Community Capacity Pilot Project

Joint Legislative Oversight Committee on HHS
Subcommittee on Mental Health
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2003 Pilot

\$10 million transferred from state facility budgets.
 This was the value of the bed days used the previous year.

Goal of Pilot:

- Single manager of all public funds
- Development of community capacity in order to reduce reliance on state facilities
- Three Way Hospital Funds not used.

Outcomes: Facility Based Crisis

- We opened the first Crisis Facility in 2006, and the second in 2010.
- The Crisis Facilities serve as diversion to both the Emergency Department and to inpatient treatment.

Years	Number of People Served in Facility Based Crisis	
2010-2011	1,165	
2011-2012	1,161	
2012-2013	1,526	

Community Investment

- \$4.3 million from fund balance was used to develop the Facility Based Crisis Centers.
- We have an additional \$4 million reserved to replace the aging Kannapolis Facility and build an additional facility in Davidson County.
- Most of the funding used is state funding because of the high number of uninsured people served, and we do not have available funds to operate the Davidson County facility.

Outcomes: Community Inpatient

Many people that would have been served in the state psychiatric hospitals have been served in community hospitals.

Community Hospital Inpatient Utilization- Past Five Years — Piedmont Counties				
Years	Number of People Served			
2008-2009	1,229			
2009-2010	1,493			
2010-2011	2,005			
2011-2012	2,485			
2012-2013	2,459			

Community Inpatient Capacity

 Inadequate inpatient capacity in the Piedmont Counties of Cabarrus, Rowan, Davidson, Stanly and Union.

Psychiatric Bed Inventory				
Hospital	Adult	Geriatric Only	Total	
CMC-	0	10	10	
Northeast Rowan	20	20	40	
Regional	40		4.0	
Stanly Regional	12	0	12	
Thomasville	0	45	45	
Medical Total	32	75	107	

Population Increase

- NC Population is now 9.8 million.
- The population of the Piedmont Counties has increased by approximately 20% over the past 10 years:

2003: 629,801

2013: 754,273

Success!

- Significant numbers of people have been diverted from placement in the State Psychiatric Hospitals because of the Community Capacity Pilot.
- The inpatient capacity is not adequate in the Piedmont catchment area.
- North Carolina has a rapidly growing population and planning for future psychiatric inpatient capacity should include available adult beds as well as population growth.