

Vt. struggles to rebuild mental health system

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In this Feb. 17, 2005, file photo, the Brattleboro Retreat is seen in Brattleboro, Vt. A Vermont sheriff is expressing frustration and worry over what his deputies are seeing of the mental health system now that the Vermont State Hospital has been closed due to flooding from Irene. Windham County Sheriff Keith Clark wrote to Mental Health Commissioner Patrick Flood to say the system has become a severe burden on his staff and that patients in need aren't getting the care they deserve. Clark writes of one incident at Christmas when a patient was transported from St. Johnsbury to Brattleboro, where there was no bed available in a psychiatric facility. (AP Photo/Jim Cole, File)

(AP) -- The remnants of Hurricane Irene did what policymakers hadn't been able to accomplish for more than a decade - close the state's antiquated psychiatric hospital.

The storm flooded much of the state Aug. 28, including the complex containing the Vermont State Hospital in the north-central town of Waterbury, but it's still raining down on the [mental health](#) system.

It has been felt in the emergency rooms and medical wards of [community hospitals](#), where the state's most acutely mentally ill residents, who formerly would have gone to the Waterbury, have put new stresses on staff.

"I have witnessed a hospital floor I used to be proud to work on ... become an acute, chaotic, [stressful environment](#) that is not conducive to productive treatment for any patient," Christina Sclafani, a [registered nurse](#) at Burlington's Fletcher Allen Health Care hospital, said in recent testimony to the Legislature.

It's been felt by county sheriffs and their deputies, who find themselves transporting the mentally ill to far corners of the state in search of care, only to end up standing guard round the clock for days in hospital rooms, waiting for a psychiatric bed to open up.

"I've got a great staff, but they're not therapists, they're not mental health counselors, and I don't want them to be," said Windham County Sheriff Keith Clark. When the mental health system has a patient for which it can't find a placement, "someone hits the default button and the sheriff gets called."

Emergency room doctors from other hospitals have told lawmakers of patients assaulting staff members or making threats but being left unguarded when the officer standing watch is called away for an emergency.

Vermont's mental health system had been in cool crisis for more than a decade. The Vermont State Hospital had so many problems it was

decertified and had lost federal funding in 2003. Two patient suicides that year were blamed on outdated features and staff failings. One woman hanged herself with an overlooked shoelace, and a man hanged himself with a belt secured in a gap between a bookcase and a wall.

A succession of governors looked for ways to close the hospital, without success.

Gov. Peter Shumlin says he wants to turn the now-hot crisis into an opportunity. He has launched a plan to replace the 54-bed Waterbury hospital with a new, smaller locked facility, and expanded psychiatric wards at two hospitals that have such units. He also wants to move patients deemed eligible to less secure settings like group homes.

"I think we've put together an integrated plan that's going to ensure patients come first, that's going to ensure that we can provide better mental health services, cutting-edge mental health services, that are community based, only using acute beds when we need to," Shumlin said.

Former staff at the Waterbury hospital, many of whom have followed patients to other facilities around the state and have been working away from home for days at a time, argued that they had the special training and experience - and professional synergy between them - to care for the most acutely ill patients.

The state employees union has argued that the shift to a smaller state institution and greater use of psychiatric units in nonprofit hospitals amounts to privatization of what had been considered a crucial government service.

Despite the problems, some people are happy to see the Waterbury hospital closed.

Xenia Williams, a former Waterbury patient who went on to help to care for patients for Washington County Mental Health services, said she recently attended a meeting with five displaced patients.

"All five of them were extremely outspoken about how glad they were to be out of VSH and what a horrible place it was," she said. "The few I've talked to who are sorry it's no longer available are people who appear to have real problems with self-esteem. They've bought the idea that they're some sort of inferior person who doesn't deserve to be treated well."

Vermont's mental health commissioner, Patrick Flood, said he sees a big opportunity for the state.

With Waterbury's patients moved elsewhere, the state suddenly is able to collect the federal Medicaid matching funds that weren't available when they were housed at the decertified hospital.

Under Shumlin's plan, Flood said, the state will be able to reduce the \$22.5 million a year it was spending on the Waterbury [hospital](#) to \$16.7 million, but now draw federal matching money, bringing the total available to about \$41 million.

"Now we are going to be able to meet an awful lot of unmet needs in the state," Flood said, "the problems we've had in corrections," with mentally ill residents showing up in Vermont's prisons, "the problems we see on the streets of Burlington with homelessness."

"The idea that we can invest an additional \$20 million in services for people with mental illness is amazing. It's what people have been talking about for a very long time," Flood said.

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