

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF MENTAL HEALTH**



**Testimony of Stephen T. Baron, Director, Department of Mental Health
Committee of the Whole and Committees on Health and Human Services Capital Budget
Hearing
Vincent C. Gray, Chairman, and David A. Catania and Tommy Wells, Chairpersons
February 1, 2008**

Good Morning, Chairman Gray, Chairperson Catania, Chairperson Wells, Members of the Committee, and Council staff.

I am Stephen T. Baron, Director of the Department of Mental Health. I am here to present an overview of our capital program. With me is Richard Warsh, DMH's Director of Facility Planning, who is responsible for most of our capital projects.

Mr. Chairman, seven of our ten current capital projects are related to construction or ongoing capital upgrades taking place on the campus of Saint Elizabeths Hospital. Our largest single project is the construction of the new 450,000 square foot, state-of-the-art, psychiatric hospital. The project is about 43% completed, and we expect patients to move into the new Hospital in late 2009 or early 2010.

We are very proud of the new Hospital. As you know, Saint Elizabeths is more than 150-years old, and the new hospital reflects the advances in modern design that support the recovery model and are environmentally sensitive. Patients will live in single rooms with high ceilings that are

connected to large, enclosed courtyards for recreational and therapeutic activities. The Hospital will be bright and airy with wide corridors and a 28,000 sq ft. green roof—the largest on any psychiatric hospital in the country.

I would like to take a moment to thank Councilmember Catania for his leadership on this project and the Council for its support in approving recent modifications to the construction contract. Planning for the new Hospital began in 2000 and since the construction began in November 2006, we have had unexpected and unplanned costs that required modifications to the original contract, including discovering contaminated soil which had to be removed and integrating more recent updates in technology. In the next few weeks, we will have another modification that will require Council approval to install additional smoke dampers and wall finishes more compatible with the therapeutic model.

The other capital projects on the campus that relate to the new hospital construction include installation of new telecommunications and data equipment, consolidation of utilities on the East Campus, and renovation of buildings that we will retain for patients use. In addition, we fund ongoing upgrades of the existing, aging facilities on the campus and community service locations. I can discuss all of these projects in more detail in response to questions.

The remaining two projects that I will talk about briefly are the upgrade of the Comprehensive Psychiatric Emergency Program (CPEP) facility on the grounds of DC General Hospital and our program to create affordable housing for individuals with a psychiatric illness.

Councilmember Catania, you are well aware of the complicated and difficult history surrounding the planned renovation of CPEP. DMH has operated CPEP at this site for many years, and we all share concerns about the condition of the building and the impact on the quality of services. We now have a Memorandum of Understanding with the DC Housing Authority for design, construction, and construction management services. The renovation includes the establishment of eight, 72 hour extended observation beds for individuals needing crisis care. We believe this will reduce the need for DMH operated or purchased inpatient beds. We expect the renovation of the facility to be completed within nine months.

Let me conclude my testimony with a description of our capital housing program. We are excited about our new partnership with the Department of Housing and Community Development which transfers \$14 million dollars to fund the creation or renovation of 300 housing units for individuals with a mental illness over a two year period. As Councilmember Catania knows, we currently have a \$5.5 million dollar housing subsidy program that supports 375 consumers; yet, we have a waiting list of at least 600. As you might expect, one of the biggest obstacles to expanding our subsidy program is the availability of affordable housing. This new program will help address this unmet need. Already, DHCD has funded two projects with a total of 31 units and is now reviewing a proposal for another \$1.8 million to be used to create 51 units. And, DHCD is reviewing other projects which did not explicitly apply for DMH funding to determine if they are appropriate for this program. We fully expect to meet our target of 300 units within two years.

Mr. Chairman and Councilmember Catania, this concludes my testimony and we are available to answer questions. Thank you.