

The Behavioral Wellness Center at Girard

Community Health Needs Assessment

2024 to 2026



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I. Introduction: Our History

The Behavioral Wellness Center at Girard began its life as the Philadelphia Children's Homeopathic Hospital established in 1896, and later moved to 8th and Franklin where it was renamed St. Luke's and Children's Medical Center. St. Luke's was one of the first treatment facilities for alcoholism in the 1930's and, in 1947, the Saul Clinic was created to provide medical and sub-acute treatment for alcoholism. The Helen L. Goldman drug rehabilitation program was established in 1904 and, in 1970, the clinic, now known as the Goldman Clinic, began offering methadone treatment. St. Luke's later became known as the Giuffre Medical Center, and then as the Girard Medical Center, and re-located to larger facilities at 8th Street and Girard Avenue.

In 1990, the North Philadelphia Health System (NPHS) was formed to acquire in a bankruptcy reorganization the assets of Girard Medical Center and another long-standing community hospital, St. Joseph's Hospital, located at 16th Street and Girard Avenue. The hospitals operated under the NPHS corporate entity, with more than 1600 employees, and served as the economic engine in one of the city's oldest, financially deprived, and medically underserved communities. The hospitals were restructured to eliminate duplication of services. St. Joseph's provided medical and surgical services and Girard Medical Center provided Behavioral Health programs. In 2016, NPHS closed the St. Joseph's Hospital and only provided Behavioral Health services, e.g., Psychiatric Mental Health and Substance Use Disorder (SUD) programs, through the Girard Medical Center. At the end of 2016, NPHS filed for bankruptcy protection, and in November 2018, The Be Well Center emerged from those proceedings as the reorganized entity.

Now known as The Behavioral Wellness Center at Girard, The Be Well Center has always been at the forefront of innovation in the provision of treatment services for individuals with substance use disorders and mental health challenges and a willing partner to the City of Philadelphia in serving City residents. In the early 1990's, the Center opened one of two Residential Intensive Non-hospital Treatment (RINT) programs to serve individuals discharged from the closing of the Philadelphia State Hospital. Later, it partnered with the City of Philadelphia to address the number of individuals imprisoned who were in need of Substance Use Disorder treatment; and to develop a variety of Forensic Intensive Recovery (FIR) programs, which allowed men and women to be released from prison directly into care. In 2007, the Center again responded to a request from the City of Philadelphia to open specialized residential treatment programs for chronically homeless men in Philadelphia; and, along with five other programs, these programs have helped to significantly reduce homelessness in men

as well as address the chronicity of untreated behavioral health issues with the City's homeless population. The organization continues to expand and open new programs and in 2023 opened or expanded three new programs:

- 15 bed Wound Care unit for clients impacted by wounds caused by the use of Xylazine commonly known as "tranq". The wounds lead to many other health conditions.
- A 48-bed psychiatric unit was opened at Monumental Post Acute Care (MPAC) to care for clients who are not sick enough to need acute medical care but have psychiatric care needs.
- The Extended Acute Care program was expanded from 51 to 71 beds.

These service expansions and new programs have helped the Behavioral Wellness Center at Girard meet the behavioral health needs of our community.

The role of The Behavioral Wellness Center at Girard in the health and wellness of the citizens of Philadelphia has been and continues to be critical, particularly given the Center's location and easy access to much needed services for the surrounding communities.

Our Mission

To provide effective, evidence-based behavioral health services to our participants, which inspire hope, encourage change, improve our community and offer services in a manner that is spiritually and culturally sensitive, and responsive to community needs.

Our Vision

To be the region's premier provider of a continuum of behavioral health services.

Our Values- CHIRP

Choice – Recognizing and supporting the participants' right to choose and to understand the consequences.

Hope – Expecting and embracing change.

Integrity – Doing the right thing because it is the right thing.

Respect – Listening to the concerns and needs of our participants.

Professionalism – Providing care with the skill, respect, good judgement, and polite behavior that is expected from a person who is trained to do a job well.

II. Executive Summary

At the time of preparing this CHNA, our nation and our specific community in Philadelphia is in the midst of an opioid crisis that has grown in size and negative consequences to the opioid users by the inclusion of Fentanyl and Xylazine. Additionally, the number of individuals who need psychiatric services has been rising year after year.

The goal of the Behavioral Wellness Center at Girard is to meet these needs and save lives. Every person who is brought in from the street with a substance use disorder is one less person who could die on the streets of Philadelphia or be the victim of a crime. Starting treatment brings families back together and employees to jobs. Everyone wins.

Individuals with psychiatric needs whether it's in a hospital, nursing home or in the community who are not receiving adequate care are a danger to themselves and those who they are with.

Our mission is to provide care for these two types of clients and improve the lives of all Philadelphians.



III. Community Definition

The community is defined separately by The Be Well Center's 2-core service lines Psychiatric and Substance Abuse Disorder as there is a significant variance between the admissions sources and geography of each community.

The Be Well Center's Psychiatry patients originate from the following sources:

- Prisons throughout Pennsylvania
- Norristown State Hospital
- Various City of Philadelphia Agencies located throughout the city
- Philadelphia Crisis Centers throughout the city

Consequently, the geographic spread of patients is:

- 40% from outside of Philadelphia
- 60% from within Philadelphia, but the spread is from all parts of the city

The Be Well Center's Substance use disorder patients originate from the following sources:

- Philadelphia Crisis Centers located close to the facility
- Walk in clients

Consequently, the geographic spread of patients is:

- 78% from the zip codes within 3 miles of the facility
- 22% from the zip codes greater than 3 miles of the facility

IV. Data Sources

The following data sources were used:

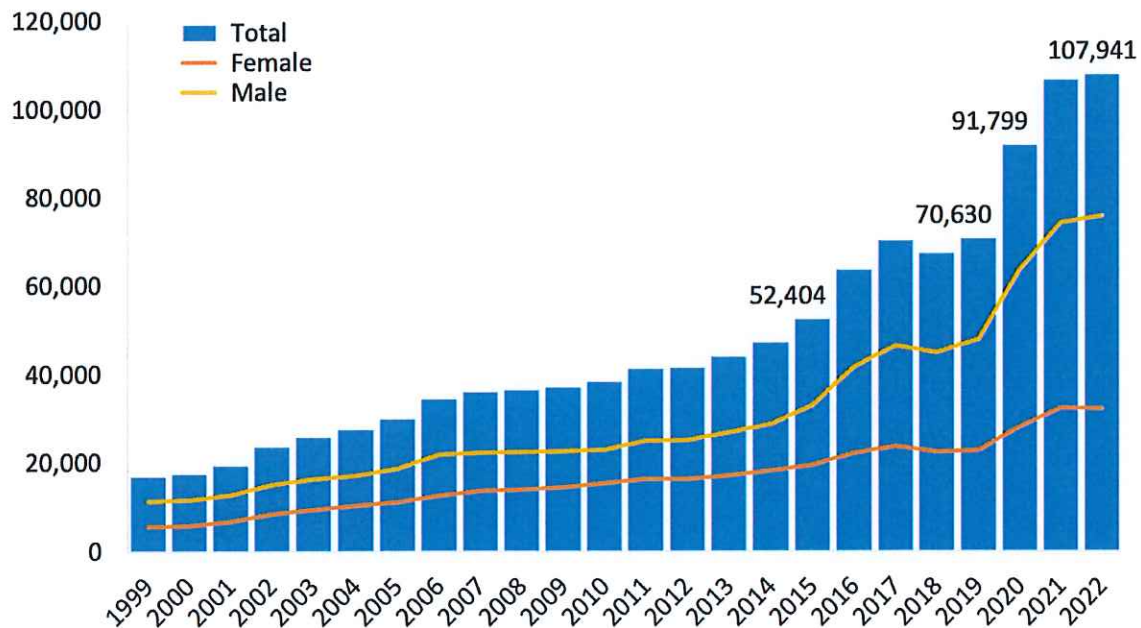
1. The Pennsylvania Health Care Cost Containment Council (HC4) hospital data (most recent fiscal year was 2022). The Financial Analysis 2022 – Volume Three Dataset includes Psychiatric Hospitals. The Pennsylvania HC4 requires healthcare providers in Pennsylvania to annually submit various health statistics for services performed. This data is made available to the public and downloaded and used in this analysis.
2. The Philadelphia Department of Public Health performed a Regional Community Health Needs Assess in 2022. The summary of the findings applicable to the Behavioral Wellness Center are utilized in this analysis.
3. The Chart Report issued by the City of Philadelphia Department of Public Works for the month of September 2023 (Volume 8, Number 3), titled “Unintentional Drug Overdose Fatalities in Philadelphia, 2022.
4. The National Institute on Drug Abuse’s Advancing Addiction Science article titled “Drug Overdose Death Rates dated May 14, 2024.
5. Internal Behavioral Wellness Center at Girard statistics from FY 2024.



V. CHNA Findings A) SUD

- Substance use disorders often co-occur with mental health conditions.
- Substance use is associated with community violence and homelessness.
- Drug overdose rates continue to be high due to the opioid epidemic. It is the leading cause of death for young adults.
- The opioid epidemic is associated with increases in other health conditions including HIV, Hepatitis C, and Neonatal Abstinence Syndrome (NAS).
- The following charts demonstrate the number of deaths caused by the drug use:

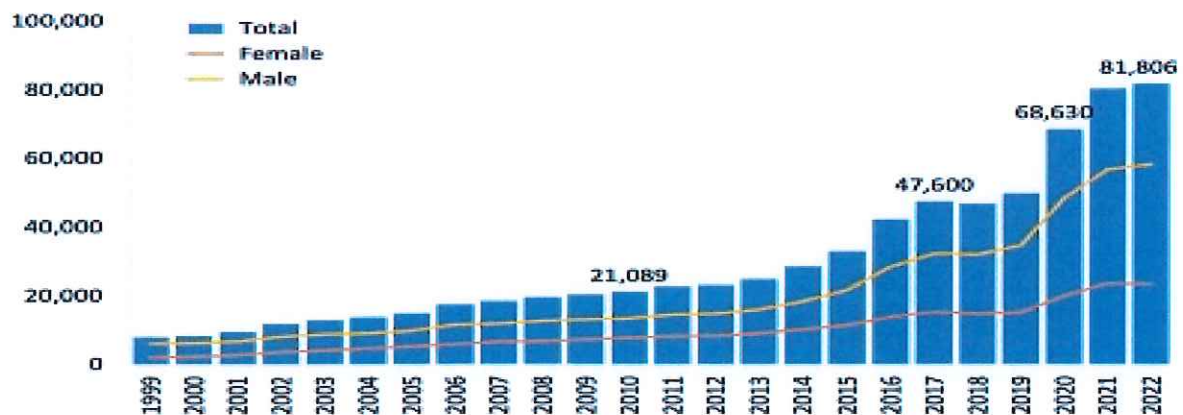
Figure 1. National Drug Overdose Deaths*, Number Among All Ages, by Sex, 1999-2022



*Includes deaths with underlying causes of unintentional drug poisoning (X40–X44), suicide drug poisoning (X60–X64), homicide drug poisoning (X85), or drug poisoning of undetermined intent (Y10–Y14), as coded in the International Classification of Diseases, 10th Revision. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2022 on CDC WONDER Online Database, released 4/2024.

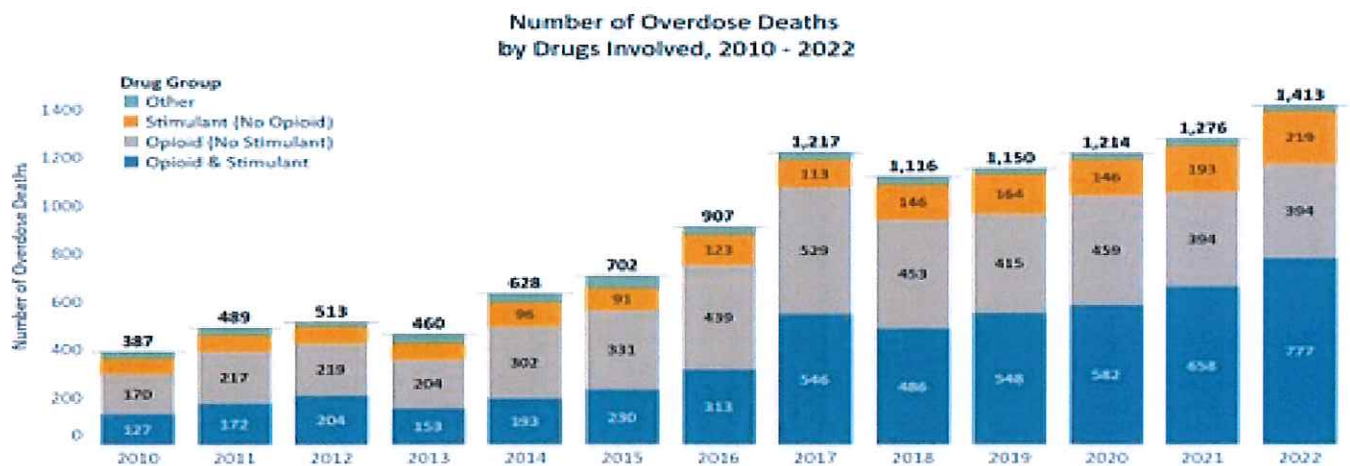
National Drug Overdose Death Rates involving Opioids

Figure 3. National Overdose Deaths Involving Any Opioid*, Number Among All Ages, by Sex, 1999-2022



*Among deaths with drug overdose as the underlying cause, the "any opioid" subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2022 on CDC WONDER Online Database, released 4/2024.

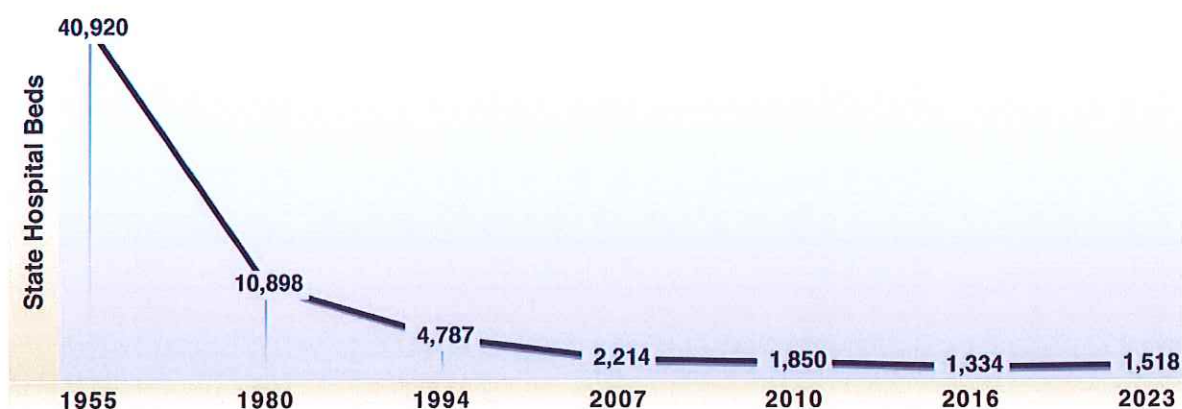
Philadelphia Drug Overdose Death Rates



V. CHNA Findings B) PSYCHIATRIC

The number of State psychiatric hospital beds in Pennsylvania has dramatically declined since 1955. As a result, the gap has fallen to the private sector to provide these beds.

TOTAL NUMBER OF STATE HOSPITAL BEDS IN
PENNSYLVANIA: 1955-2023



The Behavioral Wellness Center has become a primary provider of Psychiatric services as the provider gap has shifted and continues to grow in need.

VI. Overview of Planned Program Intervention

After reviewing the needs of the Psychiatric and Substance Use Disorder communities served by the Behavioral Wellness Center at Girard, the following steps will be implemented:

Psychiatric:

- The Extended Acute (EAC) **Psychiatric** unit was recently increased to 71 beds from 51. This combined with Acute and Sub-acute Psych beds which is 14 beds brings the total to 85 beds.
- The current staffing on the four units that make up all Psychiatric programs will be flexed to permit all Psych patients to enter the facility. Clients will be admitted to the units without caps on services. This will permit a higher census and serve more clients in need or care.

Substance Use Disorder:

- A recreation vehicle (RV) was acquired several years ago and has increased admissions. Additionally, The Behavioral Intake Unit (BIU) will be enhanced to maximize walk in clients. Finally, outreach to all referral sources will be more formalized to generate more admissions. All of these steps should increase volumes and help the community deal with the SUD needs.
- The organization added the following services recently:
 - The Wound Care Unit (15 beds) – The expansion of the use of Xylazine which is cut into Opioids to lengthen the effects of the drug has created many wounds and amputations on the Opioid users. The Wound Care unit cares for these clients on both a medical and detox/rehabilitation basis.
 - The Withdraw Management Unit (20 beds) – The expansion of the use of Fentanyl as an added agent in opioids has increased the addiction level of those who use the drug. It is not practicable to detox clients down to zero drug usage and instead their addiction is lowered and then they are slowly brought down to zero addition.
- The enhancement of ways to increase admissions that takes those addicted off of the streets and the new services to more specifically address the client needs is the organization's way to expand its SUD mission to the Philadelphia community.

VII. Future Validation of Intervention Services

In order to determine the effectiveness of these actions The Be Well Center will perform the following steps:

Psychiatric:

- The Acute Psychiatric unit's census will be monitored to determine if more patients have been admitted and the occupancy has increased.
- The key validations for the new Extended Acute Unit will be the growth and variety of clients to demonstrate all presented clients are receiving care.

Substance Use Disorder:

- The volume of new patients by admission source and the services that they utilize will be monitored to determine the effectiveness of the RV and its outreach team.
- The Withdrawal Management clients' numbers will be monitored to determine whether we are succeeding in moving these clients from their abuse of substance or not.
- The overall client census will be monitored to ensure growth and more new clients receiving care.



801 W. GIRARD AVENUE
PHILADELPHIA, PA 19122

VIII. Contact for Feedback

Kate Bardelli
North Philadelphia Health System
d/b/a The Behavioral Wellness Center at Girard
801 West Girard Ave.
Philadelphia, Pa. 19122
kbardelli@bewellctr.org