



---

Pat Quinn, Governor

Illinois Department of Human Services

---

Michelle R.B. Saddler, Secretary

Office of the Secretary  
401 South Clinton Street • Chicago, Illinois 60607  
100 South Grand Avenue East • Springfield, Illinois 62762

September 9, 2011

**VIA HAND DELIVERY AND ELECTRONIC MAIL**

Senator Jeffrey M. Schoenberg, Co-Chair  
Representative Patti Bellock, Co-Chair  
Commission on Government Forecasting and Accountability  
703 Stratton Office Building  
Springfield, Illinois 62706

**Re: Closure of Tinley Park Mental Health Center**

Dear Senator Schoenberg and Representative Bellock:

On behalf of the Illinois Department of Human Services (DHS), and in connection with the proposed closure of the Tinley Park Mental Health Center, the following are DHS' recommendation and its response to the ten questions which are required to be answered pursuant to Section 5-10 of the State Facilities Closure Act, 30 ILCS 608/5-10.

**Recommendation:**

On May 30, 2011 the General Assembly passed an appropriations bill (HB 3717) for the operations of the nine (9) State-Operated Mental Health Centers (Mental Health Centers (MHC) or Hospitals) operated by DHS' Division of Mental Health. The legislation provided \$194.9 million against the Governor's requested budget of \$253.7 million for the nine (9) Hospitals.

DHS and the Division of Mental Health have spent considerable time and energy in an effort to determine a way that we can continue to provide the level of services which we have historically delivered and which we are statutorily mandated to deliver while doing so within the parameters of the appropriations as received. Regrettably, and after much reflection, we have determined that the closure of Tinley Park Mental Health Center (Tinley Park MHC) is the only course of action which will satisfy our fiduciary, statutory and clinical obligations. This action will result in the change in the mission of the Division of Mental Health from providing a wide range of psychiatric services, including acute inpatient psychiatric care, to providing predominantly forensically-mandated services with limited options for treating civil acute care and extended care patients.

Therefore, in FY12, the Division of Mental Health would close Tinley Park MHC's seventy-five (75) beds.

**Responses:**

**1. The location and identity of the State facility proposed to be closed:**

Tinley Park Mental Health Center  
7400 West 183<sup>rd</sup> Street, Tinley Park, Illinois 60477

**2. The number of employees for which the State facility is the primary stationary work location and the effect of the closure of the facility on those employees:**

There are 196 employees at Tinley Park MHC. Until the closure agreement is negotiated, we will not know the impact on the employees at Tinley Park MHC.

**3. The location or locations to which the functions and employees of the State facility would be moved:**

- The State's capacity to provide acute inpatient psychiatric care will be significantly reduced. The broader mental health system, specifically private community-based hospitals and mental health providers, would be expected to provide much more of this service to the population currently served in the State psychiatric Hospitals.
- Alton Mental Health Center in Alton, Illinois, will be expanding its responsibility for the treatment of extended care patients.
- Chicago Read Mental Health Center in Chicago, Illinois, will be expanding its responsibility for the treatment of extended care patients.
- Elgin Mental Health Center in Elgin, Illinois, will be expanding its responsibility for the treatment of extended care patients.
- McFarland Mental Health Center in Springfield, Illinois, will be expanding its responsibility for the treatment of extended care patients.

**4. The availability and condition of land and facilities at both the existing location and any potential locations:**

Tinley Park Mental Health Center consists of twenty (20) buildings. Maple Hall is the only occupied living unit for individuals with mental illnesses. The other buildings consist of:

- Administration building
- Oak Hall, which houses the dietary and general stores
- Mimosa, which houses the Mental Health Court
- Power Plant (supplies heat, air conditioning to the Hospital)
- Stores

- Maintenance (houses engineering and trades, storerooms, three-bay loading dock, refrigeration and freezer storage)
- Garage (stores grounds equipment)

The remaining thirteen (13) buildings are vacant and/or used for excess storage space.

Upon closure, DHS would vacate these buildings and deem them excess property.

**5. The ability to accommodate the functions and employees at the existing and at any potential locations:**

- The State's capacity to provide civil acute inpatient psychiatric care will be significantly reduced, affecting approximately 1,903 civil admissions annually.
- Chicago Read MHC will be expanding its responsibility for treatment-refractory, extended care patients.
- McFarland MHC will be expanding its responsibility for treatment-refractory, extended care patients.
- Alton MHC in Alton, Illinois, will convert one civil unit (fifteen (15) beds) for treatment-refractory, extended care patients.
- Elgin MHC in Elgin, Illinois, will convert one civil unit (twenty-five (25) beds) for treatment-refractory, extended care patients.

**6. The cost of operations of the State facility and at any potential locations and any other related budgetary impacts:**

Based on actual FY11 spending, the annual cost of operating Tinley Park MHC was \$20.1 million.

Given the cost of closing Tinley Park MHC and the minimal reinvestment in community services, a deficit of \$37.9 million will remain in the FY12 budget. Therefore, DHS will have to address this deficit with corresponding cuts of \$37.9 million throughout the rest of DHS' budget.<sup>1</sup>

Under the proposal to close Tinley Park MHC, DHS will provide minimal funding to serve persons in community-based settings. Federal disproportionate share funding allocated to the State for the provision of services to the uninsured population in State Hospitals will be proportionately reduced. The exact amount of this reduction has yet to be determined.

---

<sup>1</sup> This deficit figure is based on the assumption that Tinley Park, Chester and Singer Mental Health Centers all close in FY12 per the Notices of Intent submitted to CGFA on September 8, 2011.

**7. The economic impact on existing communities in the vicinity of the State facility and any potential facilities:**

A report commissioned from and prepared by the University of Illinois Champaign-Urbana will be forwarded to you under separate cover.

**8. The ability of the existing and any potential community's infrastructure to support the functions and employees:**

- The plans and recommendations as discussed represent significant increases in the level of acute inpatient psychiatric services that will become the responsibility of the community-based medical and mental health providers. The current capacity and ability of the private sector to serve this population is not fully known at this time. The State will need to engage with private hospitals to build capacity to provide this care to approximately 1,903 admissions annually. In addition, community-based mental health and substance abuse providers would also need to build capacity to enhance alternatives to inpatient care. There would be additional costs to the State for assuring the availability of these services.
- State functions will be re-allocated as follows:
  - Chicago Read MHC's responsibility for treatment-refractory, extended care patients will be expanded.
  - McFarland MHC's responsibility for treatment-refractory, extended care patients will be expanded.
  - One civil unit (twenty-five (25) beds) at Elgin MHC will be converted for treatment-refractory, extended care patients.

**9. The impact on State services delivered at the existing location, in direct relation to the State services expected to be delivered at any potential locations:**

- All State services at Tinley Park Mental Health Center will cease operation during FY12.
- Alton MHC, Chicago Read MHC, Elgin MHC and McFarland MHC will assume responsibility for handling extended care or selective treatment-refractory patients currently in the system with selective new admissions.
- Pending statutory changes, Alton MHC would become the Maximum Security Forensic Hospital with the acute, civil unit (fifteen (15) beds) converting to a treatment-refractory extended care unit.

Senator Jeffrey M. Schoenberg  
Representative Patti Bellock  
September 9, 2011  
Page 5 of 5

**10. The environmental impact, including the impact of costs related to potential environmental restoration, waste management, and environmental compliance activities:**

There is an underground fuel storage tank in the garage of the Hospital that is in compliance with underground storage rules and regulations. The underground fuel tank was installed under a CDB project as the CMS garage until the CMS garage was relocated to another location. Asbestos is located throughout the Hospital in the following locations: the tunnel system; mechanical rooms; pipe chases; floor; and mastic. Spruce Hall was listed by the Illinois Attorney General as having a large amount of asbestos-containing floor tile and mastic. Some of the buildings have had asbestos abatements completed under CDB projects but these abatements did not fully eliminate the asbestos from the building(s) because the projects only abated certain areas as defined in the CDB project. The water purification operation at this location has been eliminated and the Hospital now receives domestic water from the City of Tinley Park.

Should you have any questions or require further information, please do not hesitate to contact us.

Very truly yours,



Michelle R.B. Saddler  
Secretary

Very truly yours,



Lorrie Rickman Jones, Ph.D.  
Director, Division of Mental Health