

**Testimony submitted by Daniel Hawkins  
Regarding the Potential Impact of the Closure  
of Mayview State Hospital**

**Submitted to**

**The Senate Democratic Policy Committee**

**April 3, 2008  
Pittsburgh City Council Chambers  
Pittsburgh, Pennsylvania**

I want to start off by saying I really appreciate being given this time to express my thoughts and concerns regarding the Community Support Plan process and it's importance, as well as my thoughts and concerns regarding the closing of Mayview State Hospital.

My name is Daniel Hawkins, and I'm a consumer with an Axis #1 Diagnosis of a Bipolar Disorder, and a Secondary Diagnosis of a Poly Substance Abuser. I have been involuntary committed three or four times to different Psychiatric Hospitals, and was committed to Mayview State Hospital twice. The first time I was committed to Mayview was about 19 years ago and I was a patient there for about 18 months. My experience at Mayview, wasn't very positive because my treatment team decided I shouldn't have a ground card because I wasn't complying with taking some of the medication that the Psychiatrist at Mayview said I needed. The biggest problem that I had with taking some of the medications prescribed for me, was the very strong side effects of the medications, and the fact that the Psychiatrist assigned to me while I was in Mayview, came on the ward at most once a week, asked me how I felt, and then would leave. Most of the time I would be prescribed a new medication and would be forced to take it and if I didn't, I would be held down by Mayview staff, and given the medications by injection. I didn't have a say in what kind of mental health treatment I received while in Mayview, or what supports I needed when discharged from Mayview. So for the most part, I would just be on my ward, balled up in a corner sleeping.

I was then discharged to a Full Care mental health program where during the day, I was suppose to go to a mental health treatment program and for the most part I did go three times a week. I was free to do what I wanted to do after my day program and because I was put back in the same environment, and wasn't given any other supports, I did what I knew how to do. I started hanging in the streets again and soon I stopped taking my medications because of the side effects of the medications and started feeling depressed and to stop the depression, I started using street drugs again. It wasn't long before I ended up in another Psychiatric Hospital, and then committed once again to Mayview.

I was in Mayview the second time for about 9 months before I was discharged, but this time while in Mayview, I was put through a Community Support Assessment, and was placed in an apartment where there wasn't drugs being sold on almost every corner, and I was assigned a Drug Counselor, Intensive Case Manager, and a Structured Activity evening program to go to. This was what I needed because since then I haven't been committed to any kind of hospital, went back to school and received a degree in Social Service, and have worked as a Drug Counselor, Resource Coordinator, Supportive Housing Specialist, part of a Mobile Crisis Team, and now as a Community Mental Health Advocate. One of the things that was so different when I was discharged the second time was all the fun activities I was involved in. There was a schedule made up for me that consisted of going to the YMCA, Bowling, and also outings with friends and family. This was possible because it was part of my treatment plan developed during my community plan assessment

As a mental health consumer and also a mental health advocate, I think it is very important that each Mayview patient that will be discharged from Mayview into any community, mental health supportive living or housing program, or mental health facility, be given an individualized and approved Community Support Plan before their discharge from Mayview. I truly believe that if a support plan is in place for any Mayview patient that is ready for discharge, a plan that addresses what supports that individual will need in order to have a better chance of recovering from what mental health problems they may have, that person can live in our community successfully.

I have been the Mental Health advocate at the table through many of the recent Community Support Plans being developed for the people being discharged from Mayview State Hospital, Torrance State Hospital in Westmoreland County, and also Western Psychiatric Institute and Clinic. I realize that some Mayview patients are much sicker than others, and therefore they will need more or perhaps different kinds of treatment and supports. Other patients just need something different developed just for them and the kind of supports they will need once in the community. That's why I think it's so important that each Mayview patient have a Community Support Plan that has been created with his or her input, and the input from the patient's family and friends at the patient's request, and the patient's treatment team. The Counties have developed many new community support teams and programs. Each plan is special for each patient. I know that this process works because I see it working with consumers everyday and it worked for me when I was placed in the community after my discharge from Mayview. For example, the first two clients discharged from Mayview who were on my case load when I worked for Transitional Services, Inc. as a Permanent Supportive Housing Specialist were placed in their own apartment in the community, and surrounded with the supports they helped point out would be needed for them to live in the community. I visited with them many times. They have been doing very well and after a year, are still living in their own apartment. I also realize that for consumers in the past, this process was not used and discharge planning did not work because of one reason or another. I know that the mental health system as it is now is far from perfect, and because of that some consumers fall through the cracks. With the Community Support Plan Assessment Process, this problem will happen much less often, and when it does happen, it can and will be recognized much sooner, so that people will be helped before there is a problem. I believe that closing Mayview Hospital is a good thing because there are new and better services that can and will provide the supports needed to treat that person in the community instead of having to send that person back to a hospital. I also think because there is more money available, mental health clients will have the opportunity like I've had, to live in a community with the right services and be successful.

Thank you for your time.

Sincerely,

Dan Hawkins  
Community Mental Health Advocate.  
Mental Health America of Allegheny County