

# As Alabama shuts down psychiatric hospitals, one jail is expanding to house mentally ill



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Ferma Jackson oversees dozens of inmates with mental health concerns.

His work space is a large semi-circular area called a "pod." Within the pod are smaller "wedges" including one wedge that consists of eight cells housing inmates with schizophrenia and bipolar disorder. Each of these inmates has specific medical requirements that take up a large portion of the day for correctional officers.

"After a while, you see the same people come in," said Jackson, who has been employed as a county corrections officer for four years. "You get to know them and they get to know you."

He added, "If they had a place to actually go and get some help that would be the best way to go."

But finding alternative housing is a problem for sheriffs throughout Alabama.

Faced with a growing problem, the Sheriff's Department in Mobile County is now looking to expand its jail to handle inmates with mental illness.

The proposed jail expansion would be the first at the 32-year-old facility since the mid-1990s. It also comes four years after the state shuttered most of its psychiatric wards.

And while Mobile County's overall jail population is trending downward since 2010, the number of inmates prescribed "psychotropic" medication remains steady, if not rising – about 14 percent of the jail's inmates.

## 'Necessary modifications'

To Sheriff Sam Cochran and Trey Oliver, the jail's warden, mental health issues are not only creating extra expenses. They are also creating safety concerns.

Oliver said the number of corrections officers assaulted last year was nearly "double the norms."

Mobile County is better equipped than most in Alabama to tackle the complex needs for inmates with mental illness. [According to an AL.com analysis](#), 70 percent of 40 sheriff departments responding to a survey indicated they were holding someone in need of mental health services. Of those 40 counties, 65 percent said they had trouble finding services for at least one inmate with mental health problems.

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More than half of those who responded said they were not equipped to deal with mentally ill individuals.

For Mobile County, the challenge is where to put them.

According to Oliver, the jail had 768 people classified with mental illness come through the jail in 2010, a figure that "almost doubled" to 1,278 in 2013. That was one year after Mt. Vernon-based **Searcy Hospital closed amid state budget cuts** and a change in state policy to focus on community-based programs.

Searcy was the closest mental health hospital to Mobile, operating with up to 400 extended-care beds less than five years ago.

The Alabama Department of Mental Health has cut funding for state run psychiatric facilities from \$171 million in 2009 to \$96 million by 2014. The number of patients in those facilities dropped from about 4,000 to about 1,600 over the same time frame.

The state has instead increased support for community-based care, meaning programs and homes in local cities. But sheriffs say the burden for mental health care too often falls to deputies and jailers.

### **Building more space**

Oliver said there have been "over 900 inmates" with a mental illness come through the Mobile County jail "so far" in 2016.

Oliver said that 235 are on psychotropic medications, and that a host of them cannot be housed within the general population.

The segregation of those inmates creates a space concern, he said.

"Today, 13 of them are in a wedge that would normally house 30-something inmates, and they are on medication, but even on their medication they cannot function in the general population," said Oliver. "Next to them, we have another wedge with 15 inmates where we can normally house 30-something. They are mentally ill and refuse to take their medication and we have to keep them separate."

"We also have 13 who are on suicide watch so that's three cells (with a potential space) of 30-some odd people in each wedge. It shifts the population and creates an overpopulation elsewhere."

Aside from building more space for mental health inmates, the jail near downtown Mobile is in need of other improvements including a larger medical wing and tighter security outside.

The Sheriff's Department is working with Montgomery-based PH&J Architects Inc. to come up with a plan. There is no time table for their work to be completed, and no funding has been identified.

Once a design is finalized, the Sheriff's Department plans to approach the Mobile County Commission with a funding request.

**Commissioners acknowledge the need** but are not in favor of constructing an entirely new facility.



### **Prison reform creating uncertainties for counties**

"We are attuned to working with the Sheriff's Department in whatever it may be planned for an expansion that is needed," said Commissioner Connie Hudson. "Certain areas need to be renovated and expanded in the intake areas and the medical facilities and so forth."

Added Commissioner Jerry Carl, who would have preferred to see a new jail built with a trade school attached to it: "They have some real problems over there and doesn't do us any good to punt (the problem) down the road. The jail, itself, is outdated.

"We've closed the mental institutions and absorbed those mental patients," said Carl, "and from a county standpoint, the state will mandate these things and just let it trickle down."

### **'Far more effective'**

Officials with AltaPointe Health Systems in Mobile say Mobile's percentage of mentally ill inmates is much lower than the national average, which is above 20 percent of overall jail populations.

AltaPointe, since the 1950s, provides acute care, residential treatment and outpatient treatment in three south Alabama counties: Mobile, Baldwin and Washington.

AltaPointe officials claim that things are better off today than in pre-2012, when Searcy Hospital was still operating.

"The system in place today is far more effective and far better at treating individuals with no help than when we had a state hospital," said Tuerk Schlesinger, CEO of AltaPointe. The non-profit operates on an annual \$79 million budget and employs more than 1,300 people.

Those figures are likely to escalate following the organization's Aug. 1 addition of providing community-based services in Randolph, Talladega, Coosa and Clay counties.

Schlesinger said he's supportive of a remodeling or repurposing of the jail to treat mental health inmates. "I'm in complete support of a better facility," he said.

But what Schlesinger and AltaPointe officials dispute are some of the county's findings.

### **Community care defense**

Cochran agrees that the two entities, while they generally have a good working relationship, view mental health incarcerations differently.

"The whole jail population is down from when Searcy closed," Schlesinger said. "My point is they have the best partner they could ever have as a treatment provider to keep ... those numbers as low as possible.

But Cochran said: "We just have two different jobs and two different perspectives. They claim the needs in the community are taken care of. We claim, 'why is it that we see more mentally ill people in jail?'"

"We've closed the mental institutions and absorbed those mental patients..."

community."

**AltaPoine** has battled what it claims is an image problem in the aftermath of hospital closures. Sheriffs throughout Alabama have contended that community-based care is an inadequate replacement for operations such as Searcy.

"People tend to say that it's all gone badly since Searcy closed," said Dr. Sandra Parker, chief medical officer at AltaPointe. "It's actually gone much better in the

Schlesinger said AltaPointe has managed the situation well. In 2012, when Searcy closed, 220 remaining patients were disbursed into facilities throughout a 16 county region.

Of the 220, 110 were placed within facilities in the Dothan/Andalusia region while an additional 110 went to Mobile, Washington and Baldwin counties. And of those 110, Schlesinger said, 40 were placed at Bryce Hospital in Tuscaloosa – the sole remaining state psychiatric hospital that provides long-term care for the criminally mentally ill.

Many of the remaining 70 patients at Bryce, Schlesinger said, "did not meet commitment criteria," and were placed into crisis stabilization facilities or apartments.

AltaPointe does operate EastPoint--an adult psychiatric hospital in Daphne. But EastPointe – which accommodates 66 patients experiencing life-threatening and destructive behaviors requiring 24-hour monitoring -- is a short-term solution, with patients requiring long-term monitoring transferred to Bryce.

There are two or three EastPointe patients who are on a waiting list to be admitted into Bryce, which is typical, according to EastPointe officials.

### **Alternative programs**

Meanwhile, AltaPointe has introduced some alternative programs aimed at keeping their clients out of jail. Oliver and Cochran would like to see more.

Immediately after Searcy closed, AltaPointe developed a roving mobile team that responds to 911 calls and crisis situations.

In 2008, thanks to a \$150,000 grant, a jail diversion program was established in which AltaPointe employees work with misdemeanor offenders and advocate in court to keep them away from incarceration.

"We are advocating getting individuals with mental health diagnosis who have a history of treatment and compliance with us, to get them out of jail and to get their sentences lessened so they are not in jail," Schlesinger said.

Approximately 40-60 people are included in the jail diversion program, according to Cindy Gibson, assistant director of intensive services.

Oliver said he would like to advocate for a more proactive jail diversion program that would kick in before someone is sent to the jail.

He said such a program would be in partnership with AltaPointe, Probate Court and local law enforcement. He said the program would address the more of the nuisance complaints, such as panhandling, urinating in public and loitering.

"This makes up a lot of incidences where jail clearly is not where these folks need to go," said Oliver.

AltaPointe, itself, is battling funding limitations on two fronts. State funding for mental health services is steadily dropping, down seven percent overall from 2009 to 2014. Meanwhile, **[the city of Mobile cut AltaPointe's annual appropriation by \\$400,000 two years ago.](#)**

"If you think of a health care system not getting any increases in funding for 10 years and every year there is a 4 percent medical inflationary rate, that reduces what we're doing," Schlesinger said.

He added, "We get emergency petitions for commitments every week. That is something we want to make sure is there for the public. It is very important to us that there is a bed available for someone who needs one."

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