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## **Mental health breakdown**

### **Options disappearing for people in crisis as Sonoma County cuts inpatient services**

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One Saturday last September, Nan Banker, a retired English teacher with bipolar disorder, was crippled by a terrifying mental confusion. Her husband was out of town, her thoughts raced uncontrollably, and she had not slept for days. Banker's therapist called 911, and within minutes she was in the back of a Sonoma County Sheriff's patrol car, bound for the county's 24-hour psychiatric emergency unit at the Norton Center on Chanate Road.

It would take nine hours for her condition to be treated at the nearest available secure psychiatric ward -- the John Muir Behavioral Health Center in Concord. She couldn't get a bed at Santa Rosa Memorial Hospital's psychiatric facility in West Santa Rosa and the county's own acute inpatient beds had been mothballed three months earlier.

"Waiting to be put into a facility absolutely worsened my condition," said Banker. "I just remember saying, 'Concord?' It was a long ride. I didn't know the facility I was going to."

Banker's nightmare was a vision of the future for emergency psychiatric care in Sonoma County, where nearly every local resident suffering a severe mental crisis will be forced out of the county for inpatient treatment.

It also represents a broader trend in health care, as county officials and hospital executives drop inpatient care because of financial imperatives that make these services too expensive.

The mental health landscape was far different two years ago when the Norton Center was still open and Memorial operated its acute psychiatric wing at 1287 Fulton Road. That's where Banker was admitted within half an hour during an earlier, but less severe episode.

Today, only temporary emergency services remain at the Norton Center. And the Fulton facility is to shut its doors by mid-April.

The facility, which also includes acute inpatient rehabilitation care, has lost

millions over the years, and its closure is necessary for the hospital to remain financially strong, Memorial officials have said.

The county insists that new outpatient mental health programs and residential treatment have reduced the need for costly inpatient beds.

But some mental health professionals say eliminating secure psychiatric wards could have a disastrous impact on the local community.

High cost, low return

From his Montgomery Drive office, Dr. David Charp has watched the ongoing expansion across the street at Santa Rosa Memorial Hospital, even as it talks of shutting down the Fulton Campus.

Charp is one of about a half-dozen internal medicine physicians contracted to treat physical illnesses among patients at the psychiatric ward.

"For a county this size, with this amount of wealth, we ought to be able to keep a psychiatric unit with such a good nursing staff open," said Charp.

He points to a large file folder in his office where he keeps medical records for about a thousand patients who were admitted to the Fulton psychiatric ward last year. He said many of these people are "voluntary admissions" that may not be willing to leave the county for acute inpatient treatment.

They may simply "go right back to where they were in the beginning," he said.

Memorial pays him and the other doctors he works with a stipend of \$250 a day to see psychiatric patients. He said every patient at the ward receives a physical exam and some are treated for such conditions as diabetes, emphysema or self-inflicted wounds that have occurred during their psychiatric episodes.

"All services should be available to this community, not just the services that make money," Charp said.

Dr. Gary Greensweig, the hospital's medical director, agrees. But he said the task of maintaining inpatient psychiatric beds in the county is a "problem that cannot be solved by Santa Rosa Memorial alone."

Greensweig pointed out that the same economic pressures that are squeezing primary care physicians -- a high cost of living and poor reimbursements from Medicare and Medi-Cal -- have made it difficult to find psychiatrists to work at Fulton.

"Frankly, the psychiatrists cannot earn a living taking care of patients at the unit

because of the poor funding," he said.

Impossible situation

Greensweig said that on average, Memorial recovers about 30 cents on the dollar from its psychiatric patients.

"Where we are with behavioral health is in essence an impossible situation that has greater implications beyond whether we are making or losing money," he said. He noted that the county closed its own psychiatric ward last year and Kaiser has no facility of its own in the area.

"This is a community problem, not just a Memorial problem," he said.

Hospital representatives said Memorial will continue to provide outpatient services to mental health clients who are discharged from inpatient facilities.

Memorial Hospital's announcement last month that it planned to close the Fulton Road facility has sparked ongoing talks over how to preserve those psychiatric services. Discussions include a proposal for creating a freestanding psychiatric ward run by Horizon Health, Memorial's mental health service contractor at the site. Horizon is currently negotiating with two doctors who own the property, Jim Berger and Dan Marrin.

Society pays the price

Art Ewart, the county mental health services director, said he's been working with hospital representatives from both Kaiser and Memorial to create a partnership on a facility where each would buy into a number of beds needed to serve their patients. The facility would have a total of at least 16 beds, a requirement for getting Medi-Cal funding, he said.

But local mental health advocates said Ewart has been talking about creating such a facility for more than a year.

Marlene Mahan, a local member of the National Alliance on Mental Illness whose son suffered from schizophrenia and took his own life two years ago, said that without a locked facility, the most unstable patients will have nowhere to go. Law enforcement officials, she said, will face a backed-up psychiatric emergency unit at the old Norton Center.

She and other advocates said psychiatric patients in crisis will end up getting sicker because it will take longer for them to get the help they need in a secure hospital.

Dr. Stephen Frye, Sonoma County's mental health director from 1977 to 1981,

said the closure would undoubtedly result in a greater number of mentally ill acting out and ending up in jail.

Frye, a Reno resident whose last position was professor in the department of psychiatry at the University of Nevada, said that from 1990 to 2000 America "built 400 prisons while we closed psychiatric hospitals."

He said that about 15 percent, or 330,000 of the 2.2 million people incarcerated in the United States are mentally ill. Psychiatric patients who enter jail will most likely leave in a worse condition than when they started, he said.

When a psychiatric ward is closed because of budget constraints, he said, "society pays the price, which is much worse than the dollar figure."

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