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Update on People Discharged from Mayview State Hospital

Introduction

Mayview State Hospital closed on December 29, 2008. Over the last several years, the five counties in the Mayview service area, Mayview State Hospital, and the Department of Public Welfare (DPW) have developed a recovery-oriented community support planning (CSP) process for people being discharged. These efforts have been coordinated by Allegheny HealthChoices, Inc. (AHCI).

This report provides information on the people discharged with a CSP. Because the CSP process involved the hard work of many people and the development of new resources, we expect that people discharged:

- Have frequent contacts with their CTT or case managers/service coordinators.
- Have stable housing that offers the kind of support people need.
- Have the opportunity to change the services and supports they get in the community if their needs or preferences change.
- Remain safe in the community, with few hospitalizations or incarcerations (or other serious incidents).

While many people discharged have not yet spent much time in the community, this report describes the group's demographics and preliminary data related to housing stability, use of services and supports, and time spent living in the community (rather than in a hospital or criminal justice facility).

Housing Arrangements

People were discharged to a variety of settings. Eighty-four percent of people were discharged to residences with 24-hour staff:

- 26% to long-term structured residences (LTSRs)
- 22% to different types of personal care homes
- 19% to community residential rehabilitation (CRR) group homes or apartments
- 17% other categories combined

Sixteen percent were discharged to community settings without 24-hour staff:

- 8% to independent housing or living with family
- 8% to permanent supported housing or supported housing

Of the people who have spent at least three months in the community, 19% have moved since discharge. About two-thirds of these moves were to a less restrictive setting or setting with fewer supports.

Key Demographics

- Over 50% of people discharged had two or more admissions to Mayview State Hospital
- 25% are 55 years or older, 37% are 45-55 years, 16% are 35-45 years, and 22% are under 35 years
- 61% are male and 39% are female
- 60% are Caucasian and 38% African-American

Service Use

About 72% of people discharged were recommended Community Treatment Team (CTT) services. The rest were recommended some type of case management or service coordination.

- As an evidence-based service, CTT is especially suited for people with significant hospitalization histories and complex needs.
- CTT has provided frequent contact (26% of people had 6-7 average contacts per week, 33% had 4-5 average contacts per week, and 32% had 2-3 average contacts per week) during people's first three months in the community.
- During their first three months in the community, the majority of people with case management saw their case managers at least once per

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week on average (26%), 2-3 times per week on average (41%), or 4-5 times per week on average (14%).

- When considered along with the frequency of people living in 24-hour staffed residences, this preliminary data indicates that people are being seen frequently in the community.
- Use of other behavioral health services with the exception of outpatient mental health has been low. Given that CTT is a team-delivered comprehensive service, people with CTT should generally not need other behavioral health services.

Access to Supports and Activities

For people who were discharged after the closure announcement (August 2007) and have spent at least three months in the community:

- Nearly 75% of people had contact with their peer mentor after discharge. Many peer mentors were involved during the CSP process.
- Only slightly more than 20% of people visited drop-in centers.
- About 80% had some type of contact or support from family, and slightly over 40% used spiritual supports.
- Very few people were either recommended or accessed vocational or educational activities during their first three months in the community.

To learn more or to download a copy of the full report, visit www.mayview-sap.org or www.ahci.org

Incarcerations and Hospitalizations

- During people's first three months in the community, 3% of people were incarcerated one or more times and 6% had some psychiatric hospital days.
- After their first three months in the community, 7% of people were incarcerated and 17% had some psychiatric hospital days.

Other Early Warning Signs and Critical Incidents

- Beginning in June 2008, Allegheny HealthChoices, Inc. (AHCI) developed an online database for reporting early warning signs and critical incidents.
- When these instances are reported, the provider and county monitors discuss what follow-up is necessary to assist the individual in remaining safe in the community.
- 29% of people discharged have had an early warning sign report and 29% have also had at least one critical incident.
- While it is premature to identify trends, this data indicates that providers are reporting incidents and counties are proactively working to address situations.

AHCI, in collaboration with the five counties and DPW, will continue to monitor and report on these domains to ensure that the goals of the closure continue to be met.
This report, along with future reports, will help inform counties and DPW on the successes and challenges of the closure as well as provide context for any quality improvement activities.

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Allegheny HealthChoices, Inc. (AHCI) is a private, not-for-profit and a contract agency for the Allegheny County Department of Human Services' HealthChoices Program.

Our mission is to assure equitable access to quality, cost-effective behavioral health care that promotes positive clinical outcomes, recovery, and resiliency.

AHCI's services include information systems, monitoring and oversight, analysis, training, and technical assistance. We are the project managers for the MRSAP project.