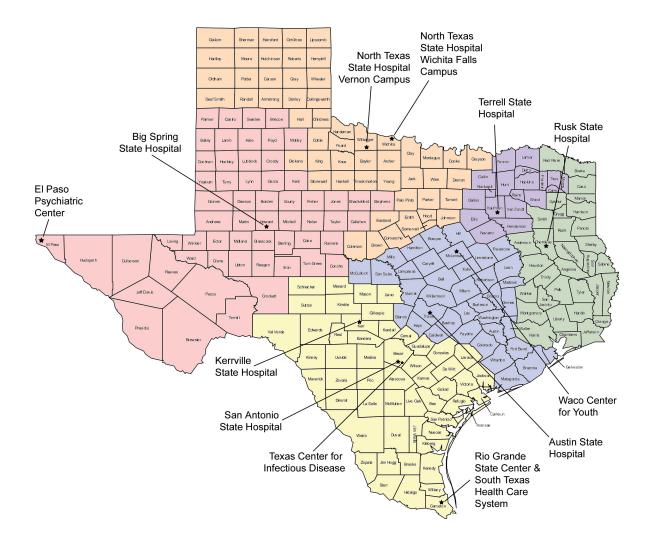
Meadows Mental Health Policy Institute

John Petrila – Testimony on Senate Bill 500, March 11, 2019

State Hospital System Redesign:

Austin State Hospital (ASH) and San Antonio State Hospital (SASH)



The **85th Texas Legislature** appropriated **\$300 million** through **85(R) SB 1** for new state hospital **planning** and **construction**. This was intended as **Phase I** of a **three-phased approach** to transforming the state hospital system.

| Phase I Projects in Austin and San Antonio | Cost | Beds |
|--|---------|------|
| Austin State Hospital – Pre-Planning and Planning | \$15.5M | 240 |
| San Antonio State Hospital – Pre-Planning and Planning | \$14.5M | 300 |
| San Antonio State Hospital – Planning and Renovation | \$11.5M | 40 |



Austin State Hospital (ASH): Pre-Planning and Planning Process

- Academic Partner The University of Texas at Austin, Dell Medical School
- Catchment Area 38 counties served for adults, 75 counties served for children and adolescents
- **MMHPI role** included data analysis of all emergency department and inpatient admissions for psychiatry in the ASH catchment area as well as working with local mental health authorities (LMHAs) to identify services LMHAs provide and projects they have implemented to keep people out of ASH and minimize hospitalizations.

San Antonio State Hospital (SASH): Pre-Planning and Planning Process

- Academic Partner The University of Texas Health Science Center at San Antonio
- Catchment Area 54 counties served for adults and adolescents
- **MMHPI role** included interviews with 163 stakeholders from across the SASH catchment area as well as an analysis that compared the number of licensed psychiatric beds available in the catchment area to the use of those beds.

Key Findings

- The use of ASH and SASH is significantly affected by the service systems around them. There is a general crisis in how psychiatric care occurs in these areas, with people routinely transported long distances for admission to an inpatient psychiatric bed.
- More than 21,000 adults and 4,100 youth with mental illnesses were admitted to ASH catchment area emergency departments in 2016. However, in both the ASH and SASH catchment areas, a person with a mental illness can sit in an emergency room for 24 hours or more waiting for a bed to open, which is costly to local hospitals as well as to law enforcement who transported them.
- In both ASH and SASH, many people have been hospitalized for more than one year, which effectively makes these beds unavailable. From a clinical perspective, many of these people do not need to be in a state hospital setting.
- Many counties in the ASH and SASH catchment areas have used new grant funding through 85(R) SB 292 and 85(R) HB 13 to create initiatives focused on reducing jail waitlists and expanding evidence-based treatments to keep people out of hospitals.
- There is consensus among the hundreds of stakeholders we interviewed that the state hospital system redesign, combined with other legislative initiatives in mental health, offers not only a tremendous opportunity to transform state hospital campuses, but also a once-in-a-lifetime opportunity for Texas to provide mental health care that is among the best care in the country.

| Phase II Projects in Austin and San Antonio | Funding Request | Beds |
|---|-----------------|------|
| Austin State Hospital – Construction | \$283M | 240 |
| San Antonio State Hospital – Construction | \$323M | 300 |

