



## Psychiatric hospital beds dwindle nationally

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By **Mike Oliver, The Birmingham News**

State psychiatric hospital beds continue to dwindle nationwide, putting an incalculable strain on jails, prisons, hospital emergency rooms and law enforcement, according to a new study by a nonprofit treatment advocacy group for the severely mentally ill.

"What we are seeing is people who are presenting more acutely ill," said Doris A. Fuller, executive director of the Treatment Advocacy Center, which conducted the study of public psychiatric beds from 2005 to 2010. "We used to be able to take care of them faster."

During the five-year period, the number of public psychiatric beds nationally declined 14 percent, continuing a long trend that brings the per capita number of such beds to the lowest level since 1850, according to the study.

Continuing trends toward community-based treatment and severe budget problems helped push 38 states to chop their state bed counts during the five-year period. Alabama was one of 10 states that actually saw a rise in public psychiatric beds, from 1,001 in 2005 to 1,119 in 2010, but that number is still well below the recommendations of the advocacy group, and the state is on the verge of shutting down two psychiatric hospitals.

"Although the study indicates that Alabama has indeed added some beds, they still had less than half the beds recommended -- 23.4 versus the 50 per 100,000 recommended," said Kristina Ragosta, a senior legislative and policy counsel at the Treatment Advocacy Center who specializes in Alabama, among other states.

Alabama has six state psychiatric facilities -- Bryce Hospital, with about 270 beds, is the largest. In April, the state announced the upcoming closure of Greil Memorial Psychiatric Hospital in Montgomery and Searcy Hospital in Mount Vernon.

Greil announced this week it will close Aug. 31 and try to find appropriate treatment for its 62 patients in community-based programs, which the state says is mandated by the *Olmstead vs. L.C.* decision by the U.S. Supreme Court. The closing date for Searcy Hospital has not been set, said Jeff Shackelford, spokesman for the Alabama Department of Mental Health.

"The plan is to put them into community-based care, but that's sometimes easier to say than do," Shackelford said. "We recognize some will need to stay in a hospital -- we are going to make sure they get the correct treatment."

Private hospitals are also looking to add psychiatric beds. Last month, state regulators approved 38 new beds for five psychiatric care hospitals across the state, although that figure was fewer than the number hospitals had requested.

But the Treatment Advocacy Center study is specifically focused on public beds where the most severe cases of mental illness are treated. Those severely mentally ill patients often suffer from anosognosia, a condition in which people are unaware that they are mentally ill.

"Community services are great once they have a foot on the ladder to recovery," Fuller said. "But it is not so great for those who don't really understand that the FBI is not speaking through their teeth. They need help to get on the ladder."

In Alabama, for a person to be involuntarily committed for inpatient treatment, a court must determine that person is a real and present danger to himself or others; or will continue to suffer mental distress and deterioration of the ability to function independently; or is unable to make a rational and informed decision concerning treatment.

"We are talking about the population of people with severe mental illness," Fuller said. "About 3.3 percent of the population has a disorder severe enough that without treatment are at risk to deteriorate to the point they need to be treated involuntarily."

The study found that states with the lowest spending on state psychiatric hospitals had a proportionately higher number of arrest-related deaths, she said. States that closed more public psychiatric beds during the time period studied also experienced higher rates of violent crime, she said.

"When you look at the total picture where state hospitals fit into the entire operation, we think cost savings through cuts are illusory because you have to really look at what you save by reducing hospital beds," she said. "Certainly the economic crisis has made it worse, but in some cases it's given states cover to cut in an area where they wanted to cut."

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