



NEWS RELEASE

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CONTACT: Drew Bridges, MD at NCPA
(919) 414-7579; NCPA office: (919) 859-3370
Phrendrew@aol.com

NC Psychiatric Association Releases Its Third Report Card on Mental Health

“Discarding Community Psychiatrists” – 2003-2005 saw 16.1% drop

48 psychiatrists lost, at least 31,000 patients unable to access care

Raleigh, NC—The North Carolina Psychiatric Association (NCPA) released its third “Report Card” on the state’s Mental Health System, evaluating the results of state policy on the supply of community psychiatrists. The data is from a survey conducted by the North Carolina Council of Community Programs in the summer of 2005 with NCPA’s collaboration. (While NCPA is grateful to the Council for permission to use the results of the survey, the Report Card is the sole responsibility of NCPA.) The Report Card can be found at the NCPA website: www.ncpsychiatry.org.

The Report Card reveals that in the two years from 2003 to 2005:

- North Carolina lost 48 full-time equivalent community psychiatrists.
- Per capita community psychiatrists fell by 16.1%.
- NCPA estimates that as a result at least 31,070 LME-sector patients with mental illness are unable to access psychiatric care. The losses in community psychiatrists result in more difficulty getting appointments and longer waits to be seen.
- Losses of community psychiatrists affected rural MH agencies more than urban agencies.

According to Mental Health Agency CEOs:

- An additional 70 FTE community psychiatrists (or 23% of the current workforce) is needed.
- The top three obstacles to psychiatrist recruitment and retention are (a) insufficient reimbursement, (b) lack of availability, and (c) non-competitive salaries.
- Four proposed remedies are: (a) improve reimbursement rates, (b) increase salaries & fringe benefits, (c) increase staff support for treatment team activities and medication management, and (d) address state-wide shortage in community psychiatrists.

“These disastrous results are the direct result of failed state policy,” said Drew Bridges, MD, NCPA Immediate Past President and spokesman. “At a time when nearly every state in the nation reported shortages of public psychiatrists, state leaders mandated that community agencies divest their clinical staff. Dedicated public servants were in fact discarded. And it is the patients who are suffering, with greater difficulties accessing care.”

“With mental health reform,” Dr. Bridges said, “community psychiatrists were forced to take on too much financial risk. Many of them simply found jobs someplace else. And finding replacements turned out to be tougher than the state expected.”

“This Report Card has the best available analysis of what it takes to restore community psychiatrists in North Carolina,” noted Margery Sved, M.D., NCPA President. “Substantial intervention will be needed to reverse these losses,” she added. “Policymakers should recognize that psychiatrists need two things – first, clinical viability, meaning the ability to have a professionally meaningful career in a setting where patients get good care. This includes necessary staff support, appropriate workload, reasonable involvement in governance, and the sense of being respected and valued.”

“Second, psychiatrists need financial viability,” added Dr. Sved, “meaning that psychiatrists can make a living without worrying too much about whether the agency is going to go belly up, as some agencies have.”

Dr. Sved said, “to reverse these losses, substantial state funds will be needed, whether as direct subsidy to agencies, establishing state positions to support psychiatrists in localities, or supporting a state-wide organization that could serve as a financial umbrella for community psychiatrists.”

NCPA’s first Report Card on the “Clinical Impact of North Carolina’s Mental Health Reform,” released June 22, 2005, identified dramatic increases in state hospital admissions of adults and children/adolescents. The second Report Card, “There Is Not Enough Money for Mental Health,” released March 16, 2006, revealed that NC per capita spending on mental health lags national norms and called for \$285.5 million in new mental health funds over 2002-03 levels.

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The North Carolina Psychiatric Association is the voluntary, professional association for psychiatric physicians in the state and is a District Branch of the American Psychiatric Association, representing more than 870 psychiatrists. NCPA supports and promotes access to and delivery of quality psychiatric services to the citizens of North Carolina and promotes the availability of needed mental health services in the state.