

Mental health partnership initiates 'integrated care'

By **Cherry Sokoloski**
North Forty News

Editor's note: This article is the second in a two-part series about the Community Mental Health and Substance Abuse Partnership in Larimer County.

A new approach to mental health and substance abuse is on the horizon in Larimer County. Set to begin early in 2005, the program is called "integrated care." It's designed to make treatment for conditions such as depression and addiction more effective and efficient by having specialists available at two local primary care clinics.

Integrated care means that mental health professionals work in the family clinic, instead of across town in their own offices, making them and their expertise readily available to both patients and family physicians. The project is one of many being undertaken by a local consortium called the Community Mental Health and Substance Abuse Partnership, which is concerned with mental health and substance abuse issues.

In 2002, a local study found mental health and substance abuse, combined, constitute the largest disease burden in Larimer County, ahead of cardiovascular conditions and cancers. The finding was reinforced a year ago, when the Health District for Northern Larimer County asked local physicians what their greatest needs were. The doctors cited a huge need for help with mental health issues, according to Dr. Bruce Cooper, medical director of the health district.

Realizing how large the mental health and substance abuse issues were in the county, the health district decided to discontinue two other services, the Health Van and Well Woman Clinics, to focus resources in this area.

Two clinics chosen

Clinics chosen for the integrated care project are Salud Family Health Center and the Family Medicine Center, both of which serve low-income and underserved patients who have the least access to psychiatric help. The

clinics will share a team of mental health specialists, who can provide services to a patient at the same time the patient is visiting the family doctor. The physician can bring a psychologist to the examining room to talk to the patient, make an appointment for a later date, or consult with the mental health team about appropriate medications for the patient.

This integrated approach, according to Cooper, provides more expertise under one roof. It will be more efficient in serving patients' needs, while eliminating the stigma of visiting a therapist's office.

Family physicians are often the first to see signs of a mental illness or addiction, so they are an important link to needed services for the patient. In fact, according to Cooper, a majority of people who commit suicide were found to have visited a primary-care physician in the month before their deaths.

"It's so sensible to integrate primary and mental health care," said Cooper, claiming that the new sys-

tem will save both money and lives. With integrated care, he noted, people with chronic disorders will visit their doctors less often. Many of these illnesses have their roots in mental disorders, and when the underlying issues are dealt with, the patients get better. They benefit, and the medical system does, too.

"By spending a little money on behavioral health, ultimately we will see reduced demand on primary care services," Cooper said.

Other goals of the program are to provide a better quality of life for patients who deal with mental illness or substance abuse, and to increase satisfaction with health care quality, both from a patient's point of view and from doctors as well.

One of the largest mental health issues is depression, Cooper noted. "Depression is one of the most painful conditions that humans experience," he said. "It's pervasive and serious. You can't cure yourself, and you can't think yourself out of it." Depression, said Cooper, is also strongly cor-

related with suicide, "the ultimate cost of an unrecognized or inadequately treated depression."

Stigmas remain

Mental health issues have long been discussed in whispers, if at all, by the general public. It's a fact that one in five people will suffer from a mental health disorder in the course of a year. The statistic means that, in any given workplace, some co-workers or acquaintances are most likely dealing with these conditions. However, with strong stigmas remaining in this arena, mental health issues are not usually discussed around the company water cooler.

Because of these stigmas, it's often difficult for a person suffering from depression, anxiety or substance abuse to seek treatment from a mental health professional. Some patients may not even recognize their conditions — such as chronic pain or fatigue — as being caused by a mental health issue. Cost can also be a barrier to mak-

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ing the call to a therapist. Even if a person has health insurance, it often covers only a portion of the therapist's fee.

Nonetheless, most people suffering from a mental disorder or addiction do see a family physician from time to time, and that's where they may discuss a problem

like depression or anxiety. From the patient's point of view, the doctor's office is accessible, familiar and comfortable, so family doctors often spend a good deal of

Mental health facts and figures

When it comes to caring for its citizens, Colorado is lagging. The following facts may surprise North Forty News readers.

- Colorado is dead last in the country in per capita funding for substance abuse prevention, treatment and research, according to a Columbia University study.

- Colorado is one of only two states that do not fund substance abuse treatment under Medicaid.

- One-third of the youth held by the Colorado Department of Youth Corrections have mental health needs.

- In Larimer County, an estimated 68,000 people are affected by substance abuse or a mental health disorder. Of those, an estimated 21,000 people have signif-

icant functional impairment due to mental illness and 15,000 have substance abuse disorders.

- Larimer County's suicide rate is 40 percent higher than the national average. In 2003, 46 people committed suicide in Larimer County, nearly one each week.

- Locally, mental health treatment is much less expensive before it reaches a crisis level. One outpatient visit to the Larimer Center for Mental Health costs the center \$5.29. A visit to Poudre Valley Hospital's emergency department costs \$575, while one day of inpatient care at Mountain Crest Hospital costs \$1,545.

- National statistics are also alarming:

- One in five adults will experi-

ence a mental disorder in the course of a year (Surgeon General's report).

- Fewer than one-third of adults in need receive mental health services (Surgeon General's report).

- More than 90 percent of suicide victims had one or more mental disorders. The risk of suicide in alcoholics is 50 to 70 percent higher than in the general population (American Association of Suicidology).

- Substance abuse and mental health issues are often related. Fifty-one percent of those with one or more lifetime mental disorders also have a lifetime history of at least one substance abuse disorder (U.S. Department of Health and Human Services).

time helping patients with their mental health issues. By having specialists readily available in the clinic, family doctors will have assistance in providing more accurate diagnosis and more effective treatment of mental health and substance abuse issues.

Dr. Austin Bailey, who has practiced at the Family Medicine Center for 19 years, said he has pushed for an integrated care approach since arriving at the clinic. "The body and mind are integrated," he noted, and past perceptions that body and mind were divided created problems in treating patients effectively. With the new system, he said, people with more severe behavioral issues and mental illnesses will have support from specialists right in the clinic, a better approach than sending them off to the psychiatrist's office.

Another aspect of integrated care is continued education for the medical community around mental health issues. This part of the program has already begun, and the partnership will continue to offer workshops for family doctors on specific mental disorders and substance abuse issues.

Information about new programs of the Community Mental Health and Substance Abuse Partnership is available online at www.healthdistrict.org.

Soon under way

The health district is in the process of hiring the necessary

people to make up the mental health team for the two clinics. The team will include a psychiatrist, who has already been chosen, plus a psychologist or therapist, a case manager and clerical staff. Two certified addictions counselors will be hired, one for each clinic, and mental health professionals already on staff at the two clinics will also be on the team. A child psychiatrist or psychologist will be available for consultation.

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