

## Allentown State Hospital Closure Frequently Asked Questions

The Department of Public Welfare plans to close Allentown State Hospital by December 31, 2010 and discharge individuals from Allentown State Hospital to the community and Wernersville State Hospital, Berks County.

Allentown State Hospital has the capacity to serve 175 individuals from Lehigh, Northampton, Carbon, Monroe and Pike Counties on its 217 acre campus with 379 full time state employees.

### **1. Why is the Department of Public Welfare closing Allentown State Hospital?**

People living with serious mental illnesses can and do recover and the Department of Public Welfare believes that they are best served in community settings through an array of services and supports. In addition, people formerly served in state hospital settings are enjoying great success in the community. Allentown was chosen for the following reasons:

- The community-based infrastructure in the Allentown State Hospital Service Area is prepared to support the expanded array of services that enable people to be discharged.
- There will be limited adverse economic impact on the community.
- The Allentown State Hospital property has value for alternative uses.

The initiative can be accomplished while treating individuals closer to home through an array of living options consistent with national standards and goals, while still promoting regionalization/consolidation statewide across the system to maintain the “safety net” infrastructure.

Consolidation and streamlining hospital administration will create economic efficiencies and alleviate the burdens of high maintenance costs of state property. The closure of Allentown State Hospital will also provide local economic development opportunities, with the creation of community programs and the potential development of the property for alternative uses.

### **2. What is the time line for closure of Allentown State Hospital?**

The Department expects to complete the closure of Allentown State Hospital on or before December 31, 2010.

### **3. What will happen to the individuals living at Allentown State Hospital? What types of illness do the current residents have? Are they violent?**

A number of people receiving services at Allentown State Hospital have a mental illness that is stabilized with treatment, support and supervision. Diagnoses include major depression, bi-polar disorder, schizophrenia, personality disorders and substance abuse disorders as part of a “co-occurring” condition. Some of the individuals have other medical conditions such as diabetes and obesity.

The link between violence and mental illness is promoted by the news and entertainment media. However, most people with mental illnesses are not violent — they are people

who have an illness and can be treated. Anyone deemed to be a danger to themselves or others or in need of continued inpatient treatment will be transferred to another facility and not discharged as part of the closure.

**4. Where will people live?**

Each person will participate in a series of assessments (clinical, peer-to-peer/consumer and family) in order to determine the person's wishes and needs. Serving individuals in the community will be done through an array of living options, including group homes, public housing and living with family. Individuals who are determined to be in need of continuing inpatient treatment will be transferred to Wernersville State Hospital.

**5. When will admissions close?**

This will be determined in the very near future and be announced publicly at that time.

**6. What will happen to persons who are not successful in the community?**

Every effort will be made to ensure that individuals are served in placements that are based on their individual need. However, if the individual does not feel the placement is a viable solution for him/her, the Department will work with them to find a suitable alternative support or transfer them to Wernersville State Hospital. Wernersville State Hospital will continue to serve the needs of Lehigh and Northampton Counties. Clarks Summit State Hospital will serve the continued needs of Carbon, Monroe and Pike Counties.

**7. Will the people who move from Allentown State Hospital join the ranks of the homeless in the years to come?**

The Department has a strong track record of assuring that individuals leaving state hospitals do not become homeless or placed in prisons or jails. The counties in the Allentown Service Area will develop specialized housing resources and work with local housing and homeless shelters as well as local county jails to ensure that the individuals we serve do not become homeless and are not incarcerated.

A total of 2,849 individuals have been discharged and 13,801 individuals received diversionary services through the Community-Hospital Integration Program Project (CHIPPP) from 1992 – 2009 (Dec 31, 2009). Through this process, the Department of Public Welfare has transferred \$247,102,665 that formerly supported those beds to community-based residential, rehabilitation and support programs. The Department of Public Welfare works with former residents of the state hospital through the Community-Hospital Integration Program Project, which shows an incarceration rate of less than two percent, and homelessness at less than one percent.

**8. What services are available in the community? Is there capacity to accept this number of people?**

The local county human service systems have the capacity to serve people who will be discharged from Allentown State Hospital. The counties utilizing Allentown State Hospital have a history of successfully supporting individuals with mental illness discharged from Allentown State Hospital, including those discharged through the

Community-Hospital Integration Program Project. Each county has established a track record of over eight years with the management of the HealthChoices behavioral health program that provides for additional treatment and support options for the community. The Allentown State Hospital Service Area Plan has identified an array of community-based services that will be enhanced or developed to support this initiative. These services include:

- Specialized personal care services
- A variety of supported living arrangements
- Long Term Structured Residence for a small group of individuals
- Assertive community treatment teams
- Peer-to-Peer services
- Representative payee programs
- Targeted case management
- Vocational opportunities
- Psychiatric rehabilitation
- Extended acute inpatient
- Mobile crisis
- Mobile outpatient
- Jail diversion and re-entry programs

**9. Where will the community placements be located?**

Community placements, where applicable, will be located throughout Lehigh, Northampton, Carbon, Monroe and Pike Counties in locations jointly chosen by consumers, their families and the appropriate county agencies.

**10. Why are some individuals being transferred instead of placed in the community?**

Individuals at Allentown State Hospital who are assessed as needing continued state hospital-level of care will be transferred to Wernersville State Hospital. The Department of Public Welfare expects continued development of additional community services for the people who will not be directly discharged during the implementation of the closure.

Wernersville State Hospital was designated for the consolidation of clinical services for Lehigh and Northampton counties served by Allentown State Hospital due to its geographic proximity and will accept admissions from this service area. Clarks Summit State Hospital was designated as the state hospital to serve Carbon, Monroe and Pike counties and will accept any future admissions from these counties.

**11. How many state hospitals are there now and how many people live there?**

Since fiscal year 1994-95, the patient census at Pennsylvania's state hospitals decreased from 4,934 to 1,627 as of June 30, 2009. Pennsylvania currently has seven state hospitals.

There are two distinct populations served in the state hospital system today. Individuals who are newly admitted for treatment today stay an average of seven months and are able to return to their homes and community based services; individuals who have been in a state hospital for more than two years (people who "live" in the state hospital) actually have an average length of residence of 10 and a half years. The CHIPP initiative

was designed to address the comprehensive needs of those with long stays and continues to successfully support thousands of individuals who “lived” in the state hospitals and now live a life in the community.

<b>Civil State Hospital</b>	<b>Census as of January 11, 2010</b>
Allentown	172
Clarks Summit	219
Danville	178
Norristown	241 (Civil) 131 (Forensic)
Torrance	237 (Civil) 59 (Forensic) 26 (Sexual Responsibility and Treatment Program (SRTP))
Warren	161 (Civil) 26 (Forensic)
Wernersville	217

**13. Who is responsible for monitoring community programs?**

The Department of Public Welfare, in concert with the county human services system, monitors the local systems. The Department licenses residential facilities and other community programs, and provides extensive monitoring for the HealthChoices Behavioral Health Program. The Department maintains daily contact with the facility, has an established management team to monitor progress and maintains a tracking and quality improvement process and a community advisory committee. In addition, the county programs have in place extensive monitoring, including an incident management system.

**14. What’s the mix of professions among the staff at Allentown State Hospital?**

Allentown State Hospital currently has nine doctors, 56 registered nurses and nurse supervisors, 9 licensed practical nurses, and 89 psychiatric aides. There are also 37 other direct care staff such as social workers; psychologists; and therapeutic, vocational and recreational staff. There are 29 management employees, and the balance of staff provide a variety of support services such as custodial, dietary, maintenance, clerical, financial and other classifications.

**15. What will happen to the employees and how many are there?**

There are 379 staff at Allentown State Hospital. The Department will attempt to provide current ASH employees with the opportunity to continue their employment with the Commonwealth. Up to 85 staff from Allentown State Hospital will be provided employment opportunities at Wernersville State Hospital to support the consumer transfers between these facilities. There will also be opportunities for community employment as program development and expansion occur within the counties in the service area. Anyone wishing to continue employment at another state hospital will be given preference as vacancies occur. In addition, 33 employees will be needed at ASH after the closure date to provide security and campus services for a limited, but undetermined, period of time.

**16. Will the employees be subject to furlough?**

The Department will attempt to provide current ASH employees with the opportunity to continue their employment with the commonwealth. As noted above, up to 85 staff from Allentown State Hospital will be provided employment opportunities at Wernersville State Hospital. The number of positions reallocated to Wernersville will be determined by the number of patients who transfer. While it is our sincere hope that Allentown State Hospital employees avail themselves of other facility employment opportunities to minimize the necessity of a furlough action, we recognize this may not be the case for all staff.

The commonwealth has established a good track record in providing ongoing employment for employees affected by hospital closures. All staff from Harrisburg State Hospital and more than 96% of those at Mayview State Hospital who wished to do so maintained their employment with the commonwealth.

**17. What is the annual budget of Allentown State hospital?**

The annual budget for Allentown State Hospital for Fiscal Year 2009-10 is \$35,329,136, which includes operating costs of \$7,600,000 to maintain the physical plant.

**18. What is the cost of a community program versus state hospital programs?**

There is a cost associated with closing a state hospital and anticipated savings over time. Upon completion of the closure, the amount to support up to 125 individuals who will be served in the community as a result of this initiative will be annualized at \$14,185,000.

In fiscal year 2008-09, 2,986 individuals were served in the state hospital system utilizing approximately 1,595 beds with an average yearly expenditure of \$220,825 per bed. For the same time period in the community, the dollars spent were considerably less. For example, in fiscal year 2008-09, 537,130 individuals were served in the community with an average expenditure of \$5,921 per person.

**19. Are there alternate uses planned for Allentown State Hospital when it officially closes?**

The Pennsylvania Department of General Services is responsible for commonwealth property and will work to determine the future use for the buildings that are vacated after the closure.

**20. How many buildings, what kind and how many acres?**

- The hospital consists of 28 buildings occupied as follows:
  - Allentown State Hospital occupies 22 buildings
  - Liberty STAT (1 building)
  - Haven House (1 building)
  - One building is used by another commonwealth agency
  - Three (3) buildings are empty

- The total land area is 217 acres; 200 acres are located on the main campus and 17 acres are located in Weaversville, PA.

**21. How much money will be saved in the long run?**

This initiative is not intended as a net savings to the commonwealth but rather to realign spending to be better used to serve people in more appropriate, integrated community settings.

**22. When did movement away from state hospitals to communities begin?**

For over 25 years Pennsylvania has been on the leading edge of developing local partnerships and community-based service options that promote recovery for people living with mental illness. As a result, we have seen the number of people residing in state hospitals drop by 65 percent from almost 5,000 in the mid-1990's to the current 1,627 as a result of the successful closure of state hospitals during that time.

In 1955, when the state mental hospital population reached its zenith of 40,900 clients, the commonwealth operated twenty state mental hospitals and two restoration centers with a staff complement of over 30,000. The 1979 closure of Holidaysburg State Hospital began the transition and consolidation of Pennsylvania's state mental hospital system. The transition continued with the subsequent planned and orderly closure of additional facilities:

1979	Holidaysburg State Hospital
1980	Retreat State Hospital and Embreeville State Hospital
1981	Eastern Pennsylvania Psychiatric Institute
1984	Dixmont State Hospital
1990	Philadelphia State Hospital
1992	Woodville State Hospital
1995	Farview State Hospital
1996	Somerset State Hospital
1997	Eastern State School and Hospital
1998	Haverford State Hospital
2006	Harrisburg State Hospital
2008	Mayview State Hospital

The most recent closure of Mayview State Hospital in December 2008 was successful in many ways including:

- 225 individuals were successfully transitioned to community settings.
- Numerous people discharged from Mayview made positive life changes as a result of living in the community, reuniting with estranged family members, gaining employment and enjoying positive community social supports.

**23. How does Pennsylvania compare to other states in terms of closing state hospitals and emphasizing community movement?**

In 2009 there are 182 state psychiatric hospitals being operated by 42 states, for an average of approximately four state-operated hospitals per state. Pennsylvania currently maintains seven state hospitals and one nursing home.

In 2009 97 percent of all services for persons with serious and persistent mental illness were provided by the community-based services. During the same time period, 88 percent of allocated state funds for persons with serious mental illness went to community based services – a three percent increase over 2008.

Since the economic downturn of the past 18 months, 48 states including Pennsylvania have been forced to reduce expenses for 2009. In response to a national survey, 40 states are reducing their mental health services budgets for 2010. There are 15 states closing units or wards in their state hospitals in 2010. Three states anticipate closing at least one state hospital. Nine states are restructuring their entire state-funded system of care for persons with mental illness. In spite of these significant cuts, the summer of 2009 saw a 44 percent increase in demand for community based mental health services. (State Profile Highlights, 2009, NASMHP Research Institute, Inc.)

#### **24. What is the history of the campus?**

In 1901, the Germantown Homeopathic Medical Society of Philadelphia assisted in introducing and furthering a bill in the state legislature to provide for the selection of a site and construction of a state hospital for the mentally ill. The hospital was to be under homeopathic management and control. A number of areas were evaluated before the Rittersville section of Lehigh County was accepted as the construction site. The cornerstone for the hospital was laid on June 27, 1904, but because of delays in financial appropriations, the hospital was not completed until 1912. The hospital was opened on October 3, 1912.

The first admissions were individuals from Norristown and Danville State Hospitals, which were both overcrowded at that time. The hospital at Rittersville, or the Allentown Homeopathic Hospital for the Insane as it was called at the time, was the first homeopathic institution of its kind in Pennsylvania. The first superintendent, Dr. Henry Klopp, was a homeopathic physician and the hospital was closely allied with the Hahnemann Medical College in Philadelphia. The homeopathic medical approach was gradually changed to the more standard medical model and the homeopathic title was dropped from the name, the hospital then being referred to as Allentown State Hospital.

The population quickly rose to 867. Over the years, the population and physical plant continued to expand, reaching a census of 2,107 in 1954. Allentown State Hospital received people primarily from a five-county service area. The counties specifically were Lehigh, Northampton, Carbon, Monroe, and Pike. These counties included the cities of Allentown, Bethlehem, and Easton, as well as a number of smaller municipalities.

#### **25. Will there be an additional state hospital closure next year?**

The Department intends to continue the service area planning process to review the changing role of the state hospital, continually assess the needs of the individuals currently served and offer every opportunity for individuals to be fully integrated into community life.

#### **26. What are the next steps?**

In compliance with Act 3, a Public Hearing will be held February 22, 2010 from 9:00 a.m. till 9:00 p.m. The hearing will be at the Four Points Sheraton on Airport Road in Allentown.

Anyone wishing to provide public testimony about the closure will need to register by calling the ASH CEO's office at 610-740-3409. Legislators and their staff should contact Jen DeBell, Director, or Brendan Harris, Deputy Director, in the Department's Office of Legislative Affairs at 717-783-2554 to register.