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Bowden: Skeptical of mental health closures

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Probate Judge Ben Bowden said Thursday he is “skeptical” of the state’s plan to close all of but two of its psychiatric hospitals by next spring.

Bowden, whose office is tasked with many duties including involuntary mental commitments, said he has received a letter from Alabama Department of Mental Health Commissioner Zelia Baugh, who told them they would be closing all of the state facilities, with the exception of two – one to treat criminal cases and one for geriatric patients.

Under the plan, there will be one main state mental hospital left by May 2013, which is the under-construction replacement for Tuscaloosa’s Bryce Hospital. This facility will hold only patients found not guilty because of insanity or mental defect or deemed incompetent to stand trial by the courts.

Another Tuscaloosa psychiatric hospital – Mary Strake Harper Geriatric Psychiatry Center – will stay open because it covers nearly all of its costs through Medicare.

Greil Memorial Psychiatric Hospital in Montgomery, North Alabama Regional Hospital in Decatur and Searcy Hospital in Mount Vernon would close by Sept. 30.

The state department has long sought to shift from treating patients in state hospitals to caring for them in group homes, private hospitals and other settings as part of a nationwide movement.

However, the state’s current budget situation sped up the plan, mental health officials said. Governor Robert Bentley’s proposed 2013 budget calls for cutting ADMH’s general fund budget by 10 percent, down to \$104.4 million, but the state Legislature could slash it by 25 percent, dropping its operating money to \$87 million.

“I’ve written a letter expressing my concerns,” Bowden said. “I’m really skeptical, especially leaving us to private hospitals for mental commitments. Private hospitals can decline patients, and if they decline, we have no options.”

Bowden said the probate office has used the state facilities as “fall back options” when he has a case that private facilities won’t accept.

“The private hospitals will not take violently ill patients,” Bowden said. “Those are my concerns because once every five or six mental commitments, they either need long-term care or they are violently ill. We already run our mental commitment with a state hospital as a last result, and that’s usually because I’ve run out of options. We are absolutely prohibited from putting these patients in jail.”

Bowden said he believes the state has a plan, but said he would like to know what it is.

Bowden said under the new structure, probate court civil commitments will be treated in psychiatric units at area hospitals or crisis stabilization units operated by community mental health providers across the state.

“We have about 75 to 100 commitments per year that come through my office,” he said. “I would estimate that about 25 percent of those have to go to Searcy. I don’t know how they are going to deal with this.”

Bowden said his office had 78 mental commitments in 2011 and 92 in 2010.

“Our local hospital are for short-term – 30 days or less,” he said. “Many need four to five months of extensive counseling and pharmaceuticals to help them. I am very concerned about the patients’ well being and the public.

“I understand that there are those in the mental health field who view large-state run institutions as counter-productive and unhealthy for patients,” he said. “In many scenarios, this view is correct. I remain convinced that there are, and will continue to be, situations where long-term, lock-down facilities are needed for the chronically mentally ill – both for the protection of the patient and the general public.

“If we don’t have somewhere to send them, we’re going to have to let them go,” he said. “We’re just going to see what the plan is, but I’m definitely skeptical.”