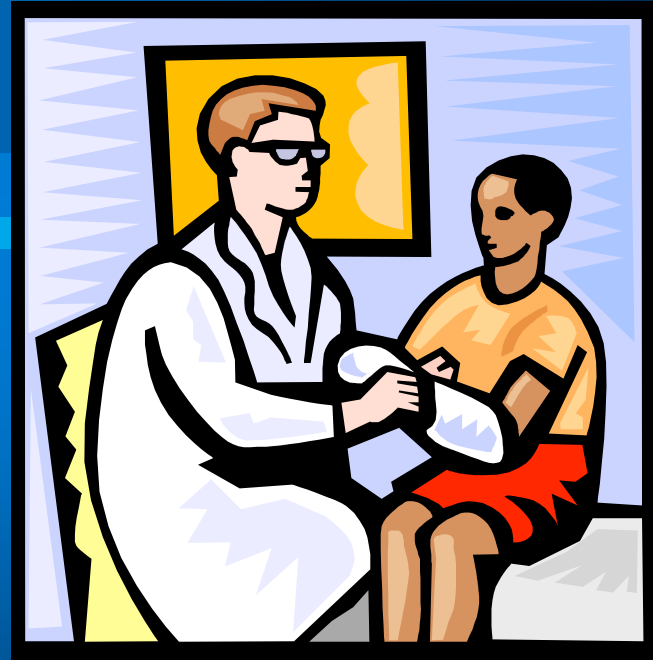


Mental Health and Primary Care

Integration 1994 - current

M.H.S.A. Expansion 2006



County of San Mateo Mental Health

Need for Collaboration

- **High co-morbid illness risk**
- **High impact of mental illness on physical health**
- **Psychological distress of physical illness**
- **Problems with recognition of mental illness**
- **High cost of specialty care**
- **Cost offset of integrated care**

Underrecognition of Mental Disorders

- **Outpatients San Mateo County Clinics**
 - Of the 40,000 patients treated in Primary Care only 1200 have an ICD-9 code for mental illness (2004)
- **Other research: David Pollack M.D.**
 - Any MH Dx made in only 11% of cases
 - Depression correctly Dx in 14-50% of cases
 - Delirium correctly Dx in 14-37% of cases
 - ETOH correctly Dx in 5-50% of cases

Underrecognition and treatment of medical illness in SMI population

- Many SMI clients do not have a PCP or do not make it to appointments
- Poor detection and followup of medical problems. Poor compliance.
- Serious metabolic risks of atypical antipsychotics
- Recent national study reports that SMI clients die on average 25 years younger than the general population

Populations Treated 2005/6

- **Mental Health 13,000 consumers**
- **Primary Care 63,000.00 patients**

Primary Care & H.S.A. Mental Health

Integration Points

- 1. Primary care interface team**
(embedded in 6 County P.C. medical clinics)
- 2. Family Self-Sufficiency Team**
(embedded in 4 H.S.A. sites)
- 3. Primary Care NPs (two) embedded in three Mental Health Clinic sites.**

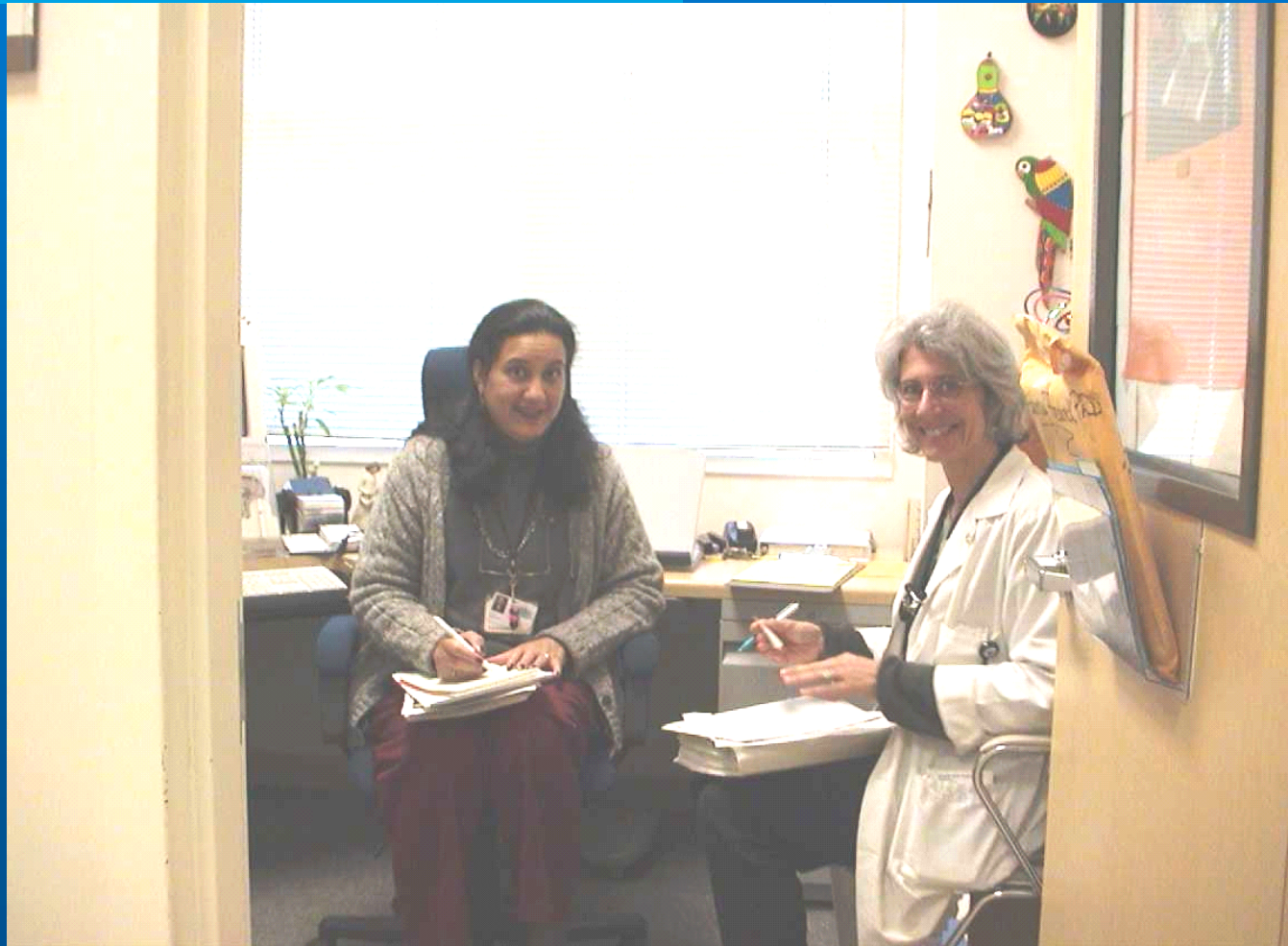
Interface Unit Chief Viewpoint

- Cheryl Walker, MFT

Potential Barriers

- Space
- Space
- **Space!!**

Functional Office/Curbside Consultation



Potential Barriers: How to Communicate Effectively

- **Face to face**
- **Paper**
 - Intra-agency referral forms
- **Electronic:**
 - Dictation: Interface MH report; into medical data base
 - E-mail
 - Voice mail
- **Computer:**
 - Mental health data base
 - Medical data base
 - Sharing of prescription records for Health P
Mateo clients



Intra-agency Referral Form

Patient information

Space for referral detail

Date & Signature
Space for response detail

Date & Signature

FAMILY # _____

**REQUEST FOR SERVICE
INTER-AGENCY REFERRAL FORM**
(PRESS HARD)

NEW _____
OPEN _____
CLOSED _____

| | | | | | |
|---|-----------------------|------------------------|-----------------------|-----------------|--|
| 1. NAME To: _____ | Agency or Dept. _____ | 2. NAME From: _____ | Agency or Dept. _____ | | |
| 3. PATIENT'S NAME | | 4. BIRTHDATE | | | |
| 5. PATIENT'S ADDRESS | | 6. ZIP CODE | 7. CENSUS TRACT | 8. PHONE NUMBER | |
| 9. NEAR FRIEND OR RELATIVE (Specify Relationship) | | ADDRESS | | | |
| 10. SOC. SEC. # _____ | | 11. MEDICAL # _____ | | | |
| 12. LANGUAGE _____ | | | | | |

13. PURPOSE OF REFERRAL — INCLUDE DIAGNOSIS IF APPLICABLE.

DATE _____ SIGNATURE _____ TITLE _____

14. REPORT TO REFERRING SOURCE (INCLUDE EVALUATION, RESPONSE TO CARE, PLAN FOR FUTURE ACTION, ETC.)

RECORD OPENED _____
NOT OPENED _____

DATE _____ SIGNATURE _____ TITLE _____

WHITE - PATIENT FILE CANARY - RESPONSE COPY PINK - OFFICE REPORT COPY GOLDENROD - OFFICE CONTROL COPY

Potential Barriers: Finances

- **NPs funded by Primary Care and bill under Primary Care.**
- **All other Interface clinicians (with one exception) are Mental Health funded positions and all bill under MHS.**
- **Prior to the MHSA expansion, the Interface Team generated enough funds to pay for itself.**

Primary Care Interface Continued

- **Primary Care Nurse Practitioners**
 - Two fulltime nurse practitioners serving our three largest Mental Health Clinics
 - See clients that due to their Mental Illness would fail to go to Primary Care
 - Provide Diabetic Clinic to MH clients

Nurse Practitioner Viewpoint

- **Mary Jo Tierney, NP**

Primary Care Interface Team

- Primary care interface team.
- Adult
 - Three Spanish speaking mental health clinicians
 - Daly City, Fair Oaks, Willow Primary Care clinics
 - **One .50 Adult psychiatrist MHSA**
 - Daly City and Fair Oaks

Primary Care Interface Team

Continued

- **Youth MHS**
- **2 Spanish speaking positions**
 - One Mandarin, Cantonese and
 - One .60 Child Youth Psychiatrist

Primary Care Interface Criteria for Mental Health Treatment

**Mental or emotional illness
negatively impacting medical care**

Crisis intervention/5150

**Serious mental illness /linkage to ACCESS
team**

Primary Care Interface Service

- **Assess, consult, treat or refer.**
- **Brief Solution Focus treatment, case management or linkage with ACCESS Team and FFS.**
- **Identify SMI and link to the Mental Health ACCESS team/region.**
- **Treat and refer consumers to alcohol and drug services.**
- **Facilitate communication between primary care and mental health**

Referrals from the Interface Team

- **Transfers to a higher level of care are discussed with Youth or Adult Outpatient Clinical Manager**
- **Transfers are made via Interface Unit Chief to Adult or Youth team Unit Chief**
- **Eight referrals have been made since 11/1/06**

Interface Clinician Viewpoint

- Elizabeth Alvarez, MFT

Psychiatrist Role

- **Assessment**
- **Medication recommendation or brief treatment**
- **Curbside consultation**
- **Training, support and education for primary care doctors**



Psychiatrist Viewpoint

- **Randy Solomon, MD**

Adult Primary Care Provider Viewpoint

- **Cora Hoover, MD**

Pediatrician Viewpoint

- **Janet Chaikind, MD**
Pediatric Chief

Breakdown of Services 2001-2002

- Received 877 referrals
- Opened 691 cases
- Charted over 6000 contacts
- Team productivity is 70%
- Average 172 open charts per clinician annually
- 71% of the charts were closed within 60 days & average 10 interventions
- 93% of consumers have no other MH treatment

January-September 2007

Clients referred to Interface:

1087

Clients opened:

749

Adults: 433

Child/Youth: 363

Average interventions per client: 9

Work in Progress

- Development of an electronic client chart**
- Development of more group work**
- Outreach to Asian Community**
- Expansion of Interface Model to Private Primary Care Sites who see County clients.**

Questions?

Celia Moreno, MD

San Mateo County Behavioral Health and Recovery Services

650-573-2043

Cmoreno@co.sanmateo.ca.us

Cheryl Walker-Unit Chief, Interface Teams

(650)573-2630

Cwalker@co.sanmateo.ca.us