

Responsible State Hospital Downsizing/Closure A NAMI Southwestern Pennsylvania Position Brief: February 2007

NAMI Southwestern Pennsylvania, an affiliate of the National Alliance on Mental Illness, is a regional grassroots organization with a membership of 1,900. NAMI is dedicated to helping families and individuals affected by mental illness achieve lives of quality and respect, through education and advocacy that supports recovery.

Historically, long-term care for individuals receiving treatment for serious mental illnesses had occurred in large state operated psychiatric hospitals. Efforts to downsize these large facilities began with the deinstitutionalization movement of the 1950's. More recently with the 1999 Olmstead decision, the US Supreme Court ruled that it is discriminatory for a state to needlessly institutionalize a person with a disability. This decision along with the advent of more effective, newer generation medications, and evidence based treatments and supports have prompted states to re-evaluate the provision of treatment and care in these cost intensive institutional settings. With sufficient funding for community based treatments and supports, the majority of people with a serious mental illness are able to make personal decisions that lead to much richer lives in the community.

As Pennsylvania continues the transformation of the public mental health system to one that reflects less reliance on state psychiatric hospitals, it is NAMI Southwestern Pennsylvania's intent to ensure that all individuals have continuous access to a full continuum of both evidence based behavioral health treatment and supports, as well as meaningful opportunities for integration into their chosen community.

As services shift to the community, state and county mental health administrations must take the lead in ensuring for the responsible closure of units at state psychiatric hospitals. Individual patients and their families, in addition to the clinical team, must be directly involved in the development of a community service plan, which should have as its focus recovery based upon each person's specific needs and preferences for community living, treatment and supports.

Responsible closure must include thoughtful and extensive planning and ample financial resources. The immediate and long-term needs of individuals must be taken into account for community based treatment and supports. Responsible closure must also include adequate planning, monitoring and mechanisms for continuous quality assurance. In addition, this planning must go beyond the individuals currently hospitalized in order to address the possible future needs of mental health consumers. The planning process must continue to be transparent and welcoming of meaningful stakeholder input.

With this in mind, we expect OMHSAS to provide technical assistance and sufficient financial support for the development and sustainability of a comprehensive and enhanced community-based system of care, including assurance for individual access across all counties, rural as well as urban, including but not limited to:

- Accessible and consistent processes to ensure for consumer and family member input and inclusion in development of individual community support plans
- Ensure availability of individualized financial support for daily living necessities such as food, shelter, clothing and other basics as needed

- Stable, affordable, safe housing options, including: expansion of independent supportive housing, group settings not exceeding 16 individuals per dwelling, individualized assistance, and ongoing follow-up
- Individualized opportunities for employment, and education/vocational training
- Services and supports that are culturally and geographically relevant
- Transportation assurance for adequate access to services, supports and community connectiveness
- Efficient processes for consumers and families to dialogue with service providers and to share their satisfactions and dissatisfactions with behavioral health services through effective Consumer Family Satisfaction Teams (CFST)
- Assurances for consumer safety
- Integrated quality physical health and wellness programs
- Enhanced peer support
- Opportunities for development of sustaining relationships and connectiveness to family
- Opportunities for connection to religious institutions which may foster one's spiritual needs
- Evidence based Community Treatment Teams
- Enhanced and expanded casemanagement capacity
- Occupational therapy and rehabilitation utilizing best practice models
- Mobile services, including mobile medication and crisis intervention
- Enhanced crisis diversion options through a timely and effective Crisis Response System
- Extended acute inpatient treatment
- Truly integrated treatment and supports for individuals dual diagnosed with substance use disorders and mental illness
- Specialized system of care for transition aged youth, including identified housing

We remind OMHSAS and county mental health administrations that the effectiveness of behavioral health treatment and supports must be judged by standardized outcome measurements, and tracking that includes continuous quality improvements, including meaningful consumer and family member satisfaction data that is linked to service delivery enhancement.

We expect OMHSAS and county mental health administrations to lend support for the passage of state legislation that requires the net proceeds of the sale or lease of state psychiatric facilities that are downsized, consolidated or closed, to be deposited into a Mental Health Community Services Trust Fund.

NAMI Southwestern Pennsylvania will continue to provide input and comment on the planning process to ensure for quality in community mental health treatment and supports that foster recovery opportunities for all individuals living with mental illnesses.