

Need for psychiatric hospital beds surges in Alabama, nation

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By **Val Walton--The Birmingham News**



Brookwood Medical Center has proposed building a 30-bed rehabilitation hospital and a 16 bed geriatric psychiatric unit on seven acres at Patchwork Farms. (Special)

BIRMINGHAM, Alabama -- At Children's of Alabama, 23 of the 24 beds in the psychiatric inpatient unit were occupied on Friday.

Tom Shufflebarger, Children's chief operation officer, was surprised that even one was available.

"We run at almost 100 percent capacity," he said.

Across the state and nation, hospital administrators say the demand for psychiatric hospital beds is escalating, although they're not sure why. The need spans all ages, from children to the aging.

Shufflebarger said Children's is experiencing more instances when a bed is not available for a child who arrives to the hospital's emergency room and needs to be admitted for psychiatric care. It's not unusual for a child to be kept in the ER until other avenues for treatment become available.

And during the hospital's busier times, Shufflebarger said, a child in a psychiatric crisis could be sent to Gadsden or Decatur.

"That can just be horrible to the child, to the family, having to leave," he said.

Once its Benjamin Russell Hospital for Children opens in August, Children's intends to have expanded psychiatric services at the current hospital building. Plans call for an additional 12 beds in a fourth-floor psychiatric unit scheduled for completion in fall 2013, and for the system to have expanded outpatient care as well.

In hospitals across Alabama, the lack of available beds has caused some psychiatric patients to spend hours in emergency rooms awaiting admission, often creating a bottleneck of care in the emergency rooms.

"The need is extreme," said Dr. Joe Acker, executive director of the Birmingham Regional Emergency Medical Services System, which has provided trauma routing for the seven counties in the Birmingham metro area since 1996.

Earlier this month, state regulators approved 38 additional beds for five psychiatric care hospitals across the state, including Brookwood Medical Center and Gadsden Regional Medical Center.

That number is far fewer than the hospitals originally sought, according to State Health Planning and Development Agency documents.

In November 2011, the State Health Plan was amended to indicate a need for an additional 38 psychiatric beds in the state, based, in part, on the existing psychiatric bed inventory of 1,697 beds.

In response, six health care providers gave notice that they planned to apply for a total of 85 psychiatric beds.

Ultimately, five hospitals agreed to limit their requests to 38.

Gadsden Regional originally sought 15 but was granted approval to convert eight acute care beds to adult psychiatric beds. This increases the hospital's psychiatric beds to 41.

"We think it will definitely help, but we will fill them up pretty quickly," said Steven Pennington, the hospital's chief executive officer.

Pennington said the demand on GRMC for adult inpatient psychiatric services historically has greatly exceeded the hospital's capacity to provide them.

The demand increases every year. In 2009, 544 patients sought adult psychiatric care at GRMC, and the hospital was able to admit 310 patients to its then 10-bed adult psychiatric unit. It had to refer 244 patients to other facilities that could provide the care.

In 2011, the hospital noted in its application, 1,114 adults came to GRMC seeking psychiatric care, but the hospital was able to admit 804 patients to its 16-bed adult unit. The hospital transferred 310 adult patients to other facilities, with more than 70 percent transferred to hospitals in Birmingham, including Brookwood and Trinity Medical Center.

"That's an ambulance ride from their home community," Pennington said. "That's not good for their support system."

Pennington said with no beds available, sometimes patients have to wait in the emergency rooms as long as eight to 12 hours before being transferred.

As the number of patients has grown, the hospital has hired trained "sitters" to stay with the patients for safety precautions.

"A lot of them are typically in paper gowns," he said of the patients. "They require one-on-one care so they don't hurt themselves. It's not a good environment for other patients."

Brookwood sought to add 19 beds to the 138-bed department to help meet high demand for psychiatric services. State regulators approved 14.

The additional beds likely would be dedicated to care for higher-functioning elderly patients, allowing Brookwood to meet the current needs of its geriatric patients as well as accommodating the projected growth in demand that will result from a larger senior population as baby boomers age.

The expansion will bring the number of psychiatric beds at Brookwood, the largest provider of psychiatric services in Jefferson County, to 152 beds.

"We are being proactive in being able to manage the expected growth," said Bill Brodie, vice president of psychiatric services at Brookwood.

In documents, Brookwood said its psychiatric beds have reached an 84 percent occupancy rate, despite the addition of 45 beds in 2008.

"The need is definitely there," Brodie said.

National trend

The need for more psychiatric beds is a national trend, said Mark Covall, president and chief executive officer of the National Association of Psychiatric Health Systems. There are many factors that could be driving it, he said.

"It has resulted in many communities having a crisis in which there is not adequate inpatient capacity for the demand for that service," Covall said.

He said the trend is occurring both in states where state hospitals are closing and in states where they continue to operate.

The growth in demand for service could be a sign that the stigma of having a mental illness has lessened. Medical experts also say the economic climate, with people losing their jobs and homes and experiencing more stress, can boost the need for mental health care.

Covall said the recession and tight budgets also could be making less money available to provide community services that could help keep people from having a mental health crisis.

Debate abounds whether more money should be invested in such services or in psychiatric beds.

Dr. Jacqueline Feldman, a professor of psychiatry at the University of Alabama at Birmingham and director for the Division of Public Psychiatry, supports funding community services, such as outpatient care, substance abuse treatment and medication that could help a person avoid hospitalization. She said the emergency room and hospital stays are not always best for many patients.

"We need to think more broadly and grandly," she said. "We need hospitals for those who truly need hospitals."

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