

CRISIS

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According to a 2006 annual report by the Florida Substance Abuse and Mental Health Corporation, Florida ranked 48th in the country in terms of providing state funding for mental health services. State funding in Southwest Florida hasn't increased since 2002 though the population has increased.

So, if you need mental health care in Lee County, you might consider calling the state-funded Ruth Cooper Center where you will hear a dazzling array of options. But before you press 2 for the directory, or 6 for an appointment or 7 for the pharmacy or 8...maybe you should just dial 911 if you need immediate help.

Calling 911, of course, will take you out of the system and into the arena of law enforcement, which is a little better funded.

Janes, a tireless advocate for better mental healthcare, called the lack of mental health facilities "...our number one problem."



JANES

He said that, years ago, Florida decided institutional care for the mentally ill and substance abusers wasn't working.

"They proceeded to close down the institutions," said Janes.

And an adequate substitute hasn't been created.

"We have fast-acting FACT teams (Florida Assertive Community Treatment teams are a community-based method of delivering services to individuals with mental illnesses)" Janes said. "Where they handle an individual who has a sudden episode and needs immediate help."

But we don't have enough FACT teams either, Janes said.

The national average for adequate mental health care, where the needs of a community are met, is 30 beds per 100,000 of population. The Lee Mental Health System, which runs the Ruth Cooper Center and Vista, falls far short of this. There are 30 Adult Crisis Unit beds, 16 Residential Unit beds and 16 in the Drug and Alcohol Unit. Southwest Florida Addiction Services has 25 beds for detoxification. All of which puts Lee County at just under 15 beds per 100,000 for mental health and substance abuse — or less than half the national average.

If you need to go to an actual psychiatric hospital or require step-down services, these are totally lacking in Lee County. And many local psychiatrists accept no form of insurance.

Michael McNally, Vice President of Community Relations for Lee Mental Health Center, said you can't blame it all on money.

"Yes, we need more funding but money isn't always the answer," McNally said. "We have to find better ways to use some of the resources we have. Better collaborations between the public and private sectors. I think everyone's trying to work very hard at achieving that sort of interaction."

David Winters, CEO of Lee Mental Health Center, said philanthropy often eludes mental health issues or the elderly.

"Often the philanthropic giving is for children's services, not for our needs as a community as a whole," he said.

What about seniors?

"There's a gap in services to seniors... there are very few psychiatrists in the community that are willing to accept Medi-

care," he said.

Or any type of insurance, he added.

"We are a grossly underserved community at this point," Winters said. "A major portion of that is state funding for services...there's a direct correlation to that state underfunding and us not being able to serve our community."



WINTERS

There are five psychiatrists at Lee Mental Health Services, according to Winters. And those services are parceled out according to districts and not counties, so what services we do have in Lee County also are expected to cover Hendry, Glades and Charlotte counties. And, that's without private hospitals for back-up. The only psychiatric hospital in the area closed in 2000.

Other elements of mental health care in Lee County comes in the form of the National Alliance on Mental Illness, Southwest Florida Addiction Services and the Veteran's Administration.

Elizabeth Givens, executive director of NAMI in Lee County said they contribute to mental health care by providing support and education to individuals living with mental illnesses and their family members.

Lewis said that the lack of mental health and substance-abuse services is costing taxpayers more money and yielding poorer results.

Janes says that each of the jailed individuals cost close to \$100 a day. He said about 400 of the 2000 people serving time in Lee County jails daily, could be better served with treatment.

"If you get those people into treatment facilities," Janes said, "we could do it at a cost of about \$30 a day."

So, by Janes math, given the 400 people jailed instead of receiving treatment each day, Lee County could be saving \$20,000 — or more than \$7 million a year. Also, if prevention efforts were increased the saving could be even greater.

"Every dollar you spend in prevention," Janes said, "will keep you from spending \$7 at the other end."

Solutions

As a partial solution, Lee Memorial Health System has championed Reliant LLC. The company, although new to mental health care, has helped create senior mental health services in Waycross, Ga.

According to Glyn Thomas, executive director of Satilla Community Services in Waycross, Reliant is working out.

"However, I'm not strictly a reference for them," Thomas said. "But I've heard of no problems."

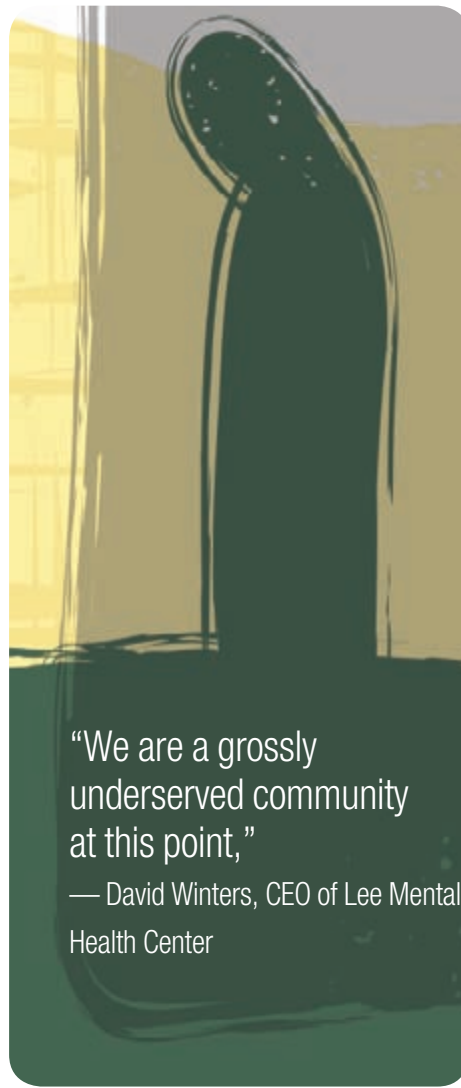
Jim Harper of Reliant said there were two phases to his company's plans for mental health care in Lee County and he envisions the need for a third phase.

The first phase would involve the construction of a Senior Behavioral Center at Lee Memorial Hospital.

"We're days away from submitting an exemption letter to change use of their beds from acute care to psychiatric," said Harper.

After that there will be 60 to 90 days to approve an architectural review plan and another 60 to 90 days to do the renovation.

Phase two will involve the construction of a 56 bed psychiatric facility that should be completed in 2010. The plan is to build it close so that it can borrow services such as equipment and a pharmacy from a Lee Memorial Health System facility.



"We are a grossly underserved community at this point,"

— David Winters, CEO of Lee Mental Health Center

Harper envisions a phase 3 because he doesn't believe 56 beds will be adequate.

"If you look back in history, the Charter facility, having been there with 140 beds, operated very successfully," Harper said.

Dr. Charmaine Thomas, medical director of the Senior Behavioral Center in Waycross, Ga, said that Reliant has done an excellent job in that community.

"We started accepting patients in January," Thomas said.

Other stop-gap measures have been proposed to aid the mental health crisis.

Janes has proposed a triage center and beefing up pre-arrest and post-arrest programs. He especially thinks pre-arrest programs are critical.

"Get them out of the jail initially," Janes said. "That's good for the individual. Why? Because if he goes into the jail system he's been arrested (and) on every job application the question is asked; 'have you ever been arrested.' You have to answer 'yes.' We need mental health community facilities and that we don't have."

Janes applauded Lee Memorial Health System for choosing to increase its staff of psychiatrists (there is one currently) and for bringing in more beds through Reliant.

"We need to have triage centers where the police could drop off somebody," Janes said, "rather than taking them to jail."

The proposed triage centers would decide whether they needed to go to jail, an emergency room or go to a treatment facility.

"We are in process of developing a triage center," Janes said.

Janes thinks we could improve the situation to where we have a 300 percent increase in success in reducing recidivism in individuals who avoid jail and get early preventative treatment.

Lewis said there will also be more publicly funded beds for substance abuse soon.

"We'll be building a 40 bed facility to replace the 25 bed facility," Lewis said. "And there will be 14 more beds in Charlotte to get us closer to the desired ratio of 1 bed per 10,000 (for substance abuse)."

To late for Michelle

It's hard to fully imagine the effects of a lacking system of health care.

Michelle Crawford, 29, a resident of Bonita Springs and a Starbucks employee, killed herself on June 16, 2006. She had previously been Baker acted and was



CRAWFORD

receiving treatment at the Ruth Cooper Center. Florida's Baker Act allows judges, law enforcement officials, or mental health professionals to involuntarily commit someone to a mental examination. The person can be held for up to 72 hours.

Crawford's suicide came shortly after her supply of Xanax (a treatment for severe anxiety disorder) was cut off by an employee at the Ruth Cooper Center. According to diary entries, Crawford had become addicted to Xanax and then was suddenly cut off without warning. This was done by someone new to her case as she was treated by different staff members on different visits.

Her mother, Sue Anderson, said she has medical files that show that Michelle Crawford was prescribed several medications to take that are labeled not to be mixed.

"They not only took her off Xanax," Anderson wrote in an email on Oct. 12. "They said they would see her back in three months. Incredible to me ... unbelievable. You might also mention that when she was given a supply of samples, that were supposed to last until her next appointment, they rarely ever did. The nurses had her charts, knew how long the supplies were supposed to last, knew that she did not really have her own transportation. She made it a point of telling them that. I remember her saying once that she knew that on the one hand she should be thankful that she didn't have to pay for them, but it was really stressful hoping each time she'd get enough, and stressful each time that she did not...when she was five minutes late due to circumstances beyond her control, the doctor refused to see her."

To add to the torment of her family, they received a refund of \$9 in the mail soon after Crawford's death.

"I went out to her gravesite this past Wednesday," Anderson wrote. "The Magnolia trees are getting close to blooming ... you can see the big, huge buds. I remembered that she had that picture of the field of sunflowers up in her room, so I took some sunflowers that were just beginning to open up. Should have lasted a few days there ... I also took water with me for them. I hope they bloomed out beautifully ..."

Anderson did not want the method of suicide mentioned.


"I know Michelle ... I know she would have been crying," Anderson wrote, "even as she was (preparing for) her death."

If Michelle Crawford's treatment had been successful she could have become an ordinary, productive citizen.

Like McNally said, "Because treatment works..."

Janes agrees.

"I'm not talking about the violent... criminally insane," Janes said. "I'm talking about the weekend drinker or the homeless person in the street. We get them the appropriate care we might make them useful members of society...we want to eliminate the stigma to that. It's no different than if they have a serious disease. And they need treatment." ■



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