



Recovery and maintaining a healthy, productive life are best achieved when people are a part of the larger community, including individuals with mental illness.

Mayview Regional Service Area Plan

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Counties Enhance Community Services

As a result of one unit closing at Mayview State Hospital in August, the Department of Public Welfare (DPW) will transfer \$3.2 million dollars by the end of 2006 to the five counties in the Mayview service area for service development.

Allegheny, Beaver, Greene, Lawrence, and Washington Counties developed plans for how they will use these funds. Funds will be used to start new services, help the expansion of services, or fill gaps in funding.

Allegheny, Beaver and Washington Counties are using some of the funds to start or expand Community Treatment Team (CTT) services. Greene County is also assessing their need for a CTT. CTTs provide community-based, intensive mental health and addiction treatment to people with serious and persistent mental illnesses, and are an

evidence-based practice. See page 5 for more information.

Each county has also identified county-specific services and supports that will benefit individuals leaving Mayview and individuals already living in the community. The plans range from peer support and drop-in centers to housing, outreach, and forensic services. Highlights include:

Allegheny County started funding a peer mentoring program at Mayview State Hospital through the Peer Support and Advocacy Network (PSAN). See below.

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Peer Mentoring Program Begins at Mayview

Peer Support and Advocacy Network (PSAN), with funding from Mayview State Hospital and Allegheny County, is now operating a Peer Mentor Program at Mayview. The three peer mentors, Kevin Trenney, Christine Ashe, and Mike Moran, will be working with consumers throughout the CSP process to discharge.

In the last several weeks, the peer mentors have been attending social events (the Halloween Dance, fall hayride) and visiting wards. Because they want to cre-

ate friendly, more informal peer relationships outside of the treatment team and ward environment, they will be having a "Peer Mentor Corner" in the Little Store, where many consumers visit daily. They will also go with consumers on visits to the community—some have started already.

The peer mentors are also seeking out indi-

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Former Mayview Patients Thrive in the Community
Please see pages 2 and 5 for interviews with Mary Ellen Gray and Valerie Rotolo, two of the many individuals who live productive, happy lives in the community after Mayview.

Mary Ellen Gray: "Take one day at a time."



Mary Ellen Gray, from Washington County

Mary Ellen Gray lives in Claysville, PA in a Dom Care home. Dom Care, or Domiciliary Care, pairs individuals who are not prepared to live alone with people in the community who provide a family-like living arrangement. According to Ms. Gray and her Resource Coordinator, Lisa Cerciello,

this arrangement is very comfortable and appropriate. When asked about her life now, Ms. Gray answers, "My life is really relaxing and peaceful. I love where I live. I can go swimming. I have all kinds of friends in town. Bonnie [the caretaker] takes great care of us. Even though there are arguments, I try to get over them and work things out."

Ms. Gray has lived with her mental illness for several decades. She has been admitted to Mayview twice. She was most recently discharged six years ago to a group home setting, and moved to her current home about three years ago. Although not currently working, Ms. Gray has worked in the past (in the commu-

nity and at Mayview) and is thinking about finding a job. She takes care of her own bedroom and manages her own money.

Both she and Ms. Cerciello think that the structure and support she receives at her residence and through treatment have helped her remain well in the community. Also, living in a small community, where the main street has shops and restaurants that she can walk to, is very enjoyable. She has very consistently attended her partial program two days a week and taken her medications. Ms. Gray says partial is a "favorite" activity because "it's therapy *and* it's social; I love the counselors who work there."

Ms. Gray is an outgoing, happy person who likes to call other people "honey." She has friends all over town, and knows bank and restaurant employees by name. Although she becomes visibly upset when thinking about some events and people from her past, she remains positive about her life today. She relies on friends and providers like Ms. Cerciello and partial program staff for support. Her advice to other consumers at Mayview is to "take one day at a time. It takes time to get used to everything when you get out of the hospital."

New Service Development, cont.

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Beaver County has expanded their SAFE Gate services to provide special needs outreach case management. Any adult consumer with a special need not being met by traditional services can use the services. Social workers help consumers with phone calls, completing forms, medical appointments, and contacting other agencies for help in starting other support services. They also help consumers deal with utility companies, law enforcement, and transportation services.

Greene County is focusing on housing options for consumers. They are considering expanding Dom Care into a Full Care Residential program. They are also looking to expand a personal care home into an enhanced personal care home, and to expand their Permanent Supportive Housing program.

Lawrence County has proposed to relocate and enlarge their drop-in center. They are also investigating the start up of a residential treatment facility for adults and an enhanced personal care home.

Washington County will soon open a new Crisis Stabilization/Diversion Unit. The four-bed facility will provide services to consumers who need 24-hour intensive help in stabilizing their current symptoms. Consumers can receive treatment at this unit instead of being hospitalized.

Washington County is also developing a second enhanced personal care home for 12 residents in Monongahela. It will offer state-of-the-art personal care services, including assistance with psychiatric rehabilitation, transportation, shopping, keeping appointments, recreational activities, money management, socialization, and supervision of medications.

The five counties will continue to develop services and supports that consumers want and need, at the county and regional levels.

Innovative Forensics Programs Work with People with a Mental Illness to Provide Treatment, Prevent Incarcerations

Nationally, the number of people with mental illness in jails and prisons is a significant concern for both the mental health and criminal justice systems. Beaver and Allegheny Counties already offer services to address these issues, and are developing new programs as well.

Beaver County received state funding to provide integrated treatment to the individuals with mental illness and substance abuse (MISA) in jail. Gateway Rehabilitation Center is the dually-licensed provider of jail-based treatment. Since this pilot treatment program began in 2001:

- over 400 individuals have been identified as having a co-occurring disorder (COD), with 100% entering the jail-based treatment program
- 50% of those consumers entering community-based treatment entered a COD program
- 60% of consumers who were involved in the jail-based program did not return to jail

Beaver County has other initiatives aimed at helping the MISA, jail-involved consumer:

- In 2004, Beaver County started a Re-Entry Initiative to improve treatment outcomes and increase the follow-up available to inmates.
- In November 2006, Beaver County started a Jail Crowding Initiative to facilitate the early release of inmates with a COD by assuring that housing and treatment services are in place.
- In early 2007, Beaver County will begin "Seeking Safety," an evidence-based treatment for incarcerated women with Post-Traumatic Stress Disorder and Substance Use Disorders.
- Also in 2007, Beaver County will be working with the local Housing Authority, Gateway, and Adult Probation to offer specialized housing supports in one housing unit. This will open public housing to released offenders, who would otherwise be ineligible, because of their criminal record.

Allegheny County's highly regarded mental health court provides non-violent offenders with mental illness (and often co-occurring substance abuse disorders) the option of receiving treatment through a

court-approved treatment plan instead of going to jail. Allegheny County also has extensive forensic support services which assist in diversions from jail and in developing service plans to ease the transition from jail to the community.

To decrease the number of individuals with mental illness who are arrested and jailed initially, Allegheny County recently received grants to plan and implement two new programs:

Crisis Intervention Team (CIT): 50 Pittsburgh police officers will be trained to handle crises involving individuals with mental illness. When dispatched, CIT officers will defuse the situation and accompany the individual to the triage center (unless dangerousness requires transport to jail or a hospital).

The triage center will be available 24 hours a day, 7 days a week, and offer intake, screening, assessment and crisis intervention services, access to respite beds, and referrals to behavioral health services. The center will also coordinate with police and forensic services, and communicate with families and significant others.

Jail Diversion Program: A Preliminary Diversion Specialist will interview individuals arrested for non-violent misdemeanors or felonies who have their preliminary hearing during night court. After determining eligibility and consent, the Specialist will develop a service plan with the consumer to present at night court as an alternative to jail. The individual will then be transported to their housing or respite placement. The Specialist will help consumers throughout the court supervision period in connecting to services and supports and will report back to the court on progress. The program plans to work with 230 consumers over 3 years. The program expects 70% of consumers who develop service plans will follow the plan for their entire supervision period, and less than 25% will return to jail within one year.

Both counties' services have been funded by various programs, including the Pennsylvania Commission on Crime and Delinquency (PCCD), HealthChoices, and the Mayview Regional Service Area Plan. Efforts have been supported by a collaboration across systems and involved many stakeholders in their development.

Introducing Martha Hodge: Expert Facilitator and Trainer

Martha Hodge has joined the MRSAP team as the lead facilitator at Mayview. In her role, she is facilitating many consumers' Community Support Plan (CSP) Meetings. Ms. Hodge is also training and supervising other facilitators in this process.

During the CSP meetings, the consumer, family members, advocates and peer mentors, Mayview treatment team, counties, and community providers discuss the consumer's preferences and needs, explore options for services and supports, and develop a comprehensive community support plan.



Ms. Hodge brings a wealth of experience to this project. Ms. Hodge was the first coordinator of the Community Support Project for the state of Georgia during the Carter administration. She has worked in state hospitals and in the community in case management ser-

vices. She has also written articles and book chapters on case management.

In her work, Ms. Hodge focuses on developing helpful relationships and supportive strategies with consumers to encourage their active participation. She has been practicing the concept of individualized service planning for 30 years.

A native of Georgia, she also brings her warm, welcoming Southern manner to Mayview. She enjoys working with the social workers and treatment teams, and greets the consumers as "old friends with new faces."

MRSAP is also fortunate to have Veronica Snyder and Maggie Monit, facilitators from Phase 1, continuing in their facilitator roles. Additional facilitators have been hired and trained, forming a strong team to help with the successful transition of consumers from the hospital to the community.

What is a Facilitator?

- Facilitators run the CSP meetings. They also make sure that people follow up on their responsibilities to make each CSP a reality.
- Facilitators' main goal is to make sure consumers' wishes and needs form the backbone of the CSP.
- Facilitators propose new ideas and creative resources to ensure a smooth transition to the community.

Peer Mentoring Program, cont.

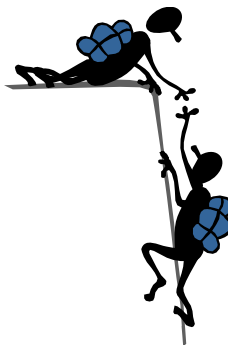
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viduals with upcoming CSP meetings, to get to know them and help them prepare. Peer mentors and consumers discuss what the meeting is about and who will be there. They talk about the consumer's preferences, and what he or she might need help with in the community.

Teaching the idea of self-determination and encouraging individuals to express their wants and participate in the process are

critical parts of the discussion, according to Kevin Trenney, one of the Peer Mentors and also the program's supervisor.

Peer mentors will continue to work with Allegheny County consumers in the community. According to Shirlee Hopper-Scherch, Executive Director of PSAN, the mentors are committed to long-term relationships in the community for consumers who want this connection.



14 years after Mayview, Valerie Rotolo Shares Her Life

Valerie Rotolo, a tall, attractive 47-year old woman with long, dark hair and glasses, greets friends and staff at the Brighton Hot Dog Shoppe by name, and with a smile. She lives nearby in downtown Beaver Falls in a nicely decorated one-bedroom apartment. Ms. Rotolo cooks for herself—one of her specialties is angel hair pasta with broccoli and shrimp. She keeps her apartment tidy and well-equipped, enjoys listening to music (especially rock and roll), talking on the phone and visiting her friends, and shopping.

She attends church regularly; her spirituality is a source of strength and comfort. Like many people, she is trying to lose weight and to save money, and has cut down on dining out lately to help meet these goals. Ms. Rotolo has a part-time job doing “book work” at a local donut shop. She would like to find full-time work, perhaps in a doctor’s office, helping to take patients’ blood pressure (but not drawing blood). She has also earned income as a speaker, where she has shared her recovery story with mental health professionals in Beaver County. She has been asked to consider working on a warmline, taking calls from consumers who need a friendly, helpful person to talk to.

After four stays at Mayview State Hospital and a long struggle with mental illness, Ms. Rotolo has remained out of the hospital and sober for fourteen years. While she still has symptoms of her mental illness at times, she manages the voices in her head. Taking clozapine and several other psychiat-

ric medications helps. Supportive Services helps (for example, with affording her apartment). AA and NA help. Her spirituality and good attitude also help. While she hasn’t attended day treatment or therapy for many years, she visits her psychiatrist regularly and considers the Phoenix Center, a drop-in center in Rochester she visits often, a “blessing.”

Ms. Rotolo remembers her times at Mayview as “the best, worst, and everything in-between.” She remembers what it is like to be down, and is willing to share what she can. She quotes Mother Theresa: “Hope leads to Faith, Faith leads to Love, Love leads to Service, and Service leads to Peace.” She advises patients at Mayview to “speak to your caregivers about what you think and how you feel. Try to develop trust with someone in the mental health field. Never give up hope.”

When individuals leave the hospital and don’t know anyone, they should find places like the Phoenix Center. “It’s a great place to go – they have parties, bingo, tea, coffee, and even Christmas presents!” She advises hospital staff, “reach out to the patients and treat them like they want to be treated.”

While she would like to work full-time, get off social security, and get married, she has “never felt better in my whole life. I have control over my life.” Looking forward to the holidays, she is happy and thankful for her apartment, her job, music, friendship, sobriety, and no symptoms.

“I’ve never felt better in my whole life. I have control over my life.”

- Valerie Rotolo



What is a Community Treatment Team (CTT)?

Washington and Beaver Counties have recently started CTTs. Mercy Behavioral Health will be starting a fifth Allegheny County CTT in January. Why is this service so important?

Counties are focusing on CTT for consumers discharged or diverted from Mayview because of the extensive success this service has had in helping consumers with serious mental illness. CTT is a team-delivered service. While staffing patterns may vary from rural to urban areas, CTTs typically include a Team Leader, a Psychiatrist, Nurses, Mental Health Professionals, Drug and Alcohol Specialists, Peer Support Counselors and Vocational Specialists. The hours are flexible, services are provided in the community, and CTT handles after-hours emergencies. The teams provide a wide array of services, including psychiatric evaluations, mental health and drug and alcohol therapy, medication management, case management, peer support, assistance with housing, crisis and hospital diversion services, vocational assessments and supported employment, and assistance in managing personal finances.



Updates on Phase 2 of MRSAP

Phase I ended with the closing of one unit at Mayview State Hospital in August 2006. After an extensive review of the Phase I process, several improvements to the assessment and community support plan process were made prior to the start of Phase 2 in August.

Mayview social workers and administrators, in cooperation with the counties, selected 59 individuals for this second phase of MRSAP. By mid-November 2006, all the peer-to-peer assessments and family assessments were completed by each county's Consumer and Family Satisfaction Team (CFST). These 53 peer assessments and 21 family assess-

ments will form the basis of discussion during the community support plan (CSP) meetings, with essential clinical information and treatment history provided by the clinical assessments (Note: several individuals were discharged before an assessment occurred).

The CSP meetings began in late November, and will continue into 2007 until each individual has a complete plan outlining the services and supports necessary for a successful transition to the community.

As Phase 2 continues, the counties will investigate opportunities for collaboration on a regional basis.

Learn more about MRSAP

MRSAP is a joint effort with Allegheny, Beaver, Greene, Lawrence and Washington counties and the Pennsylvania Department of Public Welfare (DPW). MRSAP's goal is to expand the capacity of community-based services so individuals discharged and diverted from Mayview can live safe and productive lives in the community. To learn more:

Visit us on the Web. Go to www.mayview-sap.org and click on the "Share Your Thoughts" link at the top of the page.

Join us at a Stakeholder's Meeting. Stakeholder meetings are held every 3-4 months. Check the web site or contact your County for more information.

Call Allegheny HealthChoices at 412-325-1100. When you reach the receptionist, ask for Lisa Tumolo.

Call your County. Call your County's office with questions:

Allegheny County: Mary Jo Dickson, 412-350-4457

Beaver County: Gerard Mike, 724-847-6225

Greene County: Dean Virgili or Karen Bennett, 724-852-5276

Lawrence County: John Klenotic, 724-658-2538

Washington County: Jan Taper, 724-228-6832

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Allegheny HealthChoices, Inc. (AHCI) is a contract agency for the Allegheny County Department of Human Services' HealthChoices Program.

AHCI is a private, not-for-profit. 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. AHCI is facilitating the MRSAP project under contract with Allegheny, Beaver, Greene, Lawrence, and Washington counties.