



PROGRAM EVALUATION DIVISION

NORTH CAROLINA GENERAL ASSEMBLY

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Caring For Previously Hospitalized Consumers: Progress and Challenges in Mental Health System Reform

Summary

The North Carolina General Assembly's Joint Legislative Program Evaluation Oversight Committee directed the Program Evaluation Division to evaluate services delivered by the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services (MHDDAS). This report follows a Program Evaluation Division report released in July 2008 that identified lessons learned from the fraught implementation of MHDDAS reform and recommended ways to improve reporting and accountability. The present evaluation builds on the previous effort by examining services delivered since reform was introduced. Specifically, this evaluation focuses on services received by 22,516 individuals hospitalized at least once in a substance abuse or psychiatric facility.

This evaluation tested a set of assumptions about the goals of mental health system reform related to previously hospitalized consumers.

Goal of Mental Health System Reform	Evaluation Finding
Reduce rates of hospitalization	Yes: Rehospitalization rates were generally low in this sample
Increase capacity of community hospital psychiatric units to link with care in the community after discharge	Yes: More consumers discharged from community hospitals received community-based services
Reserve state psychiatric hospitals for consumers who need longer stays	No: Many consumers were in state psychiatric facilities for short stays of a week or less
Expand community-based services to reduce hospitalization	No: Consumers who received services in the community were more likely to be rehospitalized
Provide high-intensity community-based services along the full crisis continuum to high-risk consumers	No: Most of the services received by this high-risk group are considered low-intensity services
Ensure statewide implementation of community-based services	No: Local Management Entities continue to face challenges

Evaluation findings further suggested current data tracking is insufficient to assure continuity of care and does not reflect statewide system operations.

Based on these findings, the Program Evaluation Division makes two recommendations. A method for tracking individuals across facilities, service types, and funding sources is needed to better serve consumers and to generate statewide data on services provided. Second, system oversight and management should continue to focus on increasing the capacity and quality of community-based services.