Mental Health Services Guide

Wake County Residents

NAMI Wake Contact Information: Ann Akland
www.nami-wake.org  (919) 848-4490

Crisis Services and Psychiatric Hospitalization

Mobile Crisis Management Crisis Line: 877-626-1772 – For crisis response 24 hours a day, 7 days per week, 365 days a year. (Therapeutic Alternatives, Inc.) – Will do a phone assessment and may come to your home. You may have to wait several hours for someone to come to your home. They will respond only if the person with the illness talks to them directly.

UNC Wakebrook  107 Sunnybrook Rd., Raleigh, NC 27610, (984) 974-4830. Crisis help is available for emergency situations 24 hours a day for children and adults by walking in or calling.

Wakebrook is also the transfer point for law enforcement to bring individuals who are in crisis. If after an assessment, you are determined to need admission to a psychiatric hospital, staff will locate a bed either on site in the UNC Wakebrook Psychiatric Hospital or at a different location. Because of psychiatric hospital bed shortages, you may have to wait several days. You might be transferred to Holly Hill Hospital or in another hospital which may be as close as Durham or Chapel Hill or as far away as Jacksonville or Asheville.

There are recliners and mats for people who are waiting, but only 11 beds. Transport to a psychiatric inpatient facility will likely be by a security company, G4S, under contract with the Wake County Sheriff’s Department. Patients should expect to be restrained with velcro straps around their waists and hands or with hand cuffs and shackles, depending upon the situation.

Depending on the severity of condition, you may be admitted to one of the 16 beds at Wakebrook licensed for residential care, lower level of care than inpatient hospitalization.

If you need substance abuse detoxification, you may be admitted to one of the 16 residential beds at Wakebrook.

Holly Hill Hospital: HHH is committed to helping you address your needs when outpatient levels of service are no longer adequate to maintain your safety and your ability to perform normal daily functions, or when you are not certain and you need further assessment to ensure safety or functionality. HHH recommends that you or your psychiatrist call first to determine bed availability (919 250-7000) for adults or 919 250-7600 for children & adolescents, but you can also go directly to either of Holly Hill Hospital’s locations for assessment. For adults, it is located at the rear of the hospital, 3019 Falstaff Road, Raleigh, NC 27610. For children and adolescents, the location is 201 Michael J. Smith Lane, Raleigh, NC 27610. HHH is not authorized to bill for all types of insurance. You are responsible for any charges your insurance doesn’t cover, so you might want to authorize someone to talk to business staff at HHH prior to your admission to determine how much you will be charged.

Emergency: Call 911 & ask for a Crisis Intervention Team (CIT) Officer, a law enforcement officer who has received special training in de-escalating crisis situations involving people living with mental illness and substance abuse disorders.

Strategic Behavioral Center: For admissions and information: 919-800-4400 or 855-537-2262 (toll free), www.strategicbh.com. Offers acute psychiatric inpatient services for males and females age 5 to 17. They also offer psychiatric residential treatment for children and youth.

Inpatient Psychiatric Care for Geriatric Patients: UNC Behavioral Health Services Johnston Health, 509 N. Bright Leaf Blvd. Smithfield, NC 27577, 919-938-7540  UNC Inpatient Geriatric Unit , Have provider call for bed availability.) Chapel Hill, NC; Novant Health Thomasville Medical Center, 207 Old Lexington Road, Thomasville, North Carolina 27360, Call for bed Availability -(336) 472-2000
Emergency Departments at Hospitals in Wake County, e.g. WakeMed, WakeMed Cary, UNC Rex Hospital, or Duke Raleigh. – None of these hospitals has a mental health inpatient unit, but they will check you for any medical problems and determine whether or not you need to be involuntarily committed to a psychiatric unit at another facility. (WakeMed does have a special behavioral health team that works with patients in the ED.) If you are determined to need involuntary commitment to a psychiatric hospital, staff will locate a bed either in Holly Hill Hospital, UNC Wakebrook, or in another hospital which may be as close as Durham, Chapel Hill or Rocky Mount or as far as Jacksonville or Asheville. You can expect to wait in the ED for an average of 2 to 3 days. If the ED staff determine that you need to be admitted to a state psychiatric hospital such as Central Regional Hospital in Butner, you will wait an average of about 4 days. Emergency Departments at UNC Neuropsychiatric Hospital in Chapel Hill, Duke Hospital in Durham, and Duke Regional Hospital in Durham. – (UNC has a special section of its ED reserved for psychiatric patients.) These hospitals have inpatient psychiatric units, and they will check you for any medical problems and determine whether or not you need to be admitted. If so, you may be admitted to their psychiatric unit if a bed is available. If not, staff will locate a bed in another hospital which may be as close as Durham, Chapel Hill or Rocky Mount or as far as Jacksonville or Asheville. You can expect to wait in the ED for an average of 2 to 3 days. Transport to and from the psychiatric inpatient facility will likely be by law enforcement or contractor transport staff.

What to expect from Inpatient Psychiatric Hospitalization:

Most inpatient stays are very short, 7 days or less. They are primarily intended to provide safety and stabilization through medication management and a safe and therapeutic environment. It is important to have good outpatient mental health services, i.e. psychiatrist, therapist, psychosocial, etc., in place to avoid hospitalization and to maintain as much stability as possible. If you are particularly psychotic or aggressive, you may not be appropriate for admission to a regular inpatient psychiatric unit. In that case, you may be admitted to a state psychiatric hospital bed. There are a very limited number of state hospital psychiatric beds so patients may wait for a week or more. For the Wake County area, most patients are admitted to Central Regional Hospital in Butner. On average, stays at state hospitals are not very long—usually one to two weeks but can be as long as several months when needed. Social workers at the hospitals are responsible for providing discharge planning which connects patients to outpatient resources in the community.

Insurance Coverage for Mental Illness

Coverage varies according to your policy and network of providers. You need to shop around for insurance that has a good network for mental health. Private insurance and Medicare will generally pay for inpatient hospitalization and a portion of the cost for medication management and a certain number of therapy sessions if you and your provider meet all the requirements of the plan. Most other types of treatment such as those listed on page 3 are not covered. You usually will not be eligible for payment for these services from public funds if you have private insurance regardless of the fact that your insurance will not pay for it. However, you may want to contact Alliance Behavioral Health for a specific determination. (See next page for contact no.)

Our recommendation is to first consult your insurance carrier's network of providers and then to talk to others who are privately insured to get their views and recommendations for providers. You can network with others in NAMI support groups and education meetings.

Many psychiatrists are not on insurance panels and require that you pay them upfront. If you have insurance, they may accept claims from “out of network” providers.

If you are disabled by your mental illness, Medicaid coverage may improve your chances of receiving the care you need through enhanced services. Contact Wake County Human Services at this number 919-212-7000 and ask for assistance with Medicaid enrollment. Alternatively, appear in person at 220 Swinburne St., Raleigh, NC 27610.
Alliance Behavioral Healthcare (ABH):

Alliance Behavioral Healthcare is a "managed care organization, i.e. MCO that manages the "public" mental health, intellectual/developmental disability and substance abuse services for the citizens of Durham, Wake, Cumberland and Johnston counties. Although they do not actually provide services, their job is to manage the public funds from each County, the state, Medicaid, and other federal funds to ensure that individuals who seek help receive the quality services and supports they are eligible for to help them achieve their goals and live as independently as possible. These services are delivered by a network of private providers who contract with Alliance.

You are eligible for services through ABH if you are insured by Medicaid and live in one of these counties or if you are uninsured and assessed to meet eligibility criteria. When you need assistance, you can find out if you are eligible by calling the 24 hour Alliance Access and Information line (see above). You may learn more about how to access public services through ABH by going to this website: http://www.alliancebhc.org/accessing-services.

Depending upon the assessment, these are some services that are available through a network of mental health providers under the Alliance Health Plan:

- **Assertive Community Treatment Team (ACTT)** – A comprehensive, personalized treatment program for people who have been diagnosed with a severe and persistent mental illness. ACTT staff work with people in their home, at school, or at work, and are available 24/7 with rapid response to calls. ACTT employs an integrated team approach to help individuals with everyday basics such as getting moving in the morning, taking medications, and making it through the day. Team members closely monitor progress to ensure that medication is working and being administered correctly. They also help people find proper housing, sort out expenses, and build skills for the home, community and workplace. The team includes a psychiatrist, nurses, vocational specialists, therapists, and other mental health professionals as well as peer support staff. The main goal of this intensive service is to help people remain out of the hospital and living in the community.

- **Cognitive Behavioral Therapy (CBT)** – A form of psychotherapy that emphasizes the important role of thinking in how we feel and what we do.

- **Community Support** – The process of working with adults or children and their families to develop a plan and to coordinate services and supports to help them to reach their life goal.

- **Crisis Assessment and Stabilization and Crisis Residential** – Offered at the UNC Wakebrook Crisis and Assessment Services, an alternative to a hospital where individuals in crisis can go to receive help; the goal is for individuals to return home as quickly as possible.

- **Dialectical Behavior Therapy (DBT)** a specific type of cognitive-behavioral psychotherapy developed in the late 1980s by psychologist Marsha M. Linehan to help better treat borderline personality disorder. Since its development, it has also been used for the treatment of other kinds of mental health disorders and substance use disorders.

- **Evaluation and Testing** – Collecting of information about an adult’s or a child’s and family’s life, strengths, needs and abilities in order to better develop a plan of services and supports.

- **Housing and Residential Services** – Once you are receiving services, your provider can help you decide which residential supports you will need to achieve your goals; this can include various kinds of assistance, like rent subsidies and help with start-up expenses, to help ensure safe, stable housing.

- **Integrated Dual-Diagnosis Treatment** – Improves the quality of life for persons with dual disorders by integrating substance abuse services with mental health services, combining medicines with psychological, educational and social interventions to address the needs of consumers and their families.

- **Intensive In-Home Services** – A team and family approach to provide intensive services for children who have serious emotional disturbances, complex family challenges or serious behavioral problems likely to result in out-of-home placement.

- **Medication Management** – Evaluation of medication options by an approved provider to determine which medicine is best, how it should be taken and whether it is working.

- **Multi-Systemic Therapy** – A team and family-based intervention designed to enhance the skills of youth and their families who have anti-social, aggressive/violent behaviors or delinquency issues, including involvement with the juvenile justice system.

- **Outpatient Therapy** (individual, family, group) – Professionals teach new skills or ways to cope with problems.

- **Drop-in Center** – A place where individuals with mental illness can go to relax, participate in meaningful activity and socialize in a safe environment.

- **Psychosocial Rehabilitation (club house)** – A program for adults with mental illness and substance use issues to receive support, learn new skills and be encouraged to reach their goals.

- **Rapid Response Homes** – A safe and therapeutic short-term residential option for children dealing with serious behavioral or emotional disturbances or family crises.

- **Respite Care** – Care for an individual with a disability in the home or other safe place so the family or loved ones can take a “break” from their care giving responsibilities (only for I/DD).

- **Substance Abuse Detoxification** – A monitored process involving abstinence to clear the drug from the body, accompanied by support during the physical and psychological changes that result.

- **Substance Abuse Intensive Outpatient Treatment** – A program that provides the patient multiple sessions per week to learn new behaviors, to participate in self-help groups and to practice relapse prevention strategies.

- **Substance Abuse Residential Services** – Provide structured, communal living (such as halfway houses) serving as step-down or transition from more restrictive environments.

- **Supported Employment** – Helps people with disabilities participate in the labor market in jobs they prefer with the level of professional help they need.

If you would like to view providers in the ABH network for these services, you will find a searchable database on this website: http://providersearch.alliancebhc.org/default.aspx.
A Clubhouse is a model of rehabilitation (PSR) which promotes recovery, full community integration, and improved quality of life for persons who have mental health conditions that seriously impair functioning. Clubhouse services directly address the high risks that persons with serious mental illness experience with regard to frequent hospitalizations, low levels of functioning in the community, social isolation, persistent homelessness, inappropriate incarceration, and unemployment.

The program operates during regular business hours, promoting mutual acceptance, respect, and support. Persons with severe and persistent mental illness work at their own pace to gain or regain the confidence and skills necessary to lead vocationally productive and socially satisfying lives. Centering on the concept of a “work-ordered day,” each “member” chooses to participate in one of several work units to accomplish the daily functions of the Clubhouse. The Clubhouse also provides independent housing support, assistance in attaining educational goals, and help with other life needs such as food, clothing, transportation, physical wellness, and entitlement benefits, and employment. (Call 919 266 2202)

Clubhouse programs are known to prevent repeated hospitalizations for people who need coordinated, and often, elevated supports in order to function well in the community. As an example, national statistics show that re-hospitalization rates for clubhouse members is 14%, compared with 44% for those not in a clubhouse setting. Club Horizon has maintained member re-hospitalization rates of less than 10% since provision of Clubhouse services began in 2004.
Caramore Community is a structured support program for adults with mental illness. The program exists for the purposes of promoting wellness, managing illness, and facilitating the skills needed to live and work in the community. Caramore offers a complete package to empower adults with mental illness attain their own meaningful and successful independence. Here's how ---

**Work** - Participants immediately start receiving paid work that helps them develop the jobs skills necessary to receiving and maintaining community employment. Once ready, job support staff works with them to develop/enhance their resume, fill out applications, and interview effectively. Most importantly, staff will get participants a community job. The job is not complete once participants are hired...staff continue to help them navigate the challenges of community employment, and offer support until no longer warranted.

**Independence** - The participants that are receiving residential services, move into a supervised apartment that allows them the opportunity to live in a de-stigmatized, integrative environment. While residing in a Caramore apartment, participants will save money, buy groceries, monitor medications, maintain the cleanliness of their home, and develop or revisit those daily skills necessary to living independently. With the help of Caramore’s budgeting and finance counseling, participants will eventually move out into their own living situation with greater experience in dealing with the affairs of residential responsibility.

**Structure** - Early on in the program, Caramore participants have a very structured day, which entails working Monday - Friday from 8:15am to 3:15pm. clients receive transportation to the grocery store, to mental health and physical appointments, and in some cases to their community job when they gain competitive employment. Staff conduct daily room inspections, hold clients’ medications, keep up with their appointments, offer cooking and computer classes, provide nutritional counsel, and assist with the overall coordination of their care. As participants move through the program, the structure relaxes so as to give them more responsibility, ownership, and empowerment.

**Engagement** - Every Caramore participant is different, and every Caramore participant requires different attention. Soon after admission, Caramore participants establish vocational and residential goals to improve upon. Instead of relying on participants to work through their challenges on their own, staff actively engage them with their goals, and work to help them realize their potential. We are a mirror of accountability meant to help our participants learn to weather the practical challenges of life.

Caramore exists to help the people living with mental illness focus on real-life challenges that demand a practical, structured approach, so that independence is no longer just an abstract concept, but an attainable reality. Caramore has been helping people become WISE for over 35 years. Phone (919) 967-3402

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**UNC Schizophrenia Treatment and Evaluation Program (STEP) Clinic Wake**

UNC STEP (Schizophrenia Treatment and Evaluation Program) Community Clinic is an outpatient clinic located at 3010 Falstaff Road in Raleigh, N.C. that helps individuals and families dealing with serious mental illness to make strides toward health and recovery. They also have regional clinics on a limited-time basis in Wake Forest, Zebulon and Fuquay Varina.

Wake STEP Clinic was created for approximately 500 Wake County individuals with severe behavioral needs who were transferred from the Wake County Human Services Department to UNC Healthcare July 1, 2013.

The team of mental health professionals and graduate students from UNC-Chapel Hill—psychiatrists, psychiatry residents, clinical social workers, peer specialists, nurses, and others—specialize in the diagnosis and treatment of schizophrenia, bipolar disorder other serious mental illnesses. Using research-based, best-practice clinical skills, we assist our patients with their recovery.

We provide illness education and medication management, and help our clients come up with personal coping and relapse prevention strategies.

Phone for all Wake STEP Clinic Offices: 919.445.0350

UNC STEP Community Clinic, Wake County
3010 Falstaff Road Raleigh, 8:00 a.m.- 5:00 p.m.
Monday-Friday

Regional Offices
Southern Regional Center - Fuquay Varina.
130 Judd Parkway NE, 1:00-5:00 p.m.
Every Monday

Northern Regional Center - Wake Forest
350 East Holding Ave.
1:00 p.m. – 5:00 p.m.
2nd and 4th Thursday of each month

Eastern Regional Center - Zebulon
1002 Dogwood Dr.
Tuesday 8:30 a.m. – 12:00 p.m.
**UNC CECMH - Wake ACT (Assertive Community Treatment) Team**

UNC’s ACT Teams are well-known for their success in providing transition support for individuals with severe mental illness as they move from a facility to living in the community. With expansion of UNC clinics to Wake County, a relatively new Wake ACT Team now serves patients in Wake County.

This evidenced-based practice model provides an individual with a comprehensive team of mental health professionals and paraprofessionals who have a common goal of assisting these clients/patients in receiving medication and other care that will allow them to live a meaningful life, preferably in an independent living situation. It serves individuals in various settings, including home, work and community.

The team is comprised of a team leader, mental health professionals, nursing staff, a team psychiatrist, housing specialist, vocational specialist, substance abuse specialist and a peer support specialist. Individuals are seen an average of 12 times per month for medication monitoring, symptom monitoring, therapeutic interventions and care coordination activities. The team is available to patients 24/7, 365 days/yr.

Individuals who meet criteria for this service typically have an Axis 1 diagnosis of schizophrenia or other psychotic disorder or bi-polar disorder. In addition, the person will likely have a recent history of multiple hospitalizations, be at risk for homelessness, or have difficulty engaging in “traditional office based” services.

Contact: 919.445.0296

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**UNC Oasis - Outreach & Support Intervention Services for Early Psychosis**

A safe place to reclaim your life.

OASIS - Outreach and Support Intervention Services
One in fifty people develop a psychotic disorder. The OASIS Program is a safe place to reclaim your life.

The OASIS Program is a clinical program of the UNC Center for Excellence in Community Mental Health within the Department of Psychiatry at UNC’s School of Medicine. Their mission is to promote full recovery from a first episode of psychosis using proven and innovative approaches to comprehensive and coordinated specialty care and integrative medicine. Our team of psychiatrists, psychologists, and social workers from UNC-Chapel Hill specialize in treating early psychosis. Using research-based, best-practice clinical skills, we provide:

- Psychiatric and psychosocial assessments
- Medication management
- Therapy and support for individuals, families, and groups
- Assertive outreach and crisis services
- Recreational activities

They believe the future continues to be bright for our young people. That’s why we also support clients at work, school, and in relationships; work with their family and friends; and promote recovery and relapse-prevention.

Individuals who are experiencing or recovering from a first episode of psychosis within the past 3 years; persons ages 15-36; clients who live within a 90 minute drive of one of our two clinics, in Chapel Hill and Raleigh.

Consultation services are available for those outside of our catchment zone.

For more information or to make a referral, call OASIS at 919.962-1401 or go to this website: http://www.med.unc.edu/psych/cecmh/oasis/referrals