

The Discharge Process from Hospital-Based Psychiatric Care to Community-Based Psychiatric Care

**NC House Select Committee on Involuntary Commitment
and Public Safety, Wednesday January 14, 2026**



Stephen Eide, Senior Fellow, Manhattan Institute

The Discharge Process: Subtopics

- **Care Coordination**
- **Medication Adherence**
- **Follow Up**
- **Judicial Involvement**
- **Outpatient Commitment**
- **Recommendations**

Seriously Mentally Ill Adults in America

- **5-6% of the adult population (14-15 million)**
- **30 percent not in treatment (~4 million)**

The Discharge Process: Key Concepts

- **“Stepping Down”**
- **“Continuity of Care”**
- **“Revolving Door”**

Care Coordination

- **Robust family education**
- **Sweat the simple stuff**
- **Be mindful of inputs on the admission/“stepping up” side**

Medication Adherence

- **Drugs: off the wrong ones, on the right ones**
- **Medication *management***
- **Here's where to focus the “workforce shortage”
discussion**

Follow Up

- **Monitoring symptoms**
- **Avoid “warehousing”**
- **Assertive Community Treatment**

Judicial Involvement

- **Seriously mentally ill individuals need structure**
- **Structure in criminal justice vs. in mental health systems**

Outpatient Commitment (AOT)

- **Gold standard approach to discharge**
- **Value in disrupting “revolving door”**
- **More niche than it should be**



Recipient Outcomes: Significant Events

Report Description

Percent of AOT recipients hospitalized during their entire time in AOT compared to anytime in their lifetime prior to AOT.

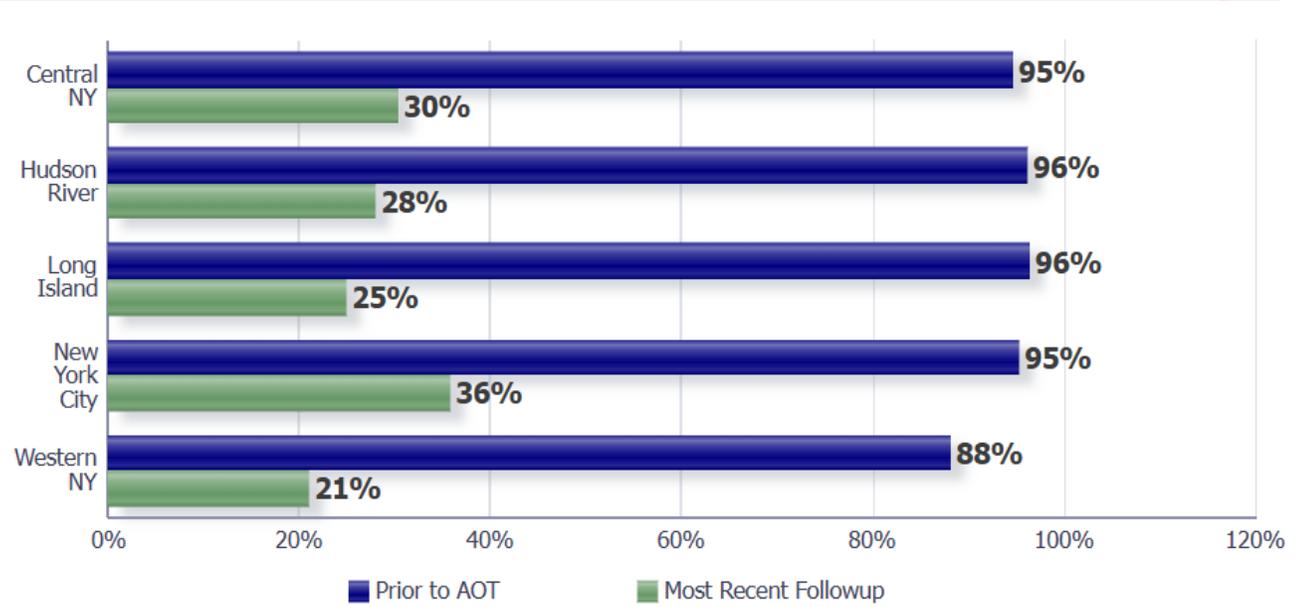
Data Source: Child and Adult Integrated Reporting System (CAIRS).

* Event

Statewide by Region

Region	Prior to AOT	Most Recent Followup	Percent Reduction
Central NY	95%	30%	68%
Hudson River	96%	28%	71%
Long Island	96%	25%	74%
New York City	95%	36%	62%
Western NY	88%	21%	76%
Statewide	94%	32%	67%

Psychiatric hospitalization by Region



Recipient Outcomes: Significant Events

Report Description

Percent of AOT recipients incarcerated during their entire time in AOT compared to anytime in their lifetime prior to AOT.

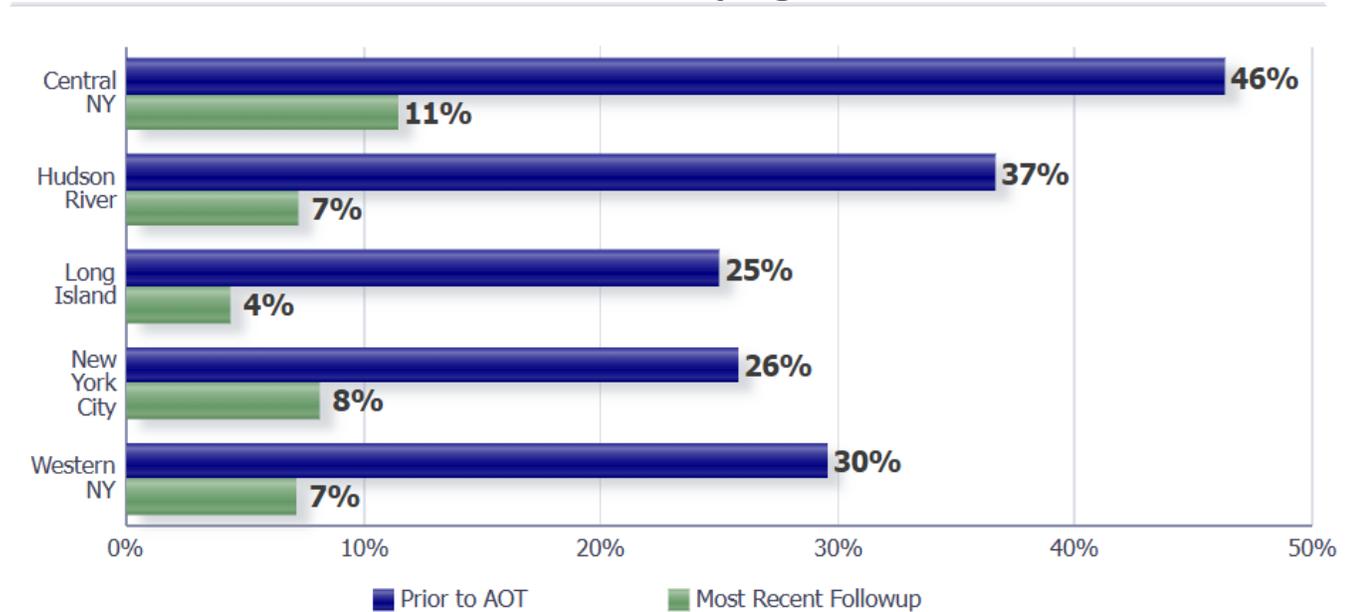
Data Source: Child and Adult Integrated Reporting System (CAIRS).

* Event

Statewide by Region

Region	Prior to AOT	Most Recent Followup	Percent Reduction
Central NY	46%	11%	75%
Hudson River	37%	7%	80%
Long Island	25%	4%	82%
New York City	26%	8%	68%
Western NY	30%	7%	76%
Statewide	28%	8%	73%

Incarceration by Region





Recipient Outcomes: Significant Events

Report Description

Percent of AOT recipients who have been homeless during their entire time in AOT compared to anytime in their lifetime prior to AOT.

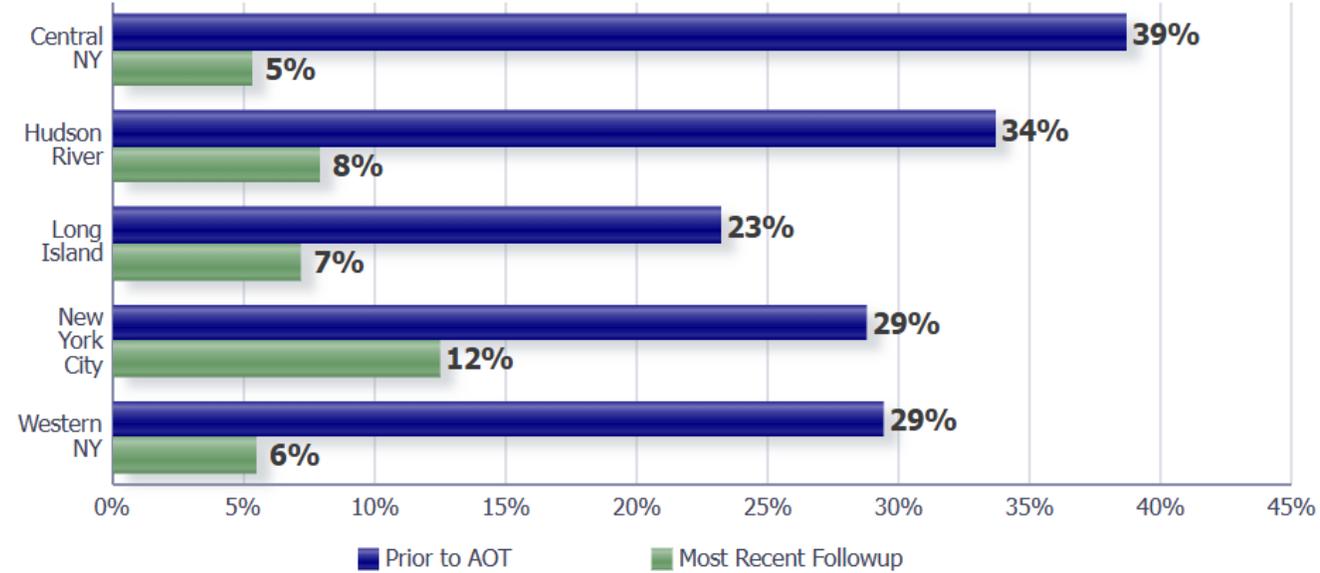
Data Source: Child and Adult Integrated Reporting System (CAIRS).

* Event

Statewide by Region

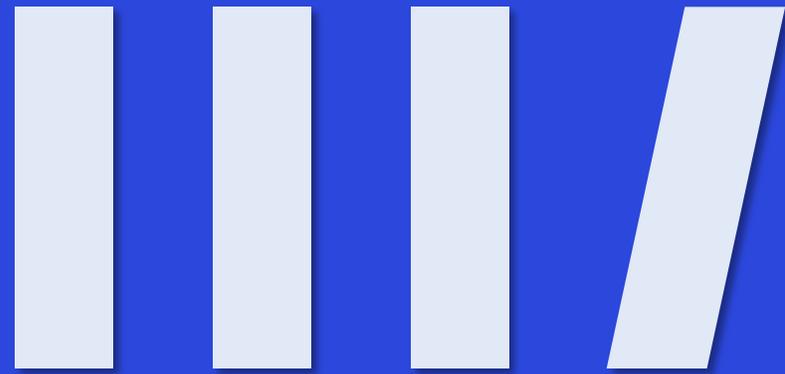
Homelessness by Region

Region	Prior to AOT	Most Recent Followup	Percent Reduction
Central NY	39%	5%	86%
Hudson River	34%	8%	76%
Long Island	23%	7%	69%
New York City	29%	12%	57%
Western NY	29%	6%	81%
Statewide	29%	10%	65%



Recommendations

- **More investment in psychiatric hospital beds**
- **Focus any community-based investment on serious mental illness**
- **Use AOT to make community mental health systems more accountable**



Manhattan Institute

- Stephen Eide
- seide@manhattan.institute