

Mental health programs are suffering, study finds

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ALBANY — New York state's mental health service programs suffer from inadequate planning and a lack of coordination among service providers despite spending more money than any state in the nation, according to watchdog group's report.

The findings by the Commission on Quality of Care for the Mentally Disabled pointed to a "great disparity between spending and services." The independent agency's report on admission and discharge practices of inpatient psychiatric facilities attributed flaws to "inadequate planning and poor coordination" among state, local, voluntary and private service providers.

The problems, according to the report, resulted in the duplication of some services and "severe gaps" in others. The group particularly blasted community-

based services, primarily for the handing of patients with multiple disabilities such as mental retardation coupled with alcohol or substance abuse.

Other deficiencies cited were repeated hospital stays by a small number of patients because of the lack of community residential and day program alternatives, as well as extensive and unnecessary use of outpatient services.

Assemblywoman Elizabeth Connelly, D-West Brighton, chairwoman of the Mental Health Committee, said the report is "right on target" and said the Cuomo administration is attempting to eliminate some of the problems this fiscal year.

Mrs. Connelly also said it was good news that state Health Commissioner David Axelrod is adding more nursing home beds that will alleviate some burdens for hospitals.

She praised the Cuomo administration's \$7 million intensive case management program whose workers will serve the mentally ill homeless and multiply disabled clients in the community. This should help solve the "revolving door" effect of having these patients going in and out of hospitals and psychiatric centers, Mrs. Connelly added.

The commission study found inpatient psychiatric facilities to be under enormous stress "at the expense of patient care and treatment." Patients are often held in psychiatric rooms from 48 to 72 hours awaiting placement, violating the Health Department's 24-hour limit.

The report also criticized "tripwire" agreements by sending patients directly from emergency rooms to state psychiatric centers that are neither staffed nor equipped to provide acute psychiatric care.

A lack of followup services, coupled with scarcity of housing and residential and day program services, resulted in one of every five discharged patients re-entering inpatient psychiatric facilities, further burdening the system, the report said.

Existing community-based services were deemed inadequate by the commission. Patients described day programs as "boring or irrelevant."

Mrs. Connelly agreed. Two of her bills recently passed by the Legislature require mental health agencies to provide more adequate staffing and programs for patients to reduce patient idleness.

She noted that \$9.2 million was included in the 1988-89 budget to increase staff at psychiatric centers, as well as more extensive therapeutic and recreational programs for patients.