

# Moving Forward with Community-Based Recovery: Five Years after the Mayview State Hospital Closure

## Executive Summary

### Introduction

The Mayview Regional Service Area Plan (MRSAP) project began in July 2005 with representatives of behavioral health authorities in Allegheny, Beaver, Greene, Lawrence and Washington counties working together to develop a plan for supporting people discharged from Mayview State Hospital (MSH) in their communities. The group eventually expanded to include representatives from other behavioral health organizations, people with mental illness, family members, and advocates.

In order to increase the likelihood of a successful transition from MSH to the community, Community Support Plans (CSP), which are person-centered and recovery-oriented, were completed with each person prior to discharge. The CSPs included consideration and recommendations for housing and mental health treatment, and served as a guide for the development of new and expanded community resources.

Following substantial progress achieved in developing new community resources and downsizing the hospital, MSH officially closed December 2008. This report provides an update about the people who were discharged, commonly held myths about outcomes for the people discharged and actual outcomes, financial implications of the closure, and continuing efforts needed in order to sustain the region in the absence of a state mental hospital.

The time frame for this report is January 1, 2009 to December 31, 2013. A total of 307 people were discharged from MSH between 2005 and 2008, however eight people have been excluded because they died prior to January 1, 2009. The following are some highlights from the report.

### Demographics

- A majority of the people were white (59%), male (61%), between the ages of 45 and 64 (55%), and from Allegheny County (80%).
- The average length of stay at MSH was 5.1 years (range: 2 months to 44.5 years).

### Service Use and Life in the Community

- More people were living independently in 2013 (36%) compared to 2009 (19%).
- People had access to a variety of community-based services. Over the five years following the hospital closure, a majority of people used Assertive Community Treatment teams (77%), outpatient mental health services (54%), crisis (40%), and case management/service coordination (35%) services.
- People were able to access more intensive services when needed. On average, over the five years following the hospital closure, 19% of people had an inpatient psychiatric hospital admissions. Extended acute care admissions occurred for 4% of people and residential treatment facility for adults services were utilized by 1.5% of people.
- Results from the Mayview Discharge Study showed that people's psychiatric symptoms, social lives, and satisfaction with services improved. Overall, the study showed people were doing well in the community.

## Myths Versus Realities Surrounding the Closure of MSH

- It was believed that the closure of MSH would result in homelessness, increased incarcerations, deaths as a result of suicide, and an increase in psychiatric admissions.
- In reality:
  - No one discharged experienced homelessness.
  - Eighteen people (7% of the cohort) had jail admissions.
  - The most common cause of death for the 48 people that have died was natural causes.
  - Inpatient admissions have steadily decreased.

## Financial Implications

- Fifty-nine percent (or \$37.4 million) of the MSH annual budget was transferred to the MRSAP Counties to support the development and expansion of services for people in the community. Reinvestment funds, in addition to other funding sources, were used for the initial development of services.
- The cost of supporting people in the community was 77% less than the cost of state hospitalization. The savings equates to approximately \$254.2 million total or \$889,000 per person, over five years.
- The cuts in mental health Base funding that occurred in FY 2012/2013 totaling over \$6.8 million, resulted in reductions in staff positions and some programs.
- Approximately 1,278 people who may have been admitted to a state hospital were supported in the community.

## Moving Forward without a State Mental Hospital

The Counties intend to focus on:

- Continuing to ensure services and supports are available to meet peoples' needs.
- Finding ways to support people who find it challenging to live in the community with the use of predictive modeling.
- Working towards being a region where people truly believe people can and do recover from mental illness.