

# Managing Alcohol and Mental Health Comorbidity in Primary Care

Divisions' Orientation Workshop

# The nature of care

Mental health can't be considered isolation:

- Over 1 in 10 patients have alcohol and mental health comorbidity
- Those with chronic medical conditions are at greater risk of co-morbid mental health problems
- Mental health disorders are risk factors for physical disease

# GP and Consumer Perspective: the *system* we need

- Improves access to quality care
- Integrates and promotes shared care
- Improves access and support by allied health professionals and psychiatrists in the primary health care setting

# Better Outcomes in Mental Health Care: Components

The beginnings of a *system*

- Education and training for GPs
- 3-step mental health process
- Focused psychological strategies
- Access to allied health services
- Access to psychiatrist support

# Better Outcomes: the evidence base

- GP mental health skills-based training results in better patient outcomes

(Kroneke, K. et al. Interventions to improve provider diagnosis and treatment of mental disorders in primary care, *Psychosomatics*, 2002: 41, 39-52)

- A system that combines primary care with specialist interventions in an integrated way delivers better mental health outcomes

(Katon, W. & Korff, W. et al. Collaborative management to achieve treatment guidelines: impact on depression in primary care, *JAMA*, 1995, 273: 1026 – 1031.

# This Project ....

A response to:

- The Holmwood review (2001)
- ADGP's Mental Health Position Statement (2003) and Joint Statement (2004)
- Gaps in *Better Outcomes* implementation

# Holmwood review (2001)

- GPs face a broaden spectrum of presentations; skills for treating comorbidity are variable
- Care needs to be more integrated across primary care, mental health and drug and alcohol services
- Ad hoc Divisional activity – not national, systemic or sustained

# This Project ....

- *Broadening* Better Outcomes to include an integrated, comprehensive response to mental health and substance misuse comorbidity
- *Making a contribution* to the National Mental Health and National Drug Strategies
- Providing a *platform* for further phases – in discussions with AERF, National Comorbidity Initiative and National Suicide Prevention Advisory Board

# Policy Context

- **National Mental Health Strategy**
  - ✓ National Primary Mental Health Care Network
  - ✓ Better Outcomes in Mental Health Care Initiative
- **National Suicide Prevention Strategy**
- **National Drug Strategy**
  - ✓ National Alcohol Strategy
  - ✓ National Comorbidity Initiative
- **DVA initiatives**

# 2004 Election Commitments

\$110 million over 4 years:

- \$30 million to expand *Better Outcomes* with a focus on rural and remote
- \$50 million to address mental health problems, including addiction, in young people
- \$30 million to beyondblue to address community attitudes and improve services for people with depression

# Orientation

4 parts:

- Project objectives, timelines, communication and support
- Carer and consumer resources
- Evaluation
- Education and training package