsylvania’s mental hospitals. By 1979, the total statewide state hospital census was reduced to 10,573 and resulted in the following state hospital closures:

<table>
<thead>
<tr>
<th>Year</th>
<th>Hospital</th>
</tr>
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<tbody>
<tr>
<td>1979</td>
<td>Hollidaysburg State Hospital</td>
</tr>
<tr>
<td>1980</td>
<td>Retreat State Hospital; Embreeville State Hospital</td>
</tr>
</tbody>
</table>
1981 Eastern Pennsylvania Psychiatric Institute
1984 Dixmont State Hospital
1990 Philadelphia State Hospital
1992 Woodville State Hospital
1995 Fairview State Hospital
1996 Somerset State Hospital
1997 Eastern State School and Hospital
1998 Haverford State Hospital
2006 Harrisburg State Hospital

Most recently, Harrisburg State Hospital closed in 2006. This experience was successful in many ways including:

- 187 individuals were successfully transitioned to community settings
- Positions were found for all staff who wished to stay in employment with the Commonwealth
- Numerous stories of positive life changes as a result of individuals being able to be in the community, some individuals have reunited with estranged family members, have become employed or are enjoying positive community social supports.

24. How does Pennsylvania compare to other states in terms of closing state hospitals and emphasizing community movement?
In 2006 there were 228 state psychiatric hospitals being operated by states totaling nearly 49,000 beds. Across the nation, there are states like Rhode Island who do not operate state mental hospitals while New York currently has 25 such facilities. The median number of state hospitals is three per state. Pennsylvania currently maintains eight state hospitals and one nursing home. Nearly half the states are reorganizing their state hospitals including downsizing, reconfiguring, closing and/or consolidation. In the last two years, four states have closed hospitals, including Maryland, New Jersey, New York and at least seven states -- including Pennsylvania -- intend to close a hospital in the upcoming year. (State Profile Highlights, 2006, NASMHP Research Institute, Inc.)

25. What is the history of the campus?
The hospital was first opened and received the first patients as "Marshalsea" by the city of Pittsburgh on December 20, 1893. There were some 340 patients during the 1890’s. The name of the hospital was officially changed to the Pittsburgh City Home and Hospital at Mayview in 1916. A coal mine opened on the grounds in 1917 and ceased operations in 1956. By 1934, there were 4,200 patients and 450 staff at Mayview. The Commonwealth of Pennsylvania assumed responsibility for approximately 3,200 patients on June 1, 1941.

In 1946, the hospital established an observation unit, which eventually became, in 1974, what is today the forensic center at Mayview.

The grounds started at 243 acres and grew to a maximum of 1,001 before settling at the 335 acres of 2007.

26. Will there be an additional state hospital closure next year?
The department intends to continue the service area planning process to plan for the changing role of the state hospital, continually assess the needs of the individuals currently served and offer every opportunity for individuals to be fully integrated into community life.

27. What are some of our options at this time?
A public hearing will be held on September 10 at the Crown Plaza Pittsburgh South, 164 Fort Couch Road, Bethel Park from 9 a.m. to 11 p.m. to accept comment about the closure from stakeholders, officials and members of the community. Those wishing to provide comments are asked to register by contacting Dorothy Owens at 412-257-6200 or dowens@state.pa.us.