Plan for Closure of Dorothea Dix and John Umstead Hospitals and Opening of Central Regional Hospital

> Joint Legislative Oversight Committee for MH/DD/SAS December 5, 2007

Transition to New Hospital

- Letters to families and guardians of consumers on long-term units at Dix in early December, 2007
- Executive Team on-site at Dix during peak visitation times to personally respond to questions
- Beginning in February, information about move will be added to Dix admissions packages
- Transition schedule designed to minimize disruption to consumers.
- In February, CRH will begin accepting adult admissions.

Date	Activity		
Dec. 2007 – Feb. 2008	Transition of long-term patients from DDH who are residents of		
	Cumberland, Johnston and Southeastern Regional LME catchment		
	areas to Cherry Hospital (16 patients as of 11/5/07) and residents of		
-	Davidson County to Broughton Hospital (2 patients as of 11/5/07)		
Dec. 2007 - March 2008	Notify and educate families/guardians of upcoming transition		
Jan. 11, 2008	Actual construction is projected to be completed		
Jan. 12 – Feb 18, 2008	 Installation of equipment currently in use at JUH and DDH 		
	On-site staff orientation to the building, equipment, technology		
	and policies & procedures		
Feb. 2008	Transition Forensic Treatment Unit Patients to Broughton Hospital,		
	pending recertification of Broughton Hospital by the Centers for		
	Medicare and Medicaid Services (CMS).		
Feb. 18 - 22, 2008	Initiate transfer of patients from DDH and JUH in the following		
	sequence, moving up to a total of50 patients per day:		
	Adult long term		
	Geropsychiatric		
	Medical		
Feb. 18 – 22, 2008	Initiate transfer of Adult Admission Unit from JUH; begin accepting		
	admissions from Central Region (no adult admissions accepted at		
	JUH or DDH)		
Feb. 25 – 29, 2008	Initiate transfer of patients from DDH and JUH in the following		
	sequence, moving up to a total of 50 patients per day:		
	Forensic		
	Child		
	Adolescent		
	PRTF		
Feb. 27 – 28, 2008	Transfer any patients remaining on the adult admissions unit at DDH		
March 1, 2008	Transition complete		

State Hospital Capacity

- Dix and Umstead census currently runs approximately 500 – 580 (9/30/07 = 568, 10/8/07 = 499) Hospitals have staffing levels appropriate for 603 beds.
- New hospital will have 468 beds
- Overflow unit in existing JUH space of 115 beds
- Increased capacity at RJB ADATC of 15 beds
- Dix/Wake unit of up to 60 beds
- Increased forensic capacity at Broughton of 50 beds

Comparison

Current Dix and Umstead Maximum:		CRH, RJB and Broughton Forensic Maximum:	
Dix	307	CRH	468
JUH	296	CRH: Overflow	115
		CRH: Dix/Wake	60
	553	RJB ADATC	15
			658
		Broughton	50

708

Changes to Population Served

- Implementation of 3 region model will result in 20% (781,663 net) decrease in total population to be served at CRH
- Increases to Central: Davie and Halifax = 96,104 increase
- Reductions from Central: Bladen, Columbus, Cumberland, Davidson, Johnston, Robeson and Scotland = 877,767
- Project 1,084 fewer admissions to Central from these changes. 212 greater admissions to Broughton and 872 greater admissions to Cherry. Designs of "new Broughton" and "new Cherry" reflect this increased capacity

Other State Facility Changes

- Other 2 ADATCs also increasing capacity:
 - -24 beds at Walter B. Jones, Greenville
 - 20 beds at Julian F. Keith, Black Mountain
- Contracts with community hospitals for diversion beds
 - Currently have 11 separate contracts with 8 hospitals
 - JUH the only hospital without diversion contracts – working to develop that capacity.

Broughton Contingency

- Broughton slated to add 50 forensic beds prior to opening of CRH. Beds will not be added until hospital re-certified by CMS
- CRH will have 87 pre-trial/forensic beds. Current census is approximately 93
- Can move 6-10 patients currently at Dix determined to be incapable to proceed to trial closer to home community by transferring to Broughton and Cherry.
- Can continue to do pre-trial evaluations on an out-patient basis until new unit at Broughton opens

Community Capacity – Central Region

- LMEs in Central Region received \$5.4 million in expansion crisis services \$ this fiscal year.
- Region has 476 inpatient beds in community hospitals, 433 of which accept involuntary commitments
- Substance abuse expansion funds projected to result in 30 additional beds in Central Region to serve as alternative to hospital beds.
- 4 providers of Mobile Crisis services, 3 facilitybased crisis/crisis stabilization units, 5 detox facilities
- CenterPoint awarded hospital pilot project expected to reduce the need for 9 beds at CRH

Community Capacity - Statewide

- Mecklenburg, Smoky Mountain, and Western Highlands awarded hospital pilot project projected to reduce the need for more than 40 beds at Broughton
- All LMEs developing crisis services to fill in gaps in local crisis array
- Housing initiatives underway statewide through Housing 400 initiative and Oxford House expansion.