

# Alberta Hospital Edmonton: It's Time for Redevelopment

A report to concerned Albertans



## Introduction

On August 14, 2009, the Alberta Government announced that it would cancel plans already underway to upgrade and redevelop Alberta Hospital Edmonton (AHE), a facility that has evolved into a centre of excellence in mental health care since it opened in 1923. Alberta Health Services CEO Stephen Duckett said every unit but forensic psychiatry would be closed, and patients released into a network of other facilities and the community at large.

The decision was made with no consultation with psychiatrists, mental health experts or caregivers. Public reaction was overwhelming: more than 2,000 thousand Albertans wrote letters to their MLAs, more than 1,000 attended demonstrations and town hall meetings, and more than 30,000 people from every corner of the province signed petitions calling on the government to maintain and support all the programs at Alberta Hospital Edmonton.

In response to the campaign, which was led and supported by the Alberta Union of Provincial Employees, the government cancelled plans to close approximately 150 beds at Alberta Hospital Edmonton. Our union's goal now is to ensure that Alberta Hospital Edmonton is redeveloped, so Albertans can be assured that this centre of excellence in mental health care remains in place for future generations.

Our research team has studied the issues closely and found that the future of Alberta Hospital Edmonton is still in doubt. Unless the government makes a commitment to redevelop the hospital, it is likely that health care professionals and regular Albertans will have to fight this battle all over again.

Our researchers have collected a large amount of evidence supporting the case to redevelop Alberta Hospital Edmonton. We are asking you to review these findings then contact us at [savealbertahospital@aupe.org](mailto:savealbertahospital@aupe.org) to let us know if you support redevelopment. Communities in the Capital Region, and across the entire province, will bear the brunt of any negative outcomes should Alberta Hospital Edmonton be closed, so we are asking that you make an effort to express your concerns in writing to your local MLA, Health Minister Gene Zwozdesky, and Premier Ed Stelmach, as thousands of other Albertans have. Local AUPE members may also seek a brief meeting with you to ask what action you are willing to take in order to support the redevelopment of Alberta Hospital Edmonton.

*The province will spend up to \$5 million to close beds and move the geriatric program.*

*Planning for the redevelopment of AHE has been ongoing since 1987.*

*Fourteen psychiatrists from Alberta Hospital Edmonton sent a letter to Premier Stelmach saying more beds are needed.*

*Alberta has only one quarter of the national average mental health care beds per capita.*

*The Capital Health Region had approved redevelopment of Alberta Hospital Edmonton five years ago.*

## Why Redeveloping Alberta Hospital Edmonton Makes Sense

### We can afford to redevelop Alberta Hospital Edmonton

The Alberta Government has financed a great many capital projects in the last few years, many more costly than the \$266 million needed for Alberta Hospital Edmonton's redevelopment, which was approved and on the books as late as August 2009. One example is the redevelopment of the old Federal Building for political offices on the Alberta Legislature grounds in Edmonton, a project that was estimated to cost \$356 million when it was announced in 2008.

We can afford to keep the Alberta Hospital Edmonton running in good condition until the economy recovers. In early March, 2010 Alberta Health Services provided Health Minister Gene Zwozdesky with an assessment that showed all buildings on the site providing patient services to be in "fair to good condition" and estimated the cost of all necessary maintenance to be just \$8.6 million.

Currently, Alberta Health Services plans to spend up to \$5 million to convert Villa Caritas, a 150-bed long-term care centre in West Edmonton, into a geriatric psychiatry hospital, even though the geriatric psychiatry building at Alberta Hospital Edmonton needs just \$1.4 million in repairs. This plan will result in the province unnecessarily spending millions and losing badly needed long-term care beds.

The Roadmap for the Future: The Capital Health Plan for Regional Mental Health Program Delivery 2005-2008 said the redevelopment of Alberta Hospital Edmonton needed to be the region's top priority. Redevelopment was stated to be a No. 1 priority again in a 2006 report prepared for Capital Health by O'Neill O'Neill Procinsky Architects and Croft Planning and Design for the Capital Health Region. That report outlined many past initiatives aimed at renewing and improving Alberta Hospital Edmonton, including: the 1987 Alberta Hospital Edmonton Master Plan; joint "site master planning" exercises conducted by the firm Wood O'Neill and the Alberta Mental Health Board from 1999 to 2002; site drawings for construction prepared by Cohos Evamy; and a major environmental assessment prepared by Stantec.

The O'Neill O'Neill Procinsky Architects/Croft Planning and Design report projected a need for 130 new mental health treatment beds due to demographic pressures from an aging and growing population – that demand has still not been met. It doesn't make sense to let all of this past work go to waste.

### Alberta Hospital Edmonton supports every community in our province

Alberta Hospital Edmonton's beds serve the most severely ill mental health patients, as those with less severe symptoms have already been moved into the community. In an open letter to the Premier, 14 leading psychiatrists at AHE affirmed that community care is important, but could not be a substitute for acute-care beds when a patient is in crisis. In fact, they said that additional beds are needed to meet the need.

This need extends well beyond Edmonton. *The McDermott Report*, commissioned by the government in 2005, found that Alberta already has too few beds – about a quarter of the national average. This shortage is particularly severe in Edmonton, because of the extent to which outlying communities rely on our hospitals. In his fall 2008 report Alberta's Auditor General confirmed the inadequate capacity of community mental health resources to support patient demand.

The Roadmap for the Future: The Capital Health Plan for Regional Mental Health Program Delivery 2005-2008 spoke of the need for a new inpatient campus at Alberta Hospital Edmonton, where "resources will be consolidated in one location and therefore will be available on a timelier basis, the resolution of crisis will take place in a safe and therapeutic environment." The campus would help all areas of the province, rural and urban alike, by admitting psychiatric patients with symptoms that are too acute, or are too violent, for local hospitals and long-term care centres.

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*Decreasing beds at Alberta Hospital Edmonton could result in more suicides.*

While these reports clearly show that Alberta's mental health care resources are already stretched too thin, a number of recent reports paint a bleak picture of what could happen if those resources are reduced in any way.

In fall 2009, a University of California, Berkeley School of Public Health study titled *Does Deinstitutionalization Increase Suicide?* found that one public psychiatric hospital bed decrease per 100,000 people "would result in about 45 additional suicides per year." While that study relies on statistics from the United States, it is relevant insofar as it shows a significant negative outcome when public psychiatric hospital beds are closed.

Furthermore, in January 2010, Dr. Donna Wilson, Professor of Nursing at the University of Alberta, released *A Case Study of High Users of Hospitals for Evidence-based Health Policy and Health Services Planning*, which confirmed that approximately 30 per cent of Alberta Hospital Edmonton's patients come from other Alberta regions — 87 different communities in total.

### **Redeveloping Alberta Hospital Edmonton will keep patients and communities safe**

History has shown that people with mental illnesses often suffer from social exclusion, stigmatization, physical abuse, addiction, and a high suicide rate. Deborah Hatch, President of the Alberta Criminal Trial Lawyers Association, has stated that when safe, proper, compassionate acute mental health resources are inadequate, many suffer serious episodes of mental illness that, without medical support, can lead to homelessness and even in imprisonment.

*Closing beds increased demands on police services in Vancouver.*

This has been the experience in other jurisdictions. According to a recent Vancouver Police Department study, *Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver's Mentally Ill and Draining Police Reserves (2008)*, the closure of 200 beds at the Riverview Psychiatric Hospital was followed by a surge in the number of hours police officers spent dealing with calls related to people suffering from mental illness. The report found that 31 per cent of all calls to the Vancouver Police Department were related to mental illness and estimated the annual demand on resources to be the equivalent of 90 full-time police officer positions.

### **Alberta Hospital Edmonton prevents a backlog of patients in hospitals and long term care centres across Alberta**

*Patients with mental illness are the highest users of hospital resources.*

Numerous studies confirm the need for long-term, continuous care for serious psychiatric illness. Dr. Wilson's intensive study found that the largest proportion of 'high users' in our hospitals are those diagnosed with a mental illness. Furthermore, mental patients who were interviewed said they relied heavily on the emergency wards of general hospitals. One patient commented, "Where else do you go when you are really sick?"

Findings such as these raise concerns not only about the future prospects for care of this extremely vulnerable segment of our population. They warn that the hospital beds and medical services in Edmonton, and rural areas across the province, could be severely affected by the closure of beds at Alberta Hospital Edmonton, adding to wait times in our full-service hospitals that have experienced resource shortages since the cutbacks of the Nineties.

*Closing 100 beds at Alberta Hospital Edmonton would create a backlog of 300 to 700 patients in hospitals across the province every year.*

Wilson's study concluded "the closure of these 100 beds could result in 300-700 less admissions each year to this hospital for specialized psychiatric care. As all persons admitted to this psychiatric hospital were transferred from acute care hospitals or continuing care facilities around the province, a backlog of patients needing acute psychiatric care would occur at these facilities."

*Alberta Hospital Edmonton is a world-class acute mental health care facility.*

*B.C. Premier Gordon Campbell has called the closing of psychiatric hospital beds “a failed experiment.”*

*As the Federal Public Safety Minister Conservative MP Peter Van Loan said closing of psychiatric hospitals criminalizes the mentally ill.*

### Alberta Hospital Edmonton is a psychiatric ‘Centre of Excellence’

The AHE is widely recognized as a ‘centre of excellence’ in psychiatric care. Not only has it assembled the largest single group of psychiatrists, therapists, nurses and medical professionals in Western Canada over the years, they have responded to changing needs by developing more than 162 treatment programs, some of them the most effective, innovative programs in the world.

Even the most positive scenario for ‘community care’ could not begin to match the standard set by Alberta Hospital Edmonton. Even if that ‘community care’ were to occur in general hospitals, group homes or long-term care facilities, it could not match the quality of programs at Alberta Hospital Edmonton, and would displace and backlog other patients in the process.

Moreover, other hospitals and facilities benefit from the training their staff receive from Alberta Hospital Edmonton. In addition, the world-class team at the hospital has developed research capability that is recognized internationally. We cannot retain and build on this valuable core resource of specialists and staff if Alberta Hospital Edmonton is closed.

### Closing Alberta Hospital would repeat a ‘failed experiment’

An in-depth assessment of similar ‘community care’ approaches in the U.S. in a 2009 edition of Academic Review concludes that, “The end result of deinstitutionalization has been a ‘revolving door’ phenomenon in which many patients have to be readmitted to mental hospitals; initially, up to 80 per cent of these individuals were readmitted within two years of discharge ... By now, a consensus has emerged ... that deinstitutionalization is not nearly as successful as had been hoped. The conclusion is that, by and large, deinstitutionalization has fomented the wholesale neglect of the chronically disabled psychiatric population... most are simply abandoned to the community.”

This reflects what happened when the Government of Ontario closed beds in two of Toronto’s largest mental hospital as a cost-cutting measure in the mid 70s. The surrounding community of Parkdale developed perhaps the highest density of ex-psychiatric patients of any urban area in the world and, by the late 1980s, had become synonymous with poverty, crime, drugs, homelessness, and large numbers of people exhibiting signs of mental illness.

In 2001, 209 beds were closed at the Riverview Psychiatric Hospital in Port Coquitlam, B.C. As was the case with Alberta Hospital Edmonton, the government promised to replace those beds in the ‘community.’ This has still not occurred, and has caused significant strain on municipal resources. As B.C. Premier Gordon Campbell admitted in a 2006 speech to the Union of British Columbia Municipalities, the closing of those beds was a “failed experiment.”

This experience can be contrasted with other jurisdictions that have chosen the opposite approach. Manitoba, for example, is financing a new mental resource centre with multiple mental health services under one roof, including housing for those needing shelter during treatment. Officials there say it will save lives, take pressure off overburdened hospital emergency units and end the practice where patients suffering psychiatric care get shunted from desk to desk.

### Redeveloping Alberta Hospital Edmonton will save taxpayers’ money

MLAs have privately raised concerns about the cost of redeveloping Alberta Hospital Edmonton. In fact, any money directly saved by closing Alberta Hospital Edmonton, would be more than offset by higher costs in the Department of the Solicitor General, while patients would suffer a profound human cost.

Even the highest levels of Government have now acknowledged the cost of “deinstitutionalization,” that is, the closure of psychiatric hospitals providing acute mental health services. As noted in the *2008-2009 Annual Report of the Office of the Correctional Investigator*, former federal Public Safety Minister Peter Van Loan stated “that over the past three decades, we have progressively moved toward a community and outpatient system of ‘de-institutionalizing’ the mentally ill from provincial facilities, only to dis-

*Up to one quarter of prisoners are mentally ill.*

cover that we are 're-institutionalizing' them as prisoners. Van Loan stated the problem succinctly by suggesting that we are, in effect, 'criminalizing the mentally ill'."

In fact, the Correctional Service of Canada observes that "since 1997 there has been an 85 per cent increase in the number of offenders identified with a mental health disorder at intake" and an improved intake screening test for mental illness "suggests one in four offenders has some degree of mental illness at admission." While statistics for provincial correctional facilities are not available, anecdotal reports from judges, lawyers, and our members who work on the front line suggests the situation is the same as the federal system.

Proper mental health services save money by keeping those living with mental illness healthy, thereby reducing the chance that they will end up in correctional centres, where we not only continue to pay for mental health services, but also for financial and social costs associated with the crime itself, policing, the courts and probation system.

## Conclusion

### The Alberta Union of Provincial Employees supports the redevelopment of Alberta Hospital Edmonton in order to maintain and improve mental health services for all of Alberta.

The pressing need for redevelopment outlined in the *Roadmap for the Future* continues today. As the Roadmap stated, "psychiatric beds are at the centre of psychiatric care, and the Alberta Hospital Edmonton is essential to the Regional Mental Health Program." This assessment, combined with the inadequate level of community mental health services identified in the Auditor General's Report and the alarming burden that would be created for our justice and corrections system, provides a compelling case for the redevelopment of Alberta Hospital Edmonton.

Alberta Hospital Edmonton needs government commitment of capital funding in order to be redeveloped according to the recommendations experts have been making since 1987. To obtain that funding, it needs the support of community leaders like you.

#### What we are asking of you

The first goal of this report is to educate Albertans, particularly those who have leadership roles in the province's many unique and diverse communities in rural and urban areas, about the necessity of redeveloping Alberta Hospital Edmonton. We invite you to contact us if you have any further questions or require further information pertaining to this report.

Our second goal is to ask for your assistance in lobbying the provincial government to redevelop Alberta Hospital Edmonton. We believe that the next step to ensure redevelopment becomes a provincial priority is to enlist your support as an advocate for this provincial centre of excellence in mental health care.

You can show your support by passing a motion backing the redevelopment of Alberta Hospital Edmonton at your town or county council, calling a meeting with your local MLA to discuss the need for Alberta Hospital Edmonton, or by writing a letter to Premier Ed Stelmach, Alberta's Minister of Health Gene Zwozdesky and your local MLA.

If you undertake any of the above efforts to support the redevelopment of Alberta Hospital Edmonton, please contact us so we can share the good news with AUPE's 73,000 members and encourage them to support elected representatives who support Alberta Hospital Edmonton.

In the late 1990s Halvar Jonson, Conservative MLA for Ponoka-Rimbey, successfully lobbied for the \$100 million redevelopment of Alberta Hospital Ponoka (now called the Centennial Centre for Mental Health and Brain Injury). Jonson proved that provincial politicians can be leaders in advocating for the mental health services our province needs. We ask that you contact your local representatives and urge them to follow his example and be leaders on this important issue.

*Contact your MLA, the Health Minister and the Premier.*

## Albertans are concerned

The following excerpts come from constituent letters to their MLAs, which have been copied to the Alberta Hospital Campaign team (names have been withheld for privacy).

*“Dear Ms. Evans... I had a relative in Alberta Hospital for a number of years, and there was no substitute or alternative facility that would have met his needs while in the acute stages of his illness.”*

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*“Dear Mr. Sandhu... As a member of Edmonton’s health care team, I am even more aware of how important it is for these people [at Alberta Hospital] to have safe, controlled living, and easy access to psychiatric care; without it, they will end up on the streets... It is a reality I see every day. Please don’t sacrifice the members of our community for a few dollars.”*

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*“Dear Mr. Bhardwaj... My brother, who has schizophrenia, has been treated at Alberta Hospital many times, and had this facility not been available to him, it’s very concerning to imagine how his life may have been significantly impacted without the help of this wonderful facility and staff.”*

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*“Dear Mr. Mel Knight... I work in a small hospital and when the patient is in crisis it is appreciated that there is a place where they can be treated and feel safe. They are often a danger to themselves and others and our facilities do not cope well, the other patients need to be kept safe and the patient in crisis needs a safe place. Please rethink your decision.”*

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*“Dear Mr. Snelgrove... The streets are a poor substitute for individuals who are experiencing paranoia, mania, deep or chronic depression, or other manifestations of mental illness... Those of us who have witnessed family members or friends in the throes of an episode know that, even with the best of intentions we are often ill-equipped to manage the care of our loved one(s).”*

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*“Dear Mr. Benito... Our son was very suicidal due to his drug problem which masked a mental illness. He was properly diagnosed and is off all illicit drugs and placed on proper medication for his mental illness. We are very grateful for the help we received through the Alberta Hospital. Please keep it open. It can save lives!”*

**Alberta Hospital Edmonton  
It's Time for Redevelopment**

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## **We welcome your comments**

If you have tips, comments, or want to read more about the campaign to Save Alberta Hospital Edmonton, please check [www.savealbertahospital.com](http://www.savealbertahospital.com) for contacts and background information.

