Tinley Park
Mental Health Center

Testimony and Public Comments
as of 04/11/2012
April 9, 2012

Commission on Government Forecasting and Accountability  
Senator Jeffrey M. Schoenberg, Co-Chair  
Representative Patricia R. Bellock, Co-Chair  
Honorable Members of CGFA

Regarding: Tinley Park Proposed Closing

CBHA would like to thank the committee for this opportunity to secure input regarding Governor Quinn’s announced closing of Tinley SoH.

CBHA offers the following comments regarding the proposed closing of the Tinley Park state operated mental health facility including concerns and suggestions that CBHA has received from our members who are also committee members of a workgroup that DMH has established regarding the process of developing a workable plan for the closing of Tinley Park MHC.

We support the goal of developing plans based on service gaps and service needs specific to each geographic area utilizing the expertise of those service providers in each area. However, there remain concerns that:

- This process should be completed in a thoughtful and thoroughly planned manner, with proper program and fiscal support.
- Not all local teams have had their local plan revisited, i.e., DHS has met with some area teams and not others regarding the specific local plan submitted.
- To date it appears the reinvestment dollars are focused primarily on refinancing hospital beds (CHIPS) and substance abuse beds to such a degree that the dollars that remain for reinvestment in community-based services most likely are inadequate.
- The community mental health system has been not only underfunded but in the Governor’s proposed budget faces several disproportionate cuts again resulting in lost services, an unfortunate combination that leaves these individuals and communities without essential community-based mental health services.

It is our desire that an RFI process and budget negotiations will result in a service plan inclusive of the regional expertise and requirements.
CBHA recognizes that Mark Doyle and the Division are working on a very short time table, however, the time frame must be realistic and benchmarks must include a transition and sustainable multiple year’s financial plan for the needs of these individuals and communities. We must be cognizant of these requirements so as not to fail the population that will no longer be served through the state funded TPMHC service system.

I. A detailed transition and long-term plan and budget while not currently available is needed. A plan for the transition, closing, restructuring that addresses the safe transition of individuals in the affected region must be supported by a commitment of state financial resources for the development and implementation of local support care, treatment and services - from crisis, transportation, civil commitment through and including recovery community care, treatment and services.

II. In order to meet statutory requirements and alternative planning and service delivery objectives the Department of Human Services and General Assembly should prioritize the local development of the array of services inclusive of community support systems to those currently offered at Tinley.

III. In addition to the State Facilities Closure Act compliance with state responsibilities and executive branch roles, responsibilities and requirements should be ensured for those found in Public Acts: 80-1414, 88-380, 89-507, 93-770, 94-498, 95-682, 96-652, 96-1399, 96-1472, 97-528; as specified in state Acts and Codes including but not limited to: (405 ILCS 30/) Community Services Act.; (405 ILCS 35/) Community Support Systems Act.; (405 ILCS 5/) Mental Health and Developmental Disabilities Code:
   a. Emergency admissions by petition
   b. Court ordered admissions
   c. Transportation

CBHA believes Governor Quinn’s announced closing of Tinley state operated mental health facility should be accompanied by a benchmarked plan that:

1. Ensures the safety and receipt of care, treatment and services for individuals in need of that care, treatment or service.

2. Includes support that improves client outcomes within limited resources by articulating the next steps in efficiencies needed from redundant state regulations and the delivery system to efficiently and effectively integrate and coordinate care, treatment and services.

3. Ensures alternative plan development that includes the informed expertise that exists among local legislators, officials, community providers and stakeholders.

4. Provides an opportunity to:
   a. address systemic barriers,
   b. ensure renewed efforts focus on services, care and treatment of extended and/or repeat users of inpatient and other intensive mental and behavioral health care, treatment and services.

5. Enunciates a plan to meet the state responsibility for Civil Confinement.
6. Comply with state responsibilities and requirements found in Public Acts: 80-1414, 88-380, 89-507, 93-770, 94-498, 95-682, 96-652, 96-1399, 96-1472, 97-528; as specified in state Acts and Codes including but not limited to: (405 ILCS 30/) Community Services, (405 ILCS 35/) Community Support Systems Act. And (405 ILCS 5/) Mental Health and Developmental Disabilities Code for among other responsibilities:
   - Emergency admissions by petition
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Existing expertise and lessons learned
CBHA has continued to meet with community behavioral health care providers from the Tinley Park "service area"; Mark Doyle, Project Manager; and Dr. Lorrie Jones, DMH, concerning the development of a plan and to share the "lessons learned" from the closings of Meyer, Zeller SoH's, as well as the several nursing home facilities closed in 2011.

Please note:
CBHA’s February 7, 2012 and October 31, 2011 testimony to the Commission is on file.
Equip for Equality Testimony
Before the Commission on Government Forecasting and Accountability
Proposed Closure of the Tinley Park Mental Health Center
South Holland, Illinois
April 10, 2012

Equip for Equality, the independent, not-for-profit organization designated by the Governor in 1985 to administer the federally mandated Protection and Advocacy system for people with disabilities in Illinois, appreciates the opportunity to testify before the Commission regarding the proposed closure of the Tinley Park Mental Health Center (Tinley MHC).

Equip for Equality believes that individuals with mental illness are best served in the community, and we have long advocated for the State to strengthen and adequately fund the community mental health system so that quality mental health treatment and services are readily available and easily accessed. However, the reality is that the community mental health system in Illinois has been seriously underfunded for decades, and this has severely impacted the transition to more community based settings for services.

When Equip for Equality last testified before this Commission regarding the proposed closure of Tinley MHC, we stated that closing a state operated mental health center must only occur as part of a comprehensive plan to provide for the needs of the facility’s residents and acute care patients, including those with no insurance. The Department of Human Services/Division of Mental Health (“DMH”) has since submitted a three year closure budget and released a Request for Information for alternatives to services provided at Tinley MHC. We are strongly encouraged by these documents, which contain a number of positive provisions that were previously lacking. However, given the historic lack of commitment and political will to properly fund and maintain the community mental health system in Illinois, we continue to have some concerns.

The current budget contains additional funding for community mental health providers to serve those individuals who would have been served by Tinley MHC. However, we are concerned that this increase will be insufficient to expand the quantity and quality of community mental health services to the extent necessary to make this rebalancing plan successful. Community mental health providers have been continually squeezed by the state’s failure to make timely payments and recent budget cuts. To reverse this disparate and unhealthy trend, the state must allocate sufficient funds for community mental health services now. Further, under Illinois law, upon closure, the State is required to redirect all savings realized from closing Tinley MHC to services for individuals with mental illness. We believe that, with rebalancing and in order to provide adequate care, all such redirected funds should be spent in the community.
We support DMH’s expressed intention to utilize alternative models of care for individuals with mental illness—such as emergency department crisis intervention, Brief Intervention Linkage Treatment (BILT) and Intentional Peer Support—and commend DMH for recognizing that an effective community mental health system will reduce some of the need for acute inpatient psychiatric beds. However, the services listed as the community cost assumptions do not include all of the services that are necessary to fund an adequate community mental health system, such as psychotropic medications for individuals who are not Medicaid eligible. We recommend that the state should specify and provide additional funding for a broader array of community mental health services in order to effectively meet the needs of all of the individuals that the mental health system is intended to serve.

Adequate funding of the community mental health system is essential to improving—and will improve—the care and treatment of people with mental illness. But there will also continue to be some need for acute inpatient care for individuals who are in crisis such as those who have been served by Tinley MHC. It should be noted that the capacity of Tinley MHC is reflected not only in the daily census numbers and the number of beds, but also in the total number of people with mental illness it has served on an annual basis, which in FY 2011 was almost 2,000. Although DMH does allocate cost for acute inpatient hospital care in its most recent budget proposal, because it has not yet released the status of its negotiations with private hospitals, it is unclear whether these hospitals, in fact, have the intent and the means to serve these individuals. We continue to worry that, without agreements that assure that alternative acute care will be available, these individuals will wind up in the emergency room for 72 hours— or more— without treatment while they wait for a psychiatric bed to open up somewhere else.

The closure of Tinley MHC must proceed with sufficient funding and an expansion of capacity in the community in order to avoid greater numbers of people with mental illness being diverted to the criminal justice system, becoming homeless, or even dying. Illinois has initiated a process for working together with private hospitals and community mental health providers so that individuals with mental illness will receive appropriate treatment at the appropriate time. Equip for Equality is encouraged by this progress and stands ready to work with the State to implement its plan so that individuals with mental illness will receive quality mental health care when and where they need it.

Thank you very much.
April 10, 2012

Commission on Government Forecasting and Accountability
Senator Jeffrey M. Schoenberg, Co-Chairman
Representative Patricia Bellock, Co-Chairman
Honorable Members of CGFA
RE: Tinley Park Mental Health Center Closure

Thank you for the opportunity to provide this written testimony to CGFA as you consider the closure of the Tinley Park Mental Health Center as proposed by the Department of Human Services, Division of Mental Health.

Grand Prairie Services is the primary provider of safety net behavioral healthcare services in the four townships of Bloom, Bremen, Rich and Thornton within south suburban Cook County. For over 60 years we have provided community based behavioral health services delivered through a variety of contracts with the State of Illinois Department of Human Services, Divisions of Mental Health, Alcohol and Substance Abuse and Developmental Disabilities.

When the initial idea of closing/rebuilding Tinley Park Mental Health Center was presented in 2004/05, Grand Prairie Services was the lead south suburban agency in a workgroup created by the Department to develop a comprehensive community reinvestment plan in response to the potential closure. During that process, Grand Prairie Services put forth an enormous amount of time and energy in coordinating meetings with community based stakeholders including Mental Health and Substance Abuse providers, hospitals, and the National Alliance of Mentally Ill - South Suburbs of Chicago to develop the reinvestment plan. The proposal was designed to include the much needed expansion of community based behavioral healthcare services, development of a psychiatric triage service for our south suburban communities, and a comprehensive response to developing services in a region that has historically been underserved.

The Department of Human Services, Division of Mental Health (DHS/DMH) has again proposed the closure of Tinley Park Mental Health Center and community providers were asked to submit plans for community based services to care for the individuals that will be impacted by the closure of the facility. The need for all the services outlined in the original reinvestment plan has grown exponentially since that time while, concurrently, community behavioral healthcare providers have received consistent and disproportionate cuts in funding and specifically reductions in funding for services to the uninsured and working poor. For example, the Non-Medicaid Service Packages developed and mandated by DHS/DMH severely limited the type and amount of service an individual without funding can expect to receive from a community provider. One service package allows for
assessment with little or no follow-up treatment, thereby perpetuating the cycle of return visits to the ER for stabilization or hospital admission. To demonstrate an example of these reductions, in FY 12 Grand Prairie Services received a reduction of 67.9% in the funding available to provide services to the uninsured and working poor. This funding has been systematically reduced by more than 74% over the last three fiscal years. This reduction translates into hundreds of individuals who no longer receive treatment and services vital to their recovery because they are unfortunate enough to be without a funding source for their behavioral healthcare needs.

During FY 11, Grand Prairie Services received 519 discharge referrals for follow up care from state operated psychiatric hospitals, of which 394 were from Tinley Park Mental Health Center. Without acute care bed capacity in the community to meet the behavioral health needs of unfunded individuals requiring inpatient psychiatric hospitalization and without the funding for community mental health centers to provide the necessary follow up care, the recovery of this extremely vulnerable population will be compromised.

As an organization, Grand Prairie Services is a primary advocate for the continued and ongoing development of quality behavioral healthcare services as part of the safety net continuum for individuals without insurance, Medicaid and/or Medicare. We are also staunch advocates for services that best meet the needs of the community and understand that those services must be a quality continuum starting with comprehensive crisis service availability, inpatient care and comprehensive outpatient and supportive services. We ask that these things are considered and a safe effective plan be prepared prior to the closure of any state operated facility. We respectfully request that the Commission takes these matters into consideration when reaching a decision and making their recommendation.

Once again, we appreciate the opportunity to share our thoughts regarding the Tinley Park Mental Health Center proposed closure and would be available to answer questions or provide additional information you may need as a Commission to make your recommendation. I can be reached at (708) 623-1504. Thank you.

Sincerely,

Lisa M. Labiak
V.P., Development & Corporate Communication

CC: CGFA Members
    Dan R. Long, Executive Director, CGFA
Additional Facts / By the Numbers

1.) Secretary Saddler and Director Jones concur that, "The State’s capacity to provide acute inpatient psychiatric care will be significantly reduced."

2.) Closing Tinley MHC creates a geographic inequality / imbalance.
   - Nearly 1,000,000 Illinoisans reside in the South Suburbs.
   - Tinley is the only state MHC serving citizens spanning from Oak Lawn to Joliet, Kankakee and even Pontiac (patients farther South are closer to McFarland MCH in Springfield).
   - North Suburban residents will retain access to 3 state MCH’s within 30 miles of each other: Chicago-Read, Elgin & Madden.

3.) Closing Tinley MHC dramatically reduces regional bed capacity.
   - The closest state MHC offering inpatient mental health care will be Madden MHC in Hines, IL (28 miles away, 150 beds).
   - Only 3 private hospitals offer inpatient mental health care within a 20 mile radius:
     - Palos Community Hospital in Palos Heights (9 miles; only 38 mental health beds)
     - St. Bernard Hospital in Chicago (only 40 mental health beds)
     - Hinsdale Hospital in Hinsdale (17 mental health beds; recently eliminated 32 beds)

4.) Tinley MHC accounts for 19% of all patients treated at state mental health centers. Tinley, Singer & Chester MHC combined account for 29%.
   - "In FY2010... the DMH provided state hospital services for approximately 10,200 individuals." – July 9, 2011 “Illinois DHS Division of Mental Health Services Block Grant Applications FY2012-FY2013”, page 2
   - Tinley MHC treated 1,905 patients in FY2010. – AFSMCE 31 Fact Sheet, page 1
   - Tinley, Singer & Chester MHC treated 2,990 patients. – AFSMCE 31 Fact Sheet, page 1

5.) Factors #1, 2, 3 & 4 (above) will overwhelm already strained local service providers.
   - According to a March 2008 report by the Treatment Advocacy Center, Illinois has already been facing a “severe bed shortage” since ‘05. IL has since further reduced public psychiatric beds.
   - Sufficient local bed capacity does not exist to handle another influx of patients.
   - Community service providers currently lack the resources necessary to fill such a large gap so quickly, despite their best efforts.
   - The immediate consequences will erode multiple levels of patient care & community oversight.

6.) When closing Howe Developmental Center in 2008, IDHS promised to build “a new, state-of-the-art” facility in the South Suburbs by 2011.
   - "The long-range goal is to build a new state-of-the-art, privately-managed psychiatric hospital in the south suburbs. Guided by stakeholder input, IDHS plans to begin a bidding process by January 2009 to award a contract to build and operate the new mental health facility as a public-private partnership, with the vendor reporting and accountable to the state. Under the current timetable, a new facility would open in
2011 at a location within the south region. The number of beds, the size of the new facility and other features will be determined as the State receives input from stakeholders over the coming months."

- September 5, 2008 Department of Human Services Press Release, "Department of Human Services Announces Changes to Mental Health and Developmental Disabilities Services in the South Suburbs - Moves Will Ensure Quality Services for People With Mental Health and Developmental Disabilities"

Gov.'s office estimates facility closure savings of only $8.1 million in FY2013.

- "Savings following the closure of Tinley MHIC are expected to be approximately $8.1 million"
  - 1/19/12 State of Illinois Press Release, Office of the Governor, "Governor Quinn Announces Active Community Care Transition Plan"

Economic Impact

"179.2" Direct Jobs Lost

- 3/06/12 Illinois Department of Human Services, "3 Year Budget Impact from Tinley Park and Singer Closures", page 2

365 Total Jobs Lost


$50,521,350 total economic impact


FY2013 IL Budget – Governor’s Proposed Mental Health Reductions

-$58,405,200 Reduction in Mental Health Grants

- $146,949.1 actual expenditure in 2011
- 144,201.0 estimated expenditure in 2012
- $85,795.8 recommended appropriation in FY2013
  - Office of the Illinois Governor, FY2013 Proposed Operating Budget, page 5-110 (pg 240 in Adobe Reader)

Eliminate Mental Health Transportation

- $1,176.0 actual expenditure in FY2011
- $742.5 estimated expenditure in FY2012
- $0 recommended appropriation in FY 2013
  - Office of the Illinois Governor, FY2013 Proposed Operating Budget, page 5-110 (pg 240 in Adobe Reader)

Eliminate Community Mental Health Partnership

- $0 recommended appropriation in FY 2013
  - Office of the Illinois Governor, FY2013 Proposed Operating Budget, page 5-110 (pg 240 in Adobe Reader)

Slash Mental Health Supportive Housing

- $19,550.8 actual expenditure in FY2011
- $9,382.5 estimated expenditure in FY2012
- $6,000.0 recommended appropriation in FY 2013
I am against closure of Tinley Park Mental Health Center. I am a psychiatric RN currently at Tinley Park MHC but previously worked at Ill State Psychiatric Institute (ISPI). I am Sharon Ostrowsky RN. We need to improve the care for mental health, NOT eliminate it! The public community clinics have already had their funds decreased and therefore have a decreased ability to give needed treatment. The private hospitals WON’T take our clients related to no or inadequate insurance/funds.

The money being saved by closing public mental health facilities as well as developmental disabled facilities will in actuality, NOT be a saving! More funds will be needed in the prison system. Without treatment there will be increased illegal drug use, more crime & more homelessness! Also there will be increased financial & emotional strain on family members! With treatment these clients CAN be productive, taxpaying voters!

The direction government (& society) seems to be taking is back to the 40’s & 50’s. At that time there was much more STIGMA on mental health & mental retardation (DD). This gave poor or Inadequate treatments & frustration on part of the families. This led to MANY dysfunctional families!

We need increased research & IMPROVED treatments to fight this backwards cycle. Also the treatment needs to be available to the public sector (not just the wealthy). Tinley Park MHC OR a facility in the southland region needs this public facility as we serve -- Will, Grundy, Kankakee Counties, south suburbs, & south side of Chicago. Tinley Park MHC also receives clients from north side of Chicago when Chicago Reed MHC & Madden MHC beds are full.

If the state has plans to receive bids for our clients’ care/future, should we NOT close UNTIL we have definite names of these caretakers/facilities and plans in place with the private hospitals for emergency rooms referrals.

Also if they want to attract new business & economy to this region, it will be almost impossible with the homelessness & increased crime rate that will occur!

Sharon Ostrowsky RN, email: Sharon.ostrowsky@yahoo.com, please send verification that this letter is in the files that were looked. Also I would be willing to be a resource for any representative. I also am a member of NAMI. I needed to go in the field to understand about some of my older family members.

My phone is: 708-267-1764

I am: 38th Representative District – Al Riley
19th Senatorial District – Maggie Cherry
PHIL KADNER  
pkadner@southtownstar.com | (708) 633-6787

She tries to rescue the sick from state’s budget ax

There is a fire in the eyes of Eileen McGrath when she talks about the need to take care of those who cannot take care of themselves.

At the age of 82, you can hear the compassion of a nurse in her voice and the patience a lifetime educator in her words.

For 12 years, from about 1981 to 1993, she was a Chicago Board of Education registered nurse assigned to the Cook County Jail.

“We were responsible for running a school for the inmates,” she said.

“I called them my clients and they were 17 to 21 years old,” Mrs. McGrath told me.

“The teachers would refer students to me who they thought had psychiatric problems and I would refer them for treatment.

“I saw how many of these young men were mentally ill.

“They needed treatment, just like a diabetic needs insulin. But there’s so much of a stigma attached to people who need psychiatric care that quite often they don’t get the care they need. Maybe their parents don’t want to admit they have a problem, or they don’t want to admit it themselves.”

She is outraged by the state’s plan to close the Tinley Park Mental Health Center to save money.

She collected signatures on petitions opposing the closing from senior citizens at her church, St. Elizabeth Seton in Orland Hills, and had her daughter-in-law collect others at St. Julie Billiart Church in Tinley Park.

“There are 153 signatures with addresses of each of the people so state officials can check them if they want,” Mrs. McGrath said.

I have known Mrs. McGrath, who now lives in Tinley Park, for many years.

Long ago she was my parents’ next-door neighbor in Chicago.

Gov. Pat Quinn has ordered the closing of the Tinley Park Mental Health Center on July 1. [FILE PHOTO]

She is one of those rare people whose spirit has not been diminished by the passage of time or disappointments of life.

Quite the contrary, she seems to have a youthful optimism, a belief that one person can make a difference and that the voices of ordinary people will be heeded by political leaders.

The governor has ordered the closing of the Tinley Park Mental Health Center on July 1.

The state Legislature’s Commission on Government Forecasting and Accountability (COGFA) has scheduled a public hearing on the closure for 3 p.m. Tuesday in the South Suburban College Field House in South Holland.

COGFA recommended against closing the mental health center after a similar hearing last fall and the closure was postponed.

I asked her why, at a stage of life when many people choose to avoid getting involved in controversial issues, she’s joined a battle that most folks don’t care about.

“I remember the words of a teacher I had in class when I was in school (studying to be a nurse),” Mrs. McGrath said.

“The teacher told us that we were rescuers. We could save lives.

“Tinley Park has 75 beds and treats 1,900 patients a year,” she continued.

“These are people who don’t have health insurance or whose health insurance has been capped and won’t pay for private care. Where are those people going to go if Tinley (Park Mental Health Center) closes? They’re going to end up on the streets.”

EILEEN MCGRATH

“They are people who don’t have health insurance or whose health insurance has been capped and won’t pay for private care. Where are those people going to go if Tinley (Park Mental Health Center) closes? They’re going to end up on the streets.”

“Where are those people going to go if Tinley closes? They’re going to end up on the streets.

“If that was your family member, would you want them on the streets? I don’t think anyone wants to see a family member of theirs thrown out onto the streets.

“Most mental illnesses today are treatable. It is simply a chemical imbalance and with the right psychotropics drugs, these people can lead normal lives.”

State health officials claim that when the Tinley Park center closes, the state will invest in community care for the mentally ill.

But when I pressed them for details, they admitted they had none. When I asked if they could guarantee that every dollar spent would be reinvested in community care, they confessed the reason for closing the mental health hospital was to save money, so obviously not every dollar saved will be reinvested.

And while these government officials claim there are other hospitals to care for seriously ill patients, every person I’ve talked to in the private hospital field has said there are no beds and it is unlikely the state will pay the hospitals enough money to create new psychiatric beds.

“You heard the testimony at the last hearing,” Mrs. McGrath said.

“Patients are waiting for two to four days in (private) hospital emergency rooms to be transferred to a psychiatric bed.”

“Tinley Park should remain open. It provides vital care to people who are sick.”

When the government cuts the fat from its budget, it’s not patronage workers who feel the cuts but people who are sick.
Closure of Tinley Park Mental Health Center.

I am here to oppose this closure of this center. I am sadden at the fact just 6 months ago we went through this, it was the budget then and now it’s just the Governor saying it’s about saving money. I hope that the Governor will at least provide these patients with 2 things, 1. A BIG CARDBOARD BOX 2nd a SHOPPING CART. That way they will have shelter and a way to push their belongings.

I represent the nurses at this facility and also 2 others on the Governor’s list. I have been to 2 other hearings and have heard the Department of Human Services say pretty much the same thing each time 1; they plan to rely on community based services for the residents in the community. Yet the cost to place the residents will fall back to the state which in turn will cost the same or even slightly higher than to have this and the other facilities remained open. Has the commission even looked to see where these residents would be moved to? Tinley Park Mental Health Center has currently between 30 to 40 patients who would have to either go to community mental health clinics or be transferred to another facility which would be over 60 miles away. Most mentally Ill will not seek help in the community and end up homeless or back in the system by means of being arrested then into our correctional centers. Not to mention the possible overcrowding this would place on these Jails and correctional facilities.

The loss of jobs here in the community could be devastating.

The Illinois Nurses Association, AFSCME, the Community and its Residents demand the Governor keep this facility open!!

Sincerely,

Henry Felts RN

Staff Specialist

Illinois Nurses Association
April 9, 2012

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IARF Statement to the Commission on Government and Forecasting and Accountability: Closure of Tinley Park Mental Health Center

The Illinois Association of Rehabilitation Facilities (IARF) represents over 90 community-based providers serving children and adults with intellectual/developmental disabilities, mental illness, and/or substance use dependencies in over 900 locations throughout the state. For over 35 years, IARF has been a leading voice in support of public policy that promotes high quality community-based services in healthy communities throughout Illinois. Approximately 600 licensed and/or certified community-based providers serve and support over 200,000 children and adults in the community system.

Timeline of Closure Announcements - IARF Positions
This written statement follows previous statements filed on 10/25/11 and 02/07/12 in response to two previous closure announcements. The timeline of our position is reflected below:

- 09/08/11 - IARF opposed the Administration’s original closure announcement due to inadequate planning and an extremely aggressive closure timeframe.
- 10/25/11 - IARF written statement to COGFA offered a series of policy recommendations, that if embraced, would call for the Association to re-evaluate its position.
- 01/19/12 - IARF reassessed its position following this revised closure announcement due to our initial review of the Active Community Care Transition (ACCT) Plan and a less aggressive closure timeframe.
- 02/07/12 - IARF written statement to COGFA noted our support for the Administration’s closure announcement and the ACCT Plan remained contingent on the commitments of the Administration to ensure:
  - respect for the choice of individuals, family members, and/or guardians on services and supports;
  - transparent communications with stakeholders, which includes incorporating recommendations from stakeholders throughout;
  - careful planning and clarity as to what will be expected of community providers; and
  - adequate investment of state funding and timely payment to service providers.

Today, the Association maintains the support position we posited during the 02/07 hearing having the benefit of participating in the ACCT Plan development process and recently reviewing the Request for Information for the Tinley Park Mental Health Center Community Reinvestment. However, we remain concerned that the July 1, 2012 closure deadline reflects an aggressive closure date in consideration of ongoing difficulties with adjudication of FY12 claims and the corresponding delays in payments this situation has created, damaging cuts proposed in the FY13 budget request, and the list of services and supports the Division intends to purchase leading up to and following the closure. Some service capacities will need to be created and/or further developed.

ACCT Plan and RFI for Tinley Park Mental Health Center Community Reinvestment
Association staff and members from Region 1 South, as well as other providers and stakeholders, have participated on the ACCT Committee and workgroups to assist the Project Manager and the Division of Mental Health in developing the Community Reinvestment Plan aimed at ensuring access to services and supports
with the anticipated closure of Tinley Park Mental Health Center.

The RFI reflects a series of recommendations that if implemented, may provide community-based alternatives to referrals to State-operated Hospitals. The RFI seeks to fund several services and supports purchased from community hospitals, community mental health providers, and community substance abuse disorder providers by July 1, 2012 in two phases. Phase I is comprised of purchasing services to engage individuals that present at community hospital emergency departments, which is aimed at developing a system to:

- deliver crisis intervention services 24/7;
- provide co-located or mobile crisis services, including at hospital emergency departments;
- help resolve a wide array of presenting problems, such as access to medication, transportation, immediate housing, etc.
- connect people to the most appropriate level of DMH and/or DASA community services; and
- incorporate evaluation protocols identified by DHS to measure the effectiveness of the Region 1 South Crisis System.

The ACCT plan envisions Phase II as a refinement of Phase I processes to intercept individuals before they present at hospital emergency rooms.

**Role of Community Mental Health Providers in Phase I Plans**

Community mental health providers are one of three key provider types for Phase I. The RFI will assess local community mental health providers ability to provide and/or build capacity to offer the following services and supports:

- mobile outreach services to local hospitals without internal behavioral health specialists;
- crisis outreach - services designed to interrupt a crisis, including assessment, brief supportive therapy or counseling and referral and linkages;
- crisis residential services - therapeutic intervention and short-term stabilization; and
- **Non-Medicaid Rehabilitation Option (MRO) services and enhancements, including:**
  - Unlimited crisis intervention
  - Mental health assessment (4 hours)
  - Treatment plan development, review and modification (2 hours)
  - Various types case management (5 hours)
  - LOCUS case management (1.5 hours)
  - Psychotropic medication administration (3 hours)
  - Psychotropic medication monitoring (2 hours)
  - Psychotropic medication training individual (2 hours)
  - Oral interpretation and sign language (25 hours).

**Region 1 South Community Reinvestment and the Greater Community Mental Health System of Care**

As indicated above, the RFI reflects careful consideration of the local service system needs and presents a coordinated plan for ensuring individuals that present at community hospital emergency departments receive appropriate care. However, the Association is compelled to remind members of COGFA that the Governor’s proposed budget would eviscerate community-based mental health care throughout Illinois by eliminating non-Medicaid services (~$17.6 million), cut deeply into capacity grant programs (~$18.4 million), and structure a 30-day payment delay (~$12.6 million - 30 day delay above and beyond existing cash flow delays). With program funding cuts of 37% since FY09, the system of care cannot endure $59 million in cuts in FY13 without the elimination of programs throughout the state.

The regional development of coordinated community mental health care - as proposed with the RFI for
services in Region I South, cannot succeed independent of the Governor’s proposed cuts - either in scope or amount. Therefore, while IARF maintains its support for the Region I South plan, we believe its success is very much tied to maintaining funding for the overall system of community mental health care in Illinois.
February 29, 2012

Dan R. Long
Executive Director
Commission on Government Forecasting and Accountability
703 Stratton Office Building
Springfield, Illinois 62706

Ré: Proposal to Close Tinley Park Mental Health Center

Dear Director Long:

Enclosed please find comments from Mental Health America of Illinois concerning the Department of Human Services proposal to close Tinley Park Mental Health Center. I would appreciate it if these comments could be provided to the members of the Commission prior to the March 12, 2012 hearing.

Thank you for your attention.

Sincerely,

Mark J. Heyman
Chair, Public Policy Committee
Writer's direct line: 773-753-4440

closures.
Concerns of MHAi Regarding Proposal to Close Tinley Park

As a member of the Mental Health Summit, MHAi supports the statement The Summit provided to the Commission on Government Forecasting and Accountability at its February 7th hearing in Springfield. This statement is enclosed. As a supplement to the Summit’s statement, we are submitting this memorandum detailing legal rights currently available to patients in state hospitals but not private hospitals. When the State closes Tinley Park, it must ensure by contract or by statute that important legal rights currently available to people in state facilities will also be available to such individuals in private hospitals. These rights are spelled out in the Mental Health and Development Disabilities Code:

1. The right to treatment by challenging a denial of admission (405 ILCS 5/3-405) or discharge decision (405 ILCS 5-903).
   a. Whenever a person is denied admission to a Department facility, the person seeking admission is immediately given written notice to right to request review of the denial. 405 ILCS 5/3-405.
   b. Whenever a Department facility wishes to discharge a recipient, it must give written notice of discharge to a recipient, his attorney, and guardian. A recipient, his attorney, or guardian may object to a discharge. Upon receipt of an objection, the facility director must promptly schedule a hearing to be held within 7 days at the facility pursuant to 405 ILCS 5/3-207.
   c. Because patients currently served by Tinley Park are without Medicaid or private insurance, private hospitals are both less likely to admit them and more likely to discharge them prematurely. Premature discharge without a proper discharge plan can result in serious harm to a persons with serious mental illness.

2. The right to writing materials, postage, and telephone funds. 405 ILCS 5/2-103.
   a. Because patients currently served by Tinley Park are indigent and unable to purchase these materials themselves, this statutory provision is necessary to ensure that such patients are able to communicate effectively with distant friends, family, and counsel.

3. The requirement that each state-operated facility must publish a quarterly report stating the numbers of persons who were determined to meet the standard for administration of psychotropic medication and electroconvulsive therapy, but for whom it was determined that the filing a petition to the court was not warranted. 405 ILCS 5/2-107.3.
a. This requirement allows for public oversight of State-operated facilities. Closing Tinley Park and moving recipients to private facilities would undermine the safeguard of public oversight. Historically, different state hospitals have administered medication at varying frequencies, and this procedural requirement allows advocacy groups to identify which hospitals are systematically underserving persons with serious mental illnesses.

4. The requirement that, whenever psychotropic medication is refused, a Department physician must state in writing whether the recipient meets the standard for administration under 2-107.1 of the Code. If the physician determines that the recipient meets the criteria for administration of medication under 2-107.1, they must petition the court for administration. 405 ILCS 5/2-107(h).

a. This requirement ensures that, when necessary, hospitals petition the court for involuntary administration of medication or electroconvulsive therapy. Along with the requirement listed above in item 3, this statutory provision guards against hospitals underserving the mentally ill by declining to administer psychotropic medication due to the costs associated with court proceedings.

b. This statutory right is deeply connected to Section 2.c. of the Mental Health Summit's submitted statement. The burden on state hospitals from these court proceedings is typically lessened by the fact that many state hospitals have the capacity to have such a court hearing on-site. Private hospitals will be required to send at least one expert some distance to testify in court and pay for the secure transportation of the respondent to and from court. If the persons currently served at Tinley Park will now be served by private hospitals, the State must provide funding to cover these costs.

Mental Health America of Illinois supports the closing of Tinley Park. However, when the State decides to close a state facility, it must provide sufficient funding and a comprehensive plan to guarantee adequate treatment in alternative settings. It is vital that there be a transparent process which ensures that all of the above provisions are in any contracts which the state negotiates with private hospitals. We are particularly concerned that no negotiations take place until the state announces in public what services (including those listed above) private hospitals will be required to provide.

Mark J. Heyrman
Chair, Public Policy Committee
Writer’s direct line: 773753-4440
Mental Health Summit
Invest in Mental Health. Treatment Works.

6020 S. University Ave. • Chicago, IL 60637 • (773) 702-9611 • (773) 702-2063 (FAX)

Summit Concerns About the Decision to Close Tinley Park Mental Health Center

1. The State must comply with the Community Reinvestment Act. 405 ILCS 30/4.4
   a. The CRA requires all funds saved by the closure of a state psychiatric hospital to be reinvested in the mental health system.
   b. The State's has announced that it will violate the CRA since less than half of the funds (only $8.9 million out of $20 million) which will be saved will be spent in the mental health system.

2. Plans for replacing Tinley Park's inpatient capacity must reflect its unique role.
   a. Tinley Park is an acute care facility. Concepts like "Money Follows the Person" apply only to long-term care facilities (like Jacksonville), not to acute care facilities like Tinley Park. The replacement plan must reflect this reality. To be specific, this means the focus must be on the 2,000 people per year served by Tinley Park, not just on the 40 to 50 people who might be in Tinley Park on the day it closes.
   b. Tinley Park serves almost exclusively persons without insurance and who are not eligible for Medicaid. Plans for replacing Tinley Park must include funding to insure community services are available for the non-Medicaid indigent population and funding to private hospitals to perform comprehensive discharge planning and linkage for persons with serious mental illnesses. The State should also apply to the Federal government for early permission to expand its Medicaid services in advance of the 2014 start date for the Patient Accountability and Affordable Care Act.
   c. Tinley Park has the ability to serve persons needing involuntary commitment and involuntary medication hearings because commitment and medication hearings are held at the facility and participating in the hearings is part of the duties of the psychiatrists and other persons who are Tinley Park employees. Funding must be provided to private hospitals to pay psychiatrists for their time and pay the hospital for the cost of transporting patients to court for hearings. No such funding source currently exists.
   d. People in state facilities like Tinley Park have important legal rights under the Mental Health and Developmental Disabilities Code that are not available to people in private hospitals. The state must insure (by contract and/or statute) that

http://www.law.uchicago.edu/clinics/mandel/mental//summit
private hospitals chosen to serve the Tinley Park population honor these important rights. Among the important rights afforded only to persons in state hospitals are:

i. The right to challenge a denial of admission. 405 ILCS 5/3-405.
ii. The right to challenge a transfer to another facility. 405 ILCS 5/3-910.
iii. The right to challenge a discharge decision. 405 ILCS 5/3-903.

e. The current Medicaid rates paid to private hospitals have substantially contributed to the loss of more than 1,000 private psychiatric beds in the last 15 years. The state must commit itself to set rates high enough to insure adequate and humane inpatient mental health services.

f. The State must assess the physical layout of any new units a private hospital proposes to open to serve Tinley Park area residents to insure that these units are appropriate to the clinical and safety needs of this population.

g. The state must create a transparent process so that advocates can be assured that contracts with private hospitals replacing Tinley Park require those hospitals to provide all of the services currently being provided at Tinley Park. Preferable the state should publish a Request for Proposals.

3. Increased community resources could reduce the need for inpatient capacity in the Tinley Park service area and save the State money. DHS must commit itself to a plan which provides an integrated and coordinated continuum of care and services from crisis through recovery. However, we are concerned because:

a. Cuts in funding for non-Medicaid persons has reduced the capacity of community providers to serve the population being served by Tinley Park.

b. The state has not committed itself to provide funding, including realistic rates, to insure the provision of necessary services, including but not limited to:

i. The Living Room or other respite services
ii. Crisis services
iii. Supportive Housing
iv. Substance abuse services and services for those with co-occurring disorders
v. Assertive Community Treatment (ACT) and enhanced ACT
vi. Supported employment
vii. Peer support services
viii. Psychiatric services
ix. Psychosocial rehabilitation
x. Access to psychotropic medications

c. DHS should assess the need for each of these services and create a realistic budget to insure that the services actually will be provided. It is not sufficient to announce that ACT, for example, is an authorized service but then set rates which make it unlikely that this extremely important service will actually be available.

4. In the absence of a comprehensive, adequately-funded plan, the entire Chicago region will be negatively affected by the closure of Tinley Park.
a. Non-Medicaid patients no longer served by Tinley Park will have to share the limited number of beds at the remaining Chicago area hospitals (Reed, Madden and Elgin).

b. DHS has no plan to increase acute beds at these facilities.

5. In the absence of a comprehensive, adequately-funded plan, county and municipal governments will be forced to bear substantial additional financial burdens if Tinley Park closes.
   a. Police have become the first responders to mental health emergencies created by the state's longstanding failure to fund the mental health service system.
   b. Criminal courts will bear additional burdens because of the State's decision not to provide treatment to people with very serious mental illnesses.
   c. County jails and municipal lockups will bear the cost of housing and treating persons with mental illnesses in inappropriate settings.
   d. Homeless services will bear additional burdens.

6. In the absence of a comprehensive, adequately-funded plan, emergency departments will be further burdened with persons with serious untreated mental illnesses if Tinley Park closes.
   a. Because of the substantial existing shortage of inpatient psychiatric beds, persons with serious mental illnesses are already forced to wait for days in emergency departments.
   b. Because of the substantial existing shortage of inpatient psychiatric beds, persons with serious mental illnesses are already being housed in general medical units of hospitals which do not have a psychiatric unit.

7. The main provisions of the Patient Accountability and Affordable Care Act (PAACA) are scheduled to take effect in 2014. If implemented, it is likely that the PAACA will reduce the need for facilities like Tinley Park. However, it is important that the State not eliminate state-funded mental health services until the PAACA actually takes effect because:
   a. The PAACA may be found unconstitutional by the United States Supreme Court.
   b. If a Republican is elected President in November, it is likely that the PAACA will be repealed. (Every Republican candidate supports repeal.)
   c. The effects of the PAACA on Illinois' need for state-operated inpatient beds are hard to predict.
   d. The prospect that the PAACA will take effect in 2014 should convince us to do everything in our power to maintain (or improve) the mental health system until that time. People who are harmed in 2012 and 2013 if Tinley Park is closed without adequate planning and replacement services will take little comfort from the idea that, if only they had stayed well until 2014, that harm would not have occurred.
8. Even though DHS has been working to close Tinley Park since at least September, DHS has just begun to engage advocates and providers in planning to insure adequate and humane care and services to the persons who will no longer be served when Tinley Park closes. DHS must ensure that this process is effective.

9. Previous closures of state hospitals have taken longer than the time period allotted by DHS for the closure of Tinley Park. DHS must create a realistic timeline for this closure that ensures the safety and well-being of persons with serious mental illnesses.

Mark J. Heyrman
Kyle Lawrence
Summit Facilitators
MENTAL HEALTH SUMMIT
Invest in Mental Health. Treatment Works.

6020 S. UNIVERSITY AVE. • CHICAGO, IL 60637 • (773) 702-9611 • (773) 702-2063 (FAX)

Summit Members

Alexian Brothers Center for Mental Health/Behavioral Health Hospital
Anixter Catholic Archdiocese of Chicago, Commission on Mental Illness

CAUSE
Child and Adolescent Bipolar Foundation
Community Behavioral Healthcare Association of Illinois
Community Counseling Centers of Chicago
Community Mental Health Board of Chicago
Depression and BiPolar Support Alliance
Domestic Violence and Mental Health Policy Initiative
Equip for Equality, Inc.
Health and Disabilities Advocates
Healthcare Alternative Systems
Heartland Alliance
Human Service Center
Illinois Association of Community Mental Health Authorities
Illinois Association of Rehabilitation Facilities
Illinois Childhood Trauma Coalition
Illinois Council on Problem Gambling
Illinois Counseling Association
Illinois Hospital Association
Illinois Mental Health Counselor's Association
Illinois Mental Health Planning and Advisory Council
Illinois Rural Health Association
Illinois Psychiatric Society
Illinois Psychological Association
Illinois Society for Clinical Social Work
John Howard Association
Kendall County Health Department
Latino/a Mental Health Providers Network
League of Women Voters of Illinois

Lutheran Social Services of Illinois
Mental Health America of Illinois
Mental Health Consumer Education Consortium
Mental Health Services–DuPage County Health Department
Midwest Asian Health Association
National Alliance on Mental Illness
Cook County North Suburban
National Alliance on Mental Illness DuPage County
National Alliance on Mental Illness Greater Chicago
National Alliance on Mental Illness Illinois
National Alliance on Mental Illness Will County
National Alliance on Mental Illness South Suburbs of Chicago
National Alliance on Mental Illness Southwestern Illinois
National Association of Anorexia Nervosa and Associated Disorders
National Association of Social Workers Illinois Chapter
New Foundation Center
Next Steps
OCD—Chicago
Recovery, Inc.
Sankofa Oranization of Illinois, Inc.
Sonia Shankman Orthogenic School of the University of Chicago
Suicide Prevention Association
Supportive Housing Providers Association Thresholds, Inc.
Trilogy
University of Chicago Foundation for Emotionally Disordered Children
Will County Health Department

http://www.law.uchicago.edu/clinics/mandel/mental/summit
My name is William Gorman and I am the Executive Director of the Statewide Independent Living Council of Illinois. Per federal law, the SILC of Illinois has responsibility for developing a state plan for independent living services across Illinois. SILC of Illinois supports the closure of the Tinley Park Mental Health Center as long as there is a concrete investment of funding to develop community capacity to support the closure of Tinley Park.

We believe that the debate regarding institutions vs. community services needs to move to a practical problem solving methodology to ensure the expansion of community services. Numerous studies verify that individuals with disabilities are safer, healthier, acquire skills at a greater rate, and have a higher quality of life in the community. The State of Illinois needs to pursue the best options for persons with mental health conditions instead of continuing to depend on institutional models that are outdated because they are the only option presently available.

Illinois can successfully close the Tinley Park Mental Health Center. Twenty years ago, the State of Pennsylvania successfully closed the Byberry state-operated hospital by utilizing a “money follows the person” model insuring a humane comprehensive system of care within local communities for individuals exiting and being diverted from institutions. Similar to the present economic conditions we have in Illinois, Byberry closed with only a fragmented system of community services in place and set a standard for other states to follow. Additionally, due to an emphasis placed on recovery-oriented services by the Illinois Department of Human Services/Division of Mental Health, Illinois is better positioned to offer the critical element of professional peer-delivered services that Philadelphia began providing twenty years ago. The development of community capacity utilizing evidence-based models such as Permanent Supportive Housing, Consumer-Operated Services, Assertive Community Treatment, Supported Employment, Family Psychoeducation, MedTeam (Medication, Treatment, Evaluation and Management), and Illness Management and Recovery will ensure the successful transition of individuals from the Mental Health Centers to the community. Additional money follows the person funding should be allocated to local crisis alternatives such as the Living Room model and short-term inpatient psychiatric care within community hospitals that offer established recovery-oriented services to prevent and minimize the need for future hospitalizations.

It is past time for Illinois to embrace psychiatric crisis alternatives that are consistent with the Olmstead Decision and the Presidents New Freedom Commission on Mental Health. We are cognizant and sensitive to the concern over job loss; however, jobs lost at Tinley Mental Health Center will be created in the community to serve individuals transitioning out of Tinley Park to community supports and services. Regardless, the preservation of state jobs cannot trump the rights of individuals with
psychiatric disabilities to live in the community. We cannot continue to use individuals with mental health conditions as economic commodities to maintain state employment. Instead, we need to provide options which cultivate an individual's ability to live, work, learn and fully participate in the local community.

We can follow the lead of other states faced with transitioning from an institutional approach to a community-based approach. On August 29, 2011 the Vermont State Hospital was destroyed by Tropical Storm Irene and fifty-one persons were evacuated to several places throughout the state. Since that time, stakeholders have worked diligently to promote final closure of the hospital with the development of community alternatives. In October 2011, Governor Peter Shumlin announced the hospital would not re-open. This is an excellent example of how a crisis became a major opportunity for persons with mental health conditions.

We don't have to wait for a natural disaster or a lawsuit to give persons with mental health conditions an opportunity to live in the least restrictive and most recovery-oriented environment possible. The time for inclusion is now. The SILC of Illinois encourages COGFA to recommend the closure of the Tinley Park Mental Health Center with the needed appropriation of funds to transition individuals to the community and prevent the need for future re-institutionalization.
EILEEN C. McGRAITH, BSN
8649 Kathleen Lane
Governor Pat Quinn
Tinley Park, IL, 60477
The Commission on Government Forecasting
and Accountability
Capital Building
207 State House
Springfield, IL 62706

Dear Governor Quinn and Commission Members,

Attached are petitions from 153 voters who are residents of South Cook County, Illinois. It is of utmost importance that Tinley Mental Health Center is kept open.

Submitted by:

Eileen C. McGraith, BSN
Interested Citizen of Illinois
708-342-1507
March 19, 2012

Senator Jeffrey Schoenberg  
Commission on Government Forecasting  
And Accountability  
703 Stratton Office Building  
Springfield, Illinois 62706  

Dear Senator Schoenberg,

As a dentist that has occasionally treated the developmentally disabled over thirty years, I’m concerned over the recent big push to close down State institutions that house these individuals. Not that these places are all good, as the recent closure of the Howe Center in Tinley Park showed. However, who’s proving that these patients’ lives will be better in group homes?

You have staff at these group homes making McDonald’s wages with little or no benefits. These homes have few or no programs and have infrequent and pre-announced visits by State regulators. The Department of Justice, who goes over the State institutions with a fine tooth comb, does not check group homes.

I have dental colleagues, both dentists and hygienists, who have or are currently working at State institutions, say that when some of their patients were placed in group homes, and for whatever reason, had to come back from their placement, their mouths were consistently in terrible shape. The oral hygiene was very poor, there were no sign of any professional cleanings and many had severely decayed teeth. With a majority of these patients being nonverbal and not being able to tell you their mouths hurt, this is extremely cruel treatment of our most vulnerable citizens.

I had one colleague ask an owner of several group homes, who lived in a large expensive house herself, since most of her clients are on Public Aid and Public Aid does not pay for adult cleanings and fluoride treatments, would the group home be responsible to pay for patients’ cleanings and fluoride treatments. What was her answer? “Oh no. The patients would pay for those services out of the money they make at work shop”. What do these patients earn at work shop-five or ten dollars a day? The dentist decided not to work with her because he couldn’t bare thinking he was taking money from those poor patients. Remember: the less money the group owner spends, the more money they make!

As a politician who prides himself on protecting these individuals, you need to get your head out of the sand and have someone start realistically and thoroughly checking ALL the places where these individuals live. If these placements are solely to save money and not give these individuals equal or better care as in an institution, you have failed to do your job.

Sincerely,

A concerned dentist.
My name is William Gorman and I am the Executive Director of the Statewide Independent Living Council of Illinois. Per federal law, the SILC of Illinois has responsibility for developing a state plan for independent living services across Illinois. SILC of Illinois supports the closure of the Tinley Park Mental Health Center as long as there is a concrete investment of funding to develop community capacity to support the closure of Tinley Park.

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Illinois can successfully close the Tinley Park Mental Health Center. Twenty years ago, the State of Pennsylvania successfully closed the Byberry state-operated hospital by utilizing a “money follows the person” model insuring a humane comprehensive system of care within local communities for individuals exiting and being diverted from institutions. Similar to the present economic conditions we have in Illinois, Byberry closed with only a fragmented system of community services in place and set a standard for other states to follow. Additionally, due to an emphasis placed on recovery-oriented services by the Illinois Department of Human Services/Division of Mental Health, Illinois is better positioned to offer the critical element of professional peer-delivered services that Philadelphia began providing twenty years ago. The development of community capacity utilizing evidence-based models such as Permanent Supportive Housing, Consumer-Operated Services, Assertive Community Treatment, Supported Employment, Family Psychoeducation, MedTeam (Medication, Treatment, Evaluation and Management), and Illness Management and Recovery will ensure the successful transition of individuals from the Mental Health Centers to the community. Additional money follows the person funding should be allocated to local crisis alternatives such as the Living Room model and short-term inpatient psychiatric care within community hospitals that offer established recovery-oriented services to prevent and minimize the need for future hospitalizations.

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We don't have to wait for a natural disaster or a lawsuit to give persons with mental health conditions an opportunity to live in the least restrictive and most recovery-oriented environment possible. The time for inclusion is now. The SILC of Illinois encourages COGFA to recommend the closure of the Tinley Park Mental Health Center with the needed appropriation of funds to transition individuals to the community and prevent the need for future re-institutionalization.

Why are you being so insensitive to the plight of the mentally ill. This facility has helped to give a home to people who are mentally ill. I know many people who have been treated by this location and since so many suffer in silence because of the stigma associated with getting treatment, I ask you is closing this facility really worth sending these people out to become yet another homeless mentally ill person on the street? If we can fund unworthy projects, I'm sure we can afford to fund this project or please come up with a plan of action that isn't just plain stupid.

Thanks for listening

Del-Rita Crapps

Please do not close the Tinley Park Mental Center. There are so many people with mental problems today with the bad economy, losing their homes and no jobs. They often need help in these situations. Where are these people going to go to help cope with their problems. I, myself, have a problem and I am worried if there is no place for me to go if I need such help.

Thank you,

Dorothy Grisco
433 Lilac Ln.
Matteson, Il. 60443
My son was a patient at the above facility in August of 2006.

Unfortunately, I lost my Todd on September 29, 2009. I am a grieving mother...

I can't stomach the idea of our Governor closing this facility. They truly helped my son...I just wish I would have brought him there again.

Illinois invested millions into a new jail that looks like a hotel...all glass...just beautiful. For prisoners? Those that violated the law? (See photo above).

Yet, go and close a facility to help those that need attention.

I also have issues with the AFSP ... they get millions every year...$$$$ for those that die of suicide...make families feel more guilty that they should help others.

Where are they in this fight? Where does their money go?

I don't want a miscommunication...my son was a patient of the Tinley Park Mental Facility...not this new glass jail!

Cindy Jaworek

My name is Katisha Boyd. I am a graduate of Kenndey King College and a current student of Aurora University. I am twenty seven years old, and I have ADHA and Bipolar disorder. I been knew since about the age of six that I had ADHD, but I did not find out about bipolar until 2007, when I was 22 yrs old. I had gotten really angry with my ninety nine yr old grandmother and threatened. She called her other granddaughter and i was put out. I had no where to stay and i had no one. I told a friend, that I had no reason to live anymore, she took off work and took me to northwestern hospital, and from there I ws sent to John Madden Mental Health. It was there I found out I had Bipolar. Now that I look back over my life, I can see all the symptoms of mania nd depression, but all those years i was under a mental health doctor they never diagnoised me. Chicago Mental Health saved my life and i bet many others as well. Are lives more important than money? Tinley park sees over 2000 patients a year, man are there any other things that could be cut instead of Sick people who really need help?

Katisha Boyd
To Whom It May Concern;

As a former employee of Tinley Park Mental Health Center, I do not see how the misplacement of the patient's will save the State of Illinois money in the long run. We are looking at specific needs of patient's and their families that are comfortable with the care that they receive at Tinley Park Mental Health Center and by moving them could cause a set back for the patient's and families. There are many other alternatives that will save the State of Illinois money in the long run.

I hope that this hearing is a FAIR hearing so that these patient's and families have a good placement for their specific needs. The buildings on the grounds at one time fit all needs, there are cottages for more independent living and ward(s) that in the past served 50 or more patient's at a time, for a more structured environment. These can still be made useful for the many patient's that are in need. Currently the Mental Health budget is pathetic and does not take proper care of the resident's that are in need of proper services.

Tinley Park Mental Health Center needs to be kept open and the grounds cleaned up as they were in the past. This facility has served the area well. Since Manteno State Hospital was closed we need a facility for patient's that need a lot of structure as they have been committed possibly for life. I hope that any emails and letters that are sent on the behalf of keeping Tinley Park Mental Health Center opened are read and any information considered in making a "budget saving facility closure." I hope that the specific needs that these patient's and their families have are looked into at great length as they can be quite complex.

In closing I truly hope that Tinley Park Mental Health Center is kept open.

Respectfully yours,

Beverly Carlson
We, the undersigned, are concerned citizens who strongly protest the closing of the **Tinley Park Mental Health Center**, 7400 183rd Street, Tinley Park, IL.

This necessary facility provides vital care to individuals challenged with serious mental health conditions and who are in need of the services provided by this mental health center.

Keeping this facility in operation is of the utmost importance to our community.

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<th>Print Name</th>
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<th>Signature</th>
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<tbody>
<tr>
<td>2/10/12</td>
<td>Judy Miller-McKee</td>
<td>830 E. 5th St., Chicago, IL</td>
<td>Judy Miller-McKee</td>
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<tr>
<td>2/10/12</td>
<td>John T. Miller-McKee</td>
<td>10306 S. Hayne Ave, Chicago, IL</td>
<td>John T. Miller-McKee</td>
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<tr>
<td>2/11/12</td>
<td>Frank Anderson</td>
<td>7400 W. 167th Pl., Worth, IL</td>
<td>Frank Anderson</td>
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<td>3/11/12</td>
<td>Andrea Borucke</td>
<td>8146 Seminole Ct., Darien, IL</td>
<td>Andrea Borucke</td>
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<td>8/11/12</td>
<td>Ken Borucke</td>
<td>8146 Seminole Ct., Darien, IL</td>
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<td>3/11/12</td>
<td>Joseph Taylor</td>
<td>8154 Seminole Ct., Orland Park, IL</td>
<td>Joseph Taylor</td>
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<td>3/11/12</td>
<td>Paul Beto</td>
<td>16425 N. Greenview Rd., Tinley Park, IL</td>
<td>Paul Beto</td>
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<td>3/11/12</td>
<td>Joyce Taylor</td>
<td>8154 Seminole Ct., Orland Park, IL</td>
<td>Joyce Taylor</td>
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<td>3/11/12</td>
<td>Earl Gerber</td>
<td>12655 S. 70th Ct., Tinley Park, IL</td>
<td>Earl Gerber</td>
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<td>3/11/12</td>
<td>Melody Vassarand</td>
<td>111 S. Morgan, #305, Chicago, IL</td>
<td>Melody Vassarand</td>
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<tr>
<td>3/11/12</td>
<td>Matthew Vassarand</td>
<td>13600 Deer Path Dr., Orland Park, IL</td>
<td>Matthew Vassarand</td>
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<tr>
<td>3/11/12</td>
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<td>3-6-12</td>
<td>Josephine Machalicka</td>
<td>15729 Ranaea</td>
<td>Josephine Machalicka</td>
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<tr>
<td>3-6-12</td>
<td>Geraldine Fornek</td>
<td>17609 Pecan Ln</td>
<td>Geraldine Fornek</td>
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<td>Leonard Fornek</td>
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<td>Leonard Fornek</td>
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<tr>
<td>3-6-12</td>
<td>Pedro and Maria Estrada</td>
<td>17575 Cambridge Dr</td>
<td>Pedro and Maria Estrada</td>
</tr>
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<tbody>
<tr>
<td>3/6/12</td>
<td>L. ROBACK</td>
<td>TINLEY PARK, IL</td>
<td>L. Roback</td>
</tr>
<tr>
<td>3/6/12</td>
<td>L. PANO</td>
<td>TINLEY PARK, IL</td>
<td>L. Pano</td>
</tr>
<tr>
<td>3/6/12</td>
<td>D. WHEATON</td>
<td>TINLEY PARK, IL</td>
<td>D. Wheaton</td>
</tr>
<tr>
<td>3/12</td>
<td>A. SOCHA</td>
<td>Tinley Park, IL</td>
<td>A. Socha</td>
</tr>
<tr>
<td>3/6/12</td>
<td>R. SKINULIS</td>
<td>CIBALAND, IL</td>
<td>R. Skinulis</td>
</tr>
<tr>
<td>3/6/12</td>
<td>F. McCauley</td>
<td>Oak Forest, IL</td>
<td>F. McCauley</td>
</tr>
<tr>
<td>3/6/12</td>
<td>M. GRDOSKI</td>
<td>ORLAND PARK, IL</td>
<td>M. Grdski</td>
</tr>
<tr>
<td>3/6/12</td>
<td>J. DEScalaNE</td>
<td>ORLAND HILL, IL</td>
<td>John DeScala</td>
</tr>
<tr>
<td>3/6/12</td>
<td>SEAN MICRZWA</td>
<td>ORLAND PARK, IL</td>
<td>Sean Miczwa</td>
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<tr>
<td>3-6-12</td>
<td>DOROTHY A. MATUL</td>
<td>15232 LINDEN DR OAK FOREST IL</td>
<td>Dorothy A. Matul</td>
</tr>
<tr>
<td>3-6-12</td>
<td>RALPH MATUL</td>
<td>15232 LINDEN DR</td>
<td>Ralph Matul</td>
</tr>
<tr>
<td>3-6-12</td>
<td>Joseph G. Kunkel</td>
<td>16625 LISMORE CT Tinley Park</td>
<td>Joseph G. Kunkel</td>
</tr>
<tr>
<td>3-6-12</td>
<td>Mary E. Kunkel</td>
<td>16625 LISMORE CT Tinley Park</td>
<td>Mary E. Kunkel</td>
</tr>
<tr>
<td>3-6-12</td>
<td>Gloria Burbank</td>
<td>15713 DANFORD LN ARLINGTON IL</td>
<td>Gloria Burbank</td>
</tr>
<tr>
<td>3-6-12</td>
<td>SHARON OSIATUNNAS</td>
<td>17661 S PLEASANT DR</td>
<td>Sharon Osilitunas</td>
</tr>
<tr>
<td>3-6-12</td>
<td>A.A.A.</td>
<td></td>
<td></td>
</tr>
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</thead>
<tbody>
<tr>
<td>2/6/2012</td>
<td>MARY EILEEN CREAN</td>
<td>6214 W. 124th Pk. Palos Heights</td>
<td>MARY E. CREAN</td>
</tr>
<tr>
<td>3/6/24</td>
<td>MARILYN MILLER</td>
<td>9381 WINDSOR PARKWAY</td>
<td>MARILYN MILLER</td>
</tr>
<tr>
<td>3-6-12</td>
<td>PATRICIA MAZZUCA</td>
<td>16631 LISMORE CT, TINLEY</td>
<td>PATRICIA MAZZUCA</td>
</tr>
<tr>
<td>3-6-12</td>
<td>MARIE FALTON</td>
<td>10534 ILLINOIS CT, ORLAND PARK</td>
<td>MARIE FALTON</td>
</tr>
<tr>
<td>3-6-12</td>
<td>NAN CAMPABELLO</td>
<td>10543 TEXAS CT, ORLAND PARK</td>
<td>NAN CAMPABELLO</td>
</tr>
<tr>
<td>3-6-12</td>
<td>VIVIAN HALLADY</td>
<td>850 S. CHEERY HILLS</td>
<td>VIVIAN HALLADY</td>
</tr>
<tr>
<td>3-6-12</td>
<td>JENNIE LANDON</td>
<td>1534 ROYAL FOXTAIL RD., ORLAND</td>
<td>JENNIE LANDON</td>
</tr>
<tr>
<td>3-6-12</td>
<td>Marjorie Broderick</td>
<td>17812 CAMERON PARK, ORLAND</td>
<td>MARJORIE BRODERICK</td>
</tr>
<tr>
<td>3-6-12</td>
<td>EILEEN BRODERICK</td>
<td>17711 RHODE ISLAND CT, ORLAND</td>
<td>EILEEN BRODERICK</td>
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<tbody>
<tr>
<td>3-6-12</td>
<td>Rose Michalski</td>
<td>11301 Norwich, Orland</td>
<td></td>
</tr>
<tr>
<td>3-4-12</td>
<td>John Rutkowski</td>
<td>91430 Georgetown Sq</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Patricia Paul</td>
<td>16007 Eagle Ridge Dr.</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Freena Musur</td>
<td>8835 W Becker Dr.</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Anne M. Kelly</td>
<td>17857 Columbia St C P</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Mary Ann Scalise</td>
<td>15120 Valentina Dr.</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Frank P Scalise</td>
<td>15120 Valentina Dr C P</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Dennis Rutkowski</td>
<td>9430 Georgetown Sq</td>
<td></td>
</tr>
<tr>
<td>3-6-12</td>
<td>Steve Michalski</td>
<td>11301 Norwich Orland</td>
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<tr>
<td>3-6-2012</td>
<td>Eileen C. McGraith</td>
<td>8649 Firth Rd Tinley Park, IL</td>
<td>Eileen C. McGraith</td>
</tr>
<tr>
<td>3-6-2012</td>
<td>Sylvia M. Keogh</td>
<td>6211 Ard Dr. Tinley Park, IL</td>
<td>Sylvia M. Keogh</td>
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<tr>
<td>3-4-2012</td>
<td>Sharon Swanson</td>
<td>1526 Troy Circle, Oak Forest IL</td>
<td>Sharon Swanson</td>
</tr>
<tr>
<td>3-6-2012</td>
<td>Joan Dougherty</td>
<td>17227 70th Ave, Orland Park, IL</td>
<td>Joan Dougherty</td>
</tr>
<tr>
<td>3-6-2012</td>
<td>Tom Doyle</td>
<td>9714 W. 163rd St. Oak Lawn, IL</td>
<td>Tom Doyle</td>
</tr>
<tr>
<td>3-6-2012</td>
<td>Rose Doyle</td>
<td>9714 W. 163rd St. Oak Lawn, IL</td>
<td>Rose Doyle</td>
</tr>
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</table>
I believe that the legislators need to hear from a much broader range of the population affected; that is listen to the people with mental illness themselves. Educate them to help them and their families to make an informed choice for institutional services or Community services. It is possible to serve people in the community. Most other states are already doing it.
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: [Redacted]
Title: Supporter of Tinley Park Mental Health

Firm/Business or Agency:

Address: 500 E. Oak Park, City: Tin, State: IL, Zip: 60487

Email: [Redacted]

POSITION: [ ] Proponent [ ] Opponent [ ] No Position

TESTIMONY: [X] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: ELEBROTT
Title: LARCHE
Firm / Business or Agency:
Address: __________________________ City: __________ State: ______ Zip: _______
Email: __________________________

POSITION: ☐ Proponent ☐ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☐ Record of Appearance Only

WRITTEN COMMENTS:

send in as group
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Tim Stone
Title: 
Firm / Business or Agency: L'ARCHÉ
Address: 1049 S Austin Blvd City: Chicago State: IL Zip: 60644
Email: 

POSITION: [ ] Proponent [ ] Opponent [ ] No Position

TESTIMONY: [x] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:

Send up as group
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Justin Cowley
Title: 
Firm / Business or Agency: L'Arche Chicago
Address: 1049 S. Austin Blvd. City: Chicago State: IL Zip: 60644
Email: 

POSITION: □ Proponent □ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:

Please send us as group
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Michelle Hubbard
Title: Social Worker
Firm / Business or Agency: Tinley Park Mill
Address: 10961 S. Wabash City: Tinley Park State: IL Zip: 60477

POSITION: ☐ Proponent ☑ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☐ Record of Appearance Only

WRITTEN COMMENTS:

On Agenda
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Richard Boweard, M.D.
Title: Psychiatrist
Firm / Business or Agency: DHS Tinley Park MD
Address: 7400 W. 153rd St City: Tinley Park State: IL Zip: 60477
Email:

POSITION: [ ] Proponent [x] Opponent [ ] No Position

TESTIMONY: [x] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:

on agenda
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Debra Caster
Title: Mental Health Tech 3
Firm / Business or Agency: Tinley Park MSF
Address: 33535 140th St, Tinley Park, IL
Email: 

POSITION: [ ] Proponent  [x] Opponent  [ ] No Position

TESTIMONY: [x] Oral  [ ] Written Statement Filed  [ ] Record of Appearance Only

WRITTEN COMMENTS:
**ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY**
Co-Chair Senator Jeffrey M. Schoenberg  -  Co-Chair Representative Patricia R. Ballock

**RECORD OF COMMISSION WITNESS**

4/10/12

**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

**IDENTIFICATION:**

<table>
<thead>
<tr>
<th>Name:</th>
<th><strong>Carol James</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td><strong>NMH II</strong></td>
</tr>
<tr>
<td>Firm / Business or Agency:</td>
<td><strong>FMHIL</strong></td>
</tr>
<tr>
<td>Address:</td>
<td><strong>15821 Wood St</strong></td>
</tr>
<tr>
<td>City:</td>
<td><strong>Harvey</strong></td>
</tr>
<tr>
<td>State:</td>
<td><strong>IL</strong></td>
</tr>
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<td>Zip:</td>
<td><strong>60426</strong></td>
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**POSITION:**

- [X] Proponent
- [ ] Opponent
- [ ] No Position

**TESTIMONY:**

- [ ] Oral
- [ ] Written Statement Filed
- [ ] Record of Appearance Only

**WRITTEN COMMENTS:**
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Dana Harris
Title: Retired
Firm / Business or Agency: 
Address: 913 School Ave  City: Matteson  State: IL  Zip: 60443
Email: 

POSITION: [X] Proponent  [ ] Opponent  [ ] No Position

TESTIMONY: [ ] Oral  [ ] Written Statement Filed  [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Patricia Ewing
Title: 
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: ☐ Proponent ☒ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:

OPPOSE to Closure
**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

**IDENTIFICATION:**

Name: **Martha Brown**

Title: **HC**

Firm / Business or Agency: 

Address: 

City: 

State: 

Zip: 

Email: 

**POSITION:**

- [ ] Proponent
- [X] Opponent
- [ ] No Position

**TESTIMONY:**

- [ ] Oral
- [ ] Written Statement Filed
- [X] Record of Appearance Only

**WRITTEN COMMENTS:**

*Opposed to Closures*
<table>
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<tr>
<td>Name:</td>
<td>Katrina Cowan</td>
</tr>
<tr>
<td>Title:</td>
<td></td>
</tr>
<tr>
<td>Firm / Business or Agency:</td>
<td></td>
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<td>POSITION:</td>
<td>☑ Opponent</td>
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<tr>
<td>TESTIMONY:</td>
<td>☑ Oral</td>
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<tr>
<td>WRITTEN COMMENTS:</td>
<td>Save Tinley Park MHC-</td>
</tr>
<tr>
<td></td>
<td>where are the people gonna go?</td>
</tr>
</tbody>
</table>
SAVE Tinley Park, where will the residents go for good quality care in the South Suburban Area. Monies should be allocated for those in need and not spent to help wealthy business.
We all need one another. TMPHC serves a critical role in our community after care. We should not be pitted against each other - both are essential.
**ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY**

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

**RECORD OF COMMISSION WITNESS**

4/10/12

**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

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<tr>
<td>Name:</td>
<td>Marva Taylor</td>
</tr>
<tr>
<td>Title:</td>
<td>Social Worker</td>
</tr>
<tr>
<td>Firm / Business or Agency:</td>
<td>Tinley Park Mental Health Center</td>
</tr>
<tr>
<td>Address:</td>
<td>7400 W. 183rd St. City: Tinley Park State: IL Zip: 60477</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:marva.taylor@illinois.gov">marva.taylor@illinois.gov</a></td>
</tr>
</tbody>
</table>

**POSITION:**

- [ ] Proponent
- [ ] Opponent
- [x] No Position

**TESTIMONY:**

- [ ] Oral
- [x] Written Statement Filed
- [ ] Record of Appearance Only

**WRITTEN COMMENTS:**

Gov. Quinn - you keep helping others but not state employees nor our clients. Save all of us!
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Barbara [Signature]
Title: Retire
Firm / Business or Agency: DAT
Address: __________________________ City: __________ State: ________ Zip: ________
Email: ___________________________

POSITION: □ Proponent ☒ Opponent □ No Position
TESTIMONY: □ Oral ☒ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Malvin Linsey
Title: 
Firm / Business or Agency: Community Behavioral Healthcare Assn of IL
Address: 3085 Stevenson City: Springfield State: IL Zip: 62703
Email: mllinsey@cbaha.net

POSITION: [ ] Proponent [ ] Opponent [ ] No Position

TESTIMONY: [ ] Oral [X] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
IIDNOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Dorjuana Brown
Title: A.A. 2
Firm / Business or Agency: DHS / DMH
Address: Madden MHC City: Tinley State: IL Zip: 60477
Email: Dorjuana@hotmaill.com / Dorjuana.brown@illinois.gov

POSITION: □ Proponent ☒ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Carol Genus
Title: 
Firm / Business or Agency: 
Address:                      City:                State: Zip: 
Email: 

POSITION:  ☑ Opponent  ☐ No Position

TESTIMONY:  ☐ Oral  ☐ Written Statement Filed  ☑ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Alyce J. Bond
Title: Retired

Firm / Business or Agency: 

Address: 

City: 

State: 

Zip: 

Email: 

POSITION: [ ] Proponent [X] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: John Wells
Title: 
Firm / Business or Agency: 
Address: 945 E 164th St, City: South Holland State: Zip: 
Email: 

POSITION: □ Proponent □ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Nicole D'Agostino
Title: Social Worker Intern
Firm / Business or Agency: Tinley Park Mental Health Center
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: ☐ Proponent ☒ Opponent ☐ No Position
TESTIMONY: ☐ Oral ☐ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Steve Wilson Sr.
Title: Mental Health Technician
Firm / Business or Agency: 
Address: 123 5th St. City: Chi State: IL Zip: 60643
Email: 

POSITION: ☑ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☑ Record of Appearance Only

WRITTEN COMMENTS:
### RECORD OF COMMISSION WITNESS

**4/10/12**

**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

**IDENTIFICATION:**
- **Name:** Catherine Perkins
- **Title:**
- **Firm / Business or Agency:** AFSCME Retirees Sub Chapter 163
- **Address:** 3250 Rosane Dr
- **City:** Maplewood
- **State:** MO
- **Zip:** 60448
- **Email:**

**POSITION:**
- [ ] Proponent
- [X] Opponent
- [ ] No Position

**TESTIMONY:**
- [ ] Oral
- [ ] Written Statement Filed
- [ ] Record of Appearance Only

**WRITTEN COMMENTS:**
**ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY**

Co-Chair Senator Jeffrey M. Schoenberg – Co-Chair Representative Patricia R. Bellock

**RECORD OF COMMISSION WITNESS**

4/10/12

**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

**IDENTIFICATION:**

Name: Carrie M. Armstrong  
Title: Retired MH T AEScome Inc. Chap. #163

Firm / Business or Agency:

Address: 721 E. 155 Place  
City: Phoenix  
State: IL  
Zip: 85426

**WRITTEN COMMENTS:**

**POSITION:**  
- [ ] Proponent  
- [x] Opponent  
- [ ] No Position  

**TESTIMONY:**  
- [ ] Oral  
- [ ] Written Statement Filed  
- [ ] Record of Appearance Only
ILLONOIS COMMISSION ON GOVERNMENT 
FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Charlie Jordan

Title: 

Firm / Business or Agency: 

Address: 
City: 
State: 
Zip: 

Email: 

POSITION: ☐ Proponent ☑ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☑ Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Proby, Rodemalc H
Title: Rexine

Firm / Business or Agency: ________________

Address: __________________________ City: __________ State: ______ Zip: ________

Email: ______________________________

POSITION: [ ] Proponent [x] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [x] Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Lura Harris

Title: Former MH Analyst

Firm / Business or Agency: 

Address: 

City: 

State: 

Zip: 

Email: 

POSITION: 

☐ Proponent 

☒ Opponent 

☐ No Position

TESTIMONY: 

☐ Oral 

☐ Written Statement Filed 

☒ Record of Appearance Only

WRITTEN COMMENTS:
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<tbody>
<tr>
<td>Name:</td>
<td>Lenora Gordon</td>
</tr>
<tr>
<td>Title:</td>
<td>Mental Health Tech</td>
</tr>
<tr>
<td>Firm / Business or Agency:</td>
<td>Tinley Park Mental Health Center</td>
</tr>
<tr>
<td>Address:</td>
<td>2010 Locust Dr. City: Hazel Crest State: IL Zip: 60429</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:LenoraGordon@comcast.net">LenoraGordon@comcast.net</a></td>
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WRITTEN COMMENTS:
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**IDENTIFICATION:**

<table>
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<tr>
<th>Name</th>
<th>Janine Cudac</th>
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| Position      | Opponent     |

| Testimony     | Record of Appearance Only |

**WRITTEN COMMENTS:**
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: "Alicia Akins"
Title: Support Services
Firm / Business or Agency: Tinley Park Mental Health
Address: 61831 57th Street, Tinley Park, IL 60477

POSITION: ☑ Opponent
TESTIMONY: ☑ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Lawrence

Firm / Business or Agency: 

Address: 

City: 
State: 
Zip: 

Email: 

POSITION: 
- [ ] Proponent
- [X] Opponent
- [ ] No Position

TESTIMONY: 
- [ ] Oral
- [ ] Written Statement Filed
- [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Cindy Lawrence
Title: Rehab Counselor
Firm / Business or Agency: Tinley Park
Address: 
City: 
State: 
Zip: 

POSITION: 

TESTIMONY: 

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Jan Carroll
Title: President
Firm / Business or Agency: AFSCME Retiree Sub Chapter
Address: 443 S. Halsted St. City: Chicago
State: IL Zip: 60606

POSITION: 

TESTIMONY: 

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Willie Blackman
Title: Rehabilitation Counselor
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: [ ] Proponent [ ] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Theolyn Rodgers

Title: Rehabilitation Counselor

Firm / Business or Agency: _____________________________

Address: _____________________________ City: ______ State: ______ Zip: ______

Email: _____________________________

POSITION: ☐ Proponent ☐ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed [✓] Record of Appearance Only

WRITTEN COMMENTS:
**SUBJECT MATTER:** Closure of Tinley Park Mental Health Center

**IDENTIFICATION:**

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<tr>
<th>Name:</th>
<th>KAREN J. HOLLOWAY</th>
</tr>
</thead>
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<td></td>
</tr>
<tr>
<td>Firm / Business or Agency:</td>
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</tr>
<tr>
<td>Address:</td>
<td>44 WOODLAND GLEN</td>
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<tr>
<td>City:</td>
<td>PARK FOREST</td>
</tr>
<tr>
<td>State:</td>
<td>IL</td>
</tr>
<tr>
<td>Zip:</td>
<td>60466</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:kholloway@comcast.net">kholloway@comcast.net</a></td>
</tr>
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</table>

**POSITION:**

- □ Proponent
- □ Opponent
- □ No Position

**TESTIMONY:**

- □ Oral
- □ Written Statement Filed
- □ Record of Appearance Only

**WRITTEN COMMENTS:**
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Sharon Doe
Title: 
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: 
☐ Proponent ☒ Opponent ☐ No Position

TESTIMONY: 
☐ Oral ☐ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Shiree Jackson

Title: 

Firm / Business or Agency: 

Address: 

City: 

State: 

Zip: 

Email: 


POSITION: 

☐ Proponent  ☑ Opponent  ☐ No Position

TESTIMONY: 

☐ Oral  ☐ Written Statement Filed  ☑ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: [Signature]
Title: [Signature]
Firm / Business or Agency: 
Address: ____________________________________________
City: __________________ State: ______ Zip: ______
Email: ____________________________________________

POSITION: [ ] Proponent [X] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Patricia Jackson
Title: SSW T
Firm / Business or Agency: Tinley Park Mental Health Center
Address: 17400 W. 183rd St. City: Tinley Park State: IL Zip:
Email:

POSITION: ☐ Proponent ☐ Opponent ☐ No Position

TESTIMONY: ☒ Oral ☐ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Linda Jones

Title: MHIT

Firm / Business or Agency: Tinley Park MHIT Center

Address: 18377 S. 105th Ave, Tinley Park, IL

City: Tinley Park State: IL Zip: 60477

Email:

POSITION: □ Proponent □ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: KEVIN J. WATSON

Title: 

Firm / Business or Agency: 

Address: __________________________ City: ________ State: ________ Zip: ________

Email: ____________________________

POSITION: □ Proponent ☒ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: LARRY DUNLAP

Title: Mental Health Tech II

Firm / Business or Agency: Tinley Mental Health Ctr.

Address: 950 N Indiana City: Braintree, State: IL Zip: 60917

Email: 

POSITION: ☐ Proponent ☒ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Sheila Penton

Title: 

Firm / Business or Agency: 

Address: 
City: 
State: 
Zip: 

Email: 

POSITION: 

☑ Opponent

☐ No Position

TESTIMONY: 

☐ Oral

☐ Written Statement Filed

☐ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Gregory Rogers
Title: M.A., Tech.
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: [ ] Proponent [x] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [x] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Sherri L. Miller
Title: Rehab Case Coord
Firm / Business or Agency: DAS/ORS
Address: 80
City: _______ State: _______ Zip: _______
Email: _______

POSITION: □ Proponent ☒ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed ☒ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: [Handwritten name]
Title: Support Staff Worker
Firm/Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: □ Proponent □ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Dentrice Anderson
Title: Swift Bros. Elec.
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email:

POSITION: [ ] Proponent [X] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT
FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg  -  Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Robert ALEXANDER
Title: 
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: □ Proponent  ☑ Opponent  □ No Position

TESTIMONY: □ Oral  □ Written Statement Filed  ☑ Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: BERTHA R. BLAIR

Title: 

Firm / Business or Agency: 

Address: 16354 S JUSTIN N City: MARION State: IL Zip: 60448

Email: 

POSITION: ☒ Opponent ☐ Proponent ☐ No Position

TESTIMONY: ☒ Record of Appearance Only ☐ Oral ☐ Written Statement Filed

WRITTEN COMMENTS:
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<td>NAME:</td>
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WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Ballock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Jose Davis

Title: 

Firm / Business or Agency: 

Address: 

City: 

State: 

Zip: 

Email: 

POSITION: □ Proponent □ Opponent □ No Position

TESTIMONY: □ Oral □ Written Statement Filed □ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Adrienne Worley
Title: 
Firm / Business or Agency: 
Address: 
City: State: Zip: 
Email: 

POSITION: ☑ Proponent ☐ Opponent ☐ No Position

TESTIMONY: ☐ Oral ☐ Written Statement Filed ☑ Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: [Signature]
Title: 
Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: [ ] Proponent [ ] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Tammiea Rhodes
Title: Office Assistant
Firm / Business or Agency: TPMHC
Address: 
City: 
State: 
Zip: 
Email: rtammiea@yahoo.com

POSITION: [ ] Proponent [X] Opponent [ ] No Position

TESTIMONY: [ ] Oral [ ] Written Statement Filed [ ] Record of Appearance Only

WRITTEN COMMENTS:
## RECORD OF COMMISSION WITNESS

**4/10/12**

### SUBJECT MATTER:
Closure of Tinley Park Mental Health Center

### IDENTIFICATION:

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<th>Name:</th>
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### POSITION:

- [ ] Proponent
- [X] Opponent
- [ ] No Position

### TESTIMONY:

- [ ] Oral
- [ ] Written Statement Filed
- [X] Record of Appearance Only

### WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Ballock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Eugenia R. Barcay

Title:

Firm / Business or Agency: Retiree DHS

Address: 529 Lakewood City: Park Forest State: IL Zip: 60466

Email: tronzavel@aol.com

POSITION: [X] Opponent

No Position

TESTIMONY: [X] Record of Appearance Only

Written Statement Filed

Oral

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT FORECASTING & ACCOUNTABILITY
Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Allean Jones
Title: 
Firm / Business or Agency: 
Address: City: State: Zip: 
Email: 

POSITION: ☑ Opponent ☐ Proponent ☐ No Position

TESTIMONY: ☑ Record of Appearance Only ☐ Oral ☐ Written Statement Filed

WRITTEN COMMENTS:
SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:
Name: Penita C. Watson
Title: Mental Health Technician

Firm / Business or Agency: 
Address: 
City: 
State: 
Zip: 
Email: 

POSITION: 
[ ] Proponent  [ ] Opponent  [ ] No Position

TESTIMONY: 
[ ] Oral  [ ] Written Statement Filed  [ ] Record of Appearance Only

WRITTEN COMMENTS:
ILLINOIS COMMISSION ON GOVERNMENT
FORECASTING & ACCOUNTABILITY

Co-Chair Senator Jeffrey M. Schoenberg - Co-Chair Representative Patricia R. Bellock

RECORD OF COMMISSION WITNESS

4/10/12

SUBJECT MATTER: Closure of Tinley Park Mental Health Center

IDENTIFICATION:

Name: Lisa M. Lohrak
Title: V.P. Development & Corporate Communication
Firm / Business or Agency: Grand Prairie Services
Address: 17446 Oak Park Ave  City: Tinley Park State: IL  Zip: 60477
Email:

POSITION: □ Proponent □ Opponent  ✗ No Position

TESTIMONY:  □ Oral  □ Written Statement Filed  ✗ Record of Appearance Only

WRITTEN COMMENTS: