

National Trends in Inpatient Psychiatric Beds

What was the true number of psychiatric beds available in the United States? This was the question panelists **Ted Lutterman**, **Ron Manderscheid**, **Ph.D.**, **and Lynda Zeller** sought to answer during this session.

In order to understand the issue, it's important to revisit the history of psychiatric hospitals. Over the past 40 years, psychiatric hospitals, including state run facilities, have changed their role and the people they serve. People with Alzheimer's, Dementia and Intellectual Disabilities, who were once a large part of the caseload of State psychiatric hospitals, are no longer served in those facilities. Many others, who once would have been hospital residents are now served in community-based programs.

Inpatient psychiatric beds represent only one part of a comprehensive array of treatment services. News headlines that note the decrease in State hospital bed capacity only take into consideration the bed count of state hospitals and not other types of psychiatric inpatient facilities. Across the country, diversion to community evidence-based treatment alternatives are increasingly being used to reduce the reliance on hospital-based services.

The panelists urge researchers and analysts of mental health care to look beyond state hospitals when describing capacity for inpatient psychiatric beds, such as residential treatment centers and community-based services. Data collection efforts associated with psychiatric bed usage should be improved to create a base for public policy makers.

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