

Speakers at Public Hearing 1/31/17

2:35	1	Sarita Tolliver	Family Member	484-908-4032
2:40	2	Neil Callahan	Brooke Glen Behavioral Hospital	Neil.Callahan@uhsInc.com
2:45	3	Sara Ludwig-Nagy, BSN RN	Einstein Medical Center-Montgomery	saraelizanne@gmail.com
2:50	4	Kimberly Renninger	Peer Recovery Navigator	KRenninger@magellanhealth.com
2:55	5	Lynn Pechiniski	Family Member	lynn3@1st-Straw.com
3:00	6	Michael Brody	President MHASP	mbrody@mhasp.org
3:05	7	Bill Meyers	CEO, MCES	wmyers@mces.org
3:10	8	Stacy Volz	Former Patient	609-977-1247
3:15	9	Michael Harper	Family Member	michaeljosephharper@verizon.net
3:20	10	Neal Manning	SEIU Healthcare PA	neal.manning@seiuhcpa.org
3:25	11	Maria Calderara	Family Member	610-649-4719
3:30	12	Cindy Schwebel	Family Member	215-431-6462
3:35	13	Abby Grasso	Executive Director NAMI Montgomery County	agrasso@namimontcopa.org
3:40	14	Bernadette Dyer	Family Member	267-885-5622
3:45	15	Alan Hartl	Lenape Valley	267-893-5285 alan.hartl@lenapevf.org
3:50	16	Diane Conway	Ph.D. Executive Director MAX Association	dconway@maxassociation.org
3:55	17	Gary Margulls	SEIU	gmargulls@pa.gov
4:00	18	Diane Gilroy	President, NAMI Lehigh Valley	mmurphy@NAMI-LV.org
4:05	19	Tory Bright	Regional Mental Health Services Office	regional.mh@pmhcc.org (to speak for 15 min for 5 counties)
4:20	20	Sol Vazquez-Otero	DRP	svazquez-otero@disabilityrightsna.org
4:25	21	Kawana Blake Williams	Kayslm Court Manor	KCMPCH@verizon.net
4:30	22	Mike Sejda, RN	NSH	fsejda@pa.gov
4:35	23	Sue Shannon	HopeWorx, Inc.	sshannon@hopeworxinc.org
4:40	24	Kathle Mitchell	HopeWorx, Inc.	
4:45	25	Ellen Kozlowski	HopeWorx, Inc.	
4:50	26	Frank Rittenhouse	NSH	570-916-0495
4:55	27	Valeria Melroy	Voice and Vision	valerie@voiceandvisioninc.org
5:00	28	Nancy Scheible	Mental Health Professional	267-269-7882
5:05	29	Michael Louis-Reed	Consumer	
5:10	30	Marlene Hamilton	Family Member	484-620-2542
5:15	31	Luna Patella	Public Defender's Association - Philadelphia	lpattela@philadefender.org
5:20	32	David Bolln	Family Member	



National Alliance on Mental Illness

NAMI

PA, Bucks County

NAMI BUCKS COUNTY COMMENTS ON THE PLANNED CLOSING OF NORRISTOWN STATE HOSPITAL CIVIL UNIT

January 30, 2017

NAMI of PA, Bucks County Chapter, a support, education and advocacy group with membership of over 100 families has concerns about the discharge of patients from Norristown State Hospital. We expect that the supports listed below to be implemented prior to patients being discharged and request that the OMHSAS delay closing Norristown civil beds until there is a concrete plan to address the needs of the current residents of Norristown State Hospital. Those plans should include adequate funding for both current residents and those that may need those services in the future. We expect that families be included in the discharge plan and their concerns be addressed in a timely and consistent manner.

- j Accessible and consistent processes to ensure for consumer and family member input and inclusion in development of individual community support plans
- j Ensure availability of individualized financial support for daily living necessities such as food, shelter, clothing and other basics as needed.
- j Stable, affordable, safe housing options, including: expansion of independent supportive housing, LTSR and other group settings, individualized assistance, and ongoing follow-up. Number of extended acute treatment beds should be provided for future growth based on population. These (bricks and mortar) shall be in place before NORRISTOWN IS CLOSED.
- j Individualized opportunities for employment, and education/vocational training.
- j Services and supports that are culturally and geographically relevant. All individuals should have all services in their geographic community. Transportation available for adequate access to services and supports in the community.
- Integrated quality physical health and wellness programs.
- Enhanced peer support and opportunities for development of sustaining relationships and connections to family.
- j Additional Evidence based Assertive Community Teams including Certified Peer Support Specialists to interact on a one on one basis.
- j Enhanced and expanded case management capacity.
- Truly integrated treatment and supports for individuals dual diagnosed with substance use disorders and mental illness.
- Use of Trauma Informed Care before, during and after discharge.
- j Consumer satisfaction teams/PEER support specialists shall regularly have face-to-face reviews with the those discharged
- j County administrators shall maintain data base of all those discharged from Norristown Hospital that documents status, health, training, living arrangements, treatment plans.

The National Alliance on Mental Illness of Bucks County is a non-profit organization under Section 501(C)(3) of the IRS Code. In accordance with IRS regulations, no goods or services have been provided in consideration of this contribution. Dues and donations are income tax deductible.

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January 30, 2017

Dear Edna McCutcheon, CEO,

RE: John DiCicco

Today, we received your letter dated January 26, 2017. Contrary to the article we read in the Allentown, PA Morning Call, we were very disappointed to learn from you that Governor Wolf has already decided to close the civil unit at Norristown State Hospital.

Since we live 1 ½ hrs away, and are unable to attend the "hearing" on such short notice, we would appreciate your and Ms. Brennan's complete review of our letters and ask that you read our letter that we wrote to Governor Wolf at the hearing. We are also including a copy of a letter we received today from our local state representative.

For you and your staff, who have spent your whole career working in the mental health field, it is hard to believe that this anything but a political decision by the governor when we all realize there are no alternative places to go after Norristown has closed.

Sincerely,

A handwritten signature in cursive script that reads "Gloria & Fred Rentschler". The signature is written in black ink and is positioned below the word "Sincerely,".

Gloria & Fred Rentschler-

January 16, 2017

Governor Wolf,

We are writing in response to your proposal to possibly close Norristown State Hospital civil unit for state budgetary reasons. We have had a bird's eye view of mental illness and how it's handled in Pennsylvania.

My brother/brother-in-law, age 63, has suffered from mental illness since his early 20's. He has been diagnosed as bi-polar/paranoid schizophrenic. On and off he has held various jobs until the illness he suffers from has gradually taken over. He has been in and out of mental institutions and crisis centers over the past 40 years. Because of current laws, which allows anyone 18 years or over to check themselves out of centers, he didn't stay to get the help he needed. After the dual deaths of our parents, just two months apart, in 2005, my brother reached his breaking point and in a fit of rage when he wasn't taking his medicine, hit a police officer. He was arrested in June, 2006 and spent a month in Bucks County prison. He was then transferred to the Norristown State Hospital forensic unit in July, 2006. After over 8 years of confinement in the forensic unit, he was transferred to the civil unit with the help of our attorney and the district attorney of Bucks County in November, 2014. He has progressed a little with the help of his medication, but not enough to return to the community. Unfortunately, state and federal laws prohibit Norristown State Hospital from forcing him to take medication that might allow his mental health to improve and then be released to the community.

As his court-appointed guardians, we have been billed monthly for his care (currently \$2029.00) per month since he was first confined in July, 2006. With such a minimal staff at Norristown State Hospital, we were shocked to read that the state spends \$340,000 per year for each patient in spite of the over \$25,000 per year we currently reimburse the Commonwealth.

Over the years, we have come to know there are no local residential facilities that can insure that my brother/brother-in-law will remain there in a safe setting. In a half-way house or local home, from previous incidents, he would walk out and not return. Without any desire from him to take even minimal medications, he would return to his delusional state within a month or less and more than likely injure himself or someone else. We know over the last 10 years, he has regained some of his abilities, but the experts say he will never be able to handle his financial and personal needs in anything but a controlled setting especially since he refuses to take all medications his doctors feel he needs to move forward.

In today's highly charged world, some mentally ill people are causing the most heinous crimes. Rather than close this facility and others previously closed by Governor Rendell 5 years ago, the Commonwealth should be adding more facilities because there are truly no places to go in Pennsylvania if you are mentally ill and a danger to the Commonwealth.

We realize that Pennsylvania has financial problems and there is finally push to balance the budget. We are sure that all departments in the state need to cut their spending but not just the mentally ill who reside in Norristown State Hospital.

Thank you for your consideration with the matter.

Sincerely,



Gloria and Fred Rentschler

(As married life-long residents of Pennsylvania, parents of 2 grown children and 3 grandchildren, we are also business owners. Our family owns 2 automobile dealerships employing over 50 people and has been in business since 1973. Gloria is a retired educational assistant and we both continue to handle all of our brother's personal and financial affairs without taking an income).



January 27, 2017

Mr. and Mrs. Fred Rentschler
6417 Woodbury Drive
Slatington, PA 18080-3243

Dear Gloria and Fred:

Thank you for taking the time to share your concerns about your loved one who resides at the Norristown State Hospital which Governor Wolf has proposed to close. I am very appreciative of your explanation of the needs of your brother/brother in law.

To be of help, I contacted the Department of Human Services on your behalf and this is what I learned from them: They reassured me that no patients will be released without personalized treatment and well-thought out plan. They have allowed 24 months to complete this transition to ensure that all 122 patients are given assessments, support, and services to provide each person with the opportunity to live as a contributing member of society. Through the evaluations and treatment, if any individuals shows signs that they will continue to need inpatient treatment, they will not be released and will be relocated to another facility.

In regards to the cost of \$340,000 per patient, I inquired about how that number was derived and learned that the governor's budget analysts averaged the total in state and federal funding for the twenty-four hour cost of running the entire facility and divided that by the number of individuals who are patients there.

Their hope is to reduce the costs for families with patients currently being treated in the Civil Unit, by realigning the funding currently being financed by taxpayer dollars to serve the people in more appropriate, integrated settings, which will hopefully also be less costly. Leading up to and during this transition, a toll-free number for family and friends of residents in the Norristown State Hospital has been provided, Monday through Friday during the hours of 8 a.m. to 4:30 p.m. 1-877-692-1267.

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The department will also hold a public hearing from 2:30 p.m. to 5 p.m. on Tuesday, January 31 at 1001 Sterigere St., Norristown Hospital, Building 33 in Norristown. Members of the community are encouraged to attend to learn about the upcoming repurpose of the Civil Unit and voice any inquiries or concerns.

I certainly hope that this change will benefit the individuals and their families and assure you that I will be working hard to ensure all patients will experience a positive transition, regardless of their level of need.

Sincerely,



Zachary Mako
State Representative
183 Legislative District

ZM/jfn

Brennan, Helen

From: Gabriel Nathan <nathanismylastname@gmail.com>
Sent: Friday, January 13, 2017 8:17 AM
To: Brennan, Helen
Subject: Comment: On the Closure of NSH Civil Unit

Dear Ms. Brennan,

This, I have no doubt, will go down as one of the most useless emails I have ever written: and I've written more than a few "trees that fell in the forest with nobody around" emails.

Why useless, you may ask? Well, because I am writing to a government agency (always a pretty useless endeavor, in my opinion) and, not only that, a but to a government agency who has come out publicly, made a decision on record, announced that decision to the media, and *then* has the nerve to say they're holding a public hearing and will be accepting comments.

To pretend that you're listening. To placate people. To sit behind a table and a microphone in the auditorium of Building 33, while we sit in the seats and you make believe like you're hearing what we're saying. And, after a while, you'll decide that that's enough because it's 5:00pm and state officials can't possibly be asked to do their jobs after 5:00pm, so you'll thank everyone so much for coming, and you'll pack up your folders and your briefcases and you'll leave and do exactly what you were going to do before the hearing. But you'll claim that you listened.

The same way that Ted Dallas has the audacity to claim, in his announcement, that "individuals experience a better quality of life when they receive care and support in their homes."

Like many of these people *have* homes to go to. Like there are dozens of excited family members just sitting buzzing around cooking these patients' favorite meals and hanging "WELCOME BACK" decorations around the living room.

I don't think so. But I guess it's fun to pretend, isn't it?

I worked at Montgomery County Emergency Service, on the grounds of the State Hospital, for five years: three years on the inpatient unit and two years in Development. I know these people. I have facilitated therapeutic groups for these people. I have trekked the halls of MCES at a brisk pace in the morning for Fitness Walking Group. I have responded to emergency bells and helped pull some of these people off of my colleagues and off of other patients. I have rolled around on the floor with some of these people. I have had quiet moments of sincere, honest conversation with some of these people. I have held their hands when they were scared.

I don't think you know these people. And, furthermore, I don't think that you know, that you truly know, the painfully inadequate community resources that are quite simply not up to the challenge of meeting the complex, unpredictable and sometimes constant needs of these individuals, needs that are beyond the capabilities of community care providers. I don't think you know the burden this is going to place on our law enforcement officers, very well-trained in mental health, crisis intervention and de-escalation by Michelle Monzo of MCES, but all the training in the world cannot prevent every bad outcome. And there will be bad outcomes resulting from encounters between police officers in Montgomery County and individuals who should be hospitalized-- you will see. And with bad outcomes comes bad press.

Who is going to be there for these people? Central? Access? I don't think so.

Maybe your plan is to make MCES the new state hospital-- just let people languish there in some kind of mental health purgatory-- I've certainly seen that. Or maybe you'll just use LTSRs or EACs to shutter people away for years on end and they'll become the new de-facto state hospitals, just not in name, just not with the great salaries and benefits for the employees. I'm sure those poorly-trained, \$9-an-hour psych techs will do their jobs admirably and will provide a superior quality-of-care for these individuals.

This is de-institutionalization, all over again. Didn't anybody learn anything the first time?

I agree that the idea of a state hospital appears Draconian and undesirable, and the physical appearance of the campus of NSH does no favors to this idea. It's not very fashionable or progressive-seeming. But, fashionable or not, some people with extreme health challenges still have extreme needs. Should we close ICUs because they're scary looking? Maybe trauma centers just shouldn't exist, because we wouldn't want the great precious public to see people on stretchers with bloody head wounds and other horrific injuries on their way to their MRI appointments. Also, I don't particularly like driving past funeral homes-- that reminds me of things I'd rather not think about...

See where I'm going with this?

You can't close your eyes and pretend like serious and persistent mental illness doesn't exist, just because we've failed as a society to spend adequate money on research and more sophisticated therapeutic modalities, just because the government will spend anything to defeat cancer and heart disease, but we're still strapping patients to beds and shooting them in their rear ends with needles, and giving them medication with horrific side-effects.

This is where we are in 2017. Some people need state hospitals. But some folks have decided that they're not fashionable anymore-- like a hair style or large lapels on a suit jacket. Some folks have decided that, and then, *after* they decided that, they thought, "Oh, and we'll hold a public hearing about it."

What a joke, and what an insult.

Sincerely,
Gabriel Nathan

Former Development Specialist and Allied Therapist at Montgomery County Emergency Service, Inc. (MCES)

Editor in Chief



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Brennan, Helen

From: Lkralovich <Lkralovich@comcast.net>
Sent: Wednesday, January 11, 2017 8:19 PM
To: Brennan, Helen
Subject: Community not a good deal

I hope you can get this letter to Governor Wolf and let him hear the parents side of the community story. I am not writing this about the Norristown hospital unit closing I am writing about my sons job being put in jeopardy. I know this is to go on statewide but there should be limits. My son works at a sheltered workshop and this is not fair. Its setting the handicap population up for failure. First of all the ODP should not be able to dictate my sons or anyone elses choice of where are they will have to work. My son has been working a APS in Warminster for the past 5 years. And if you were to ask him where he would like to work he would tell you APS. He will also tell you the he has had jobs out in the "community" before. He has had jobs at McDonalds , Wawa and a few others that didn't last because of layoffs. There are not enough full time jobs for college students let alone the handicap population. These are all part time jobs and they are all hours that Bucks County transport does not run. They don't run after 6 p.m. and they don't run weekends so how is my son to get to a job in the community. Transportation is just one issue another issue is bullying. My son takes pride in his work and likes to work hard but I am afraid that he will be taken advantage of

Buying 20 something that are slackers these days that don't have good work ethics.

Another issue I have as a taxpayer it just baffles me as to the proposed regulations. There is a proposed regulation called for a 1:3 staff ratio vs the current 1:15 ratio that's more support staff needed to be paid by more funding. Where is the common sense in that??? the current system is not broke why disrupt it and our lives and our rights. I could tell you right now my son will be home wasting away with nothing to do. Governor wolf had better come up with some great transportation money and full time employment promises. If anything these sheltered workshops should be expanded to employ more in a safe productive environment. The stress this will place on the parents, caregivers and yes are sons and daughters who will have to be displaced and rights given up. Please stop your efforts to disrupt and have a positive ever to continue to keep or workshops open and thriving.

Sent from my Verizon, Samsung Galaxy smartphone