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Ralph Nader, Founder

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Press Conference  
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Proposal to Close  
South Florida State Hospital in Miami

In 1990, in the rating of state programs for individuals with serious mental illnesses which was issued by the Public Citizen Health Research Group and the National Alliance for the Mentally Ill,<sup>1</sup> Florida ranked in a tie for 38th place, equal to states such as Louisiana and West Virginia and behind states such as Alabama, Georgia and Arkansas. In that survey Florida was said to have more inequitable regional funding than any other state (rural northern Florida being comparatively well off and south Florida being markedly underfunded), and Miami was said to vie with Houston, Dallas and Los Angeles as having the worst public mental health services of any city in the United States. Most significantly, the 1990 survey identified Florida as one of only four states which were said to be moving backwards.

I am here today to report that our 1990 survey was, sadly, all too prophetic. In its services for individuals with serious mental illnesses, it is likely that Florida has moved backwards. If we were to do another survey in 1993, Florida would have to be seriously considered as a contender for the worst state award - 50th place - although it would have stiff competition from states such as Nevada, Montana and Mississippi.

The following are some of Florida's dubious "accomplishments" in caring for its citizens with serious mental illnesses since the 1990 survey:

1. A November 1990 report by the Research and Planning Consultants of Austin, Texas confirmed the grossly inequitable funding shortfall for south Florida.
2. The psychiatric unit at Broward General Medical Center lost its Joint Commission on Accreditation for Health-care Organizations (JCHAO) accreditation because of its routine use of shackles and leather restraints on psychiatric patients.

3. None of the 4 state psychiatric hospitals has achieved JCAHO accreditation. No other state as large as Florida has none of its state psychiatric hospitals accredited.
4. Inspection of the Florida State Hospital at Chattahoochee and Northeast Florida State Hospital at Macclenny by the Florida Advocacy Center for Persons with Disabilities revealed continuing severe problems with patient care.
5. G. Pierce Wood State Hospital at Arcadia remains under a federal consent decree and court monitor for its patient care problems.
6. The placing of patients from state hospitals into poorly run Adult Congregate Living Facilities (ACLFs) has resulted in deaths and investigations.
7. Funding allocated by the state legislature has continued to be inadequate. In 1987 expenditures on public psychiatric programs, Florida ranked 30th among the states despite being 17th in per capita income.<sup>1</sup> In 1990 expenditures Florida ranked 28th.<sup>2</sup> Budget cuts the last 2 years suggest that Florida would probably rank lower than 30th if such figures were available.
8. The waiting list to get in South Florida State Hospital has continued growing with a wait of up to 18 months. No other state psychiatric hospital in the United States has a waiting list that long.
9. The number of homeless mentally ill individuals has continued growing, especially in Miami.
10. The number of seriously mentally ill individuals in the jails of Dade, Broward and Palm Beach counties has continued growing.<sup>3</sup> The situation in the Dade County Jail is especially troublesome and was nationally featured on 20/20. With estimates that up to 15 percent of its 6000 inmates are seriously mentally ill, the Dade County Jail is now, de facto, the largest mental institution in Florida, larger than the hospital in Chattahoochee (774 beds), Macclenny (672 beds), Arcadia (700 beds), and twice as large as South Florida State Hospital (350 beds).

Given this situation, the recently announced decision to close South Florida State Hospital is unbelievable. This is the state psychiatric hospital with the longest waiting list in the nation, in an area with as few acute-care psychiatric beds as any urban area, serving a city which has among the worst outpatient

facilities and housing for mentally ill individuals, with its public shelters and jails already overflowing with mentally ill individuals. So what do the administrators in Tallahassee decide to do? They decide to close the hospital.

One of the hallmarks of serious mental illnesses is the loss of an ability to think logically. However, I challenge you to find any seriously mentally ill individual in the State of Florida whose thinking is as illogical as is this decision. Given the present situation, the decision to close South Florida State Hospital is extraordinarily illogical.

The citizens of south Florida should demand the answers to several questions before this plan proceeds one inch. They include:

1. Where are the equivalent 350 beds to serve these patients? There already is an acute shortage of public psychiatric beds; this will make it worse.
2. The 300 acres at South Florida State Hospital are worth at least \$100,000 per acre, or \$30 million. Has a sweetheart deal with a land developer already been arranged? Is the legislature willing to guarantee that every single dollar from the sale of that land will go to fund services for mentally ill individuals in South Florida?
3. Why should not a portion of the land be retained and used to build apartments and group homes for patients currently in the hospital? Alternative affordable housing is in very short supply.

Unless these questions are asked, it will be business as usual in Tallahassee. The closing of South Florida State Hospital without alternative beds in place before the hospital closes will lead to substantial worsening of a situation which is already very bad. Individuals with serious mental illnesses and their families will find it even more difficult to get psychiatric care. The average citizen in south Florida will become aware of the following three consequences of this action:

- a) A further increase in the numbers of seriously mentally ill individuals among the homeless.

- b) Further overcrowding of jails due to the increasing use of them as alternatives to psychiatric hospitals; the overcrowding in turn leads to the premature release of non-mentally ill criminals as a means to combat overcrowding.
- c) Increasing numbers of episodes of violent acts by seriously mentally ill individuals who are not being treated. It is known that seriously mentally ill individuals, if treated, are not more violent than the general population. However it is also now known that if they are not being treated with medications, some of these individuals will become violent and commit both minor and major offenses.<sup>4</sup>

### References

1. Torrey, E.F., Erdman, K., Wolfe, S.M. and Flynn, L.M. Care of the Seriously Mentally Ill: A Rating of State Programs. Washington, DC: Public Citizen Health Research Group and National Alliance for the Mentally Ill, 1990.
2. Lutterman, T., Hollen, V., and Hogan, M. Funding Sources and Expenditures of State Mental Health Agencies: Revenue/Expenditures Study Results Fiscal Year 1990. Alexandria, VA.: National Association of State Mental Health Programs, February 1993.
3. Torrey, E.F., Stieber, J., Ezekiel, J. et al. Criminalizing the Seriously Mentally Ill: The Abuse of Jails as Mental Hospitals. Washington, DC: Public Citizen Health Research Group and the National Alliance for the Mentally Ill, 1992.
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