

# Concurrent Disorder Program Overview

Holly Raymond  
MSW RSW

# The Goal

- To provide evidence-based, integrated, mental health and addiction care for individuals who have concurrent disorders (CD), through joint capacity development of both Mental Health and Addiction services

# This Change is Needed Because

- A recently published (U.S. based) article indicates that only 9% of major MH programs and 18% of addiction programs in the US are concurrent capable
- (McGovern et. al., November 2012)

# This change is Needed Because Individuals with Concurrent Disorder Experience:

- More persistent illness course & more treatment refractory in comparison to those with only a single disorder.
- •Higher rates of chronic disease, suicide and death. Factors in approximately 50% of homicides and suicides by people with serious mental illness.
- •Higher use of health services as well as housing instability and homelessness & criminal behavior as compared to individuals with mental illness or addiction alone.
- •Higher rates of poorer treatment outcomes, including readmissions in comparison to individuals with only a mental health diagnosis.
- •Poorer follow through with services: 60% of clients with concurrent disorders, “no show” or drop out after the first session.

# Concurrent Disorder Program

- In-Patient 20 bed Unit
- Out-Patient team
- Capacity Building team

# We Work with Clients Who:

- Are in Quadrant 4. High Addictions/High Mental Health
- Have had unsuccessful attempts with other addiction/mental health services and exhausted other treatment options
- Often do not attend follow-up appointments
- Have frequent contact with emergency services
- Typically do not meet criteria for other addiction/mental health services because of severity of symptoms

# Myths about In-Patient Unit

- It is a residential treatment program
- Patients do not need to have an acute psychiatric illness to be admitted
- It is a medical detox
- It will treat everyone with CD in the city

# Capacity Building Team

- Knowledge translation for Boris Chair research
- To utilize a “hands on” approach to support staff in developing and utilizing knowledge and skills
- To provide individualized consults using a collaborative framework
- To promote evidence based practices in concurrent disorders
- To develop a continuum of skill level across the organization from concurrent informed to concurrent capable to super users
- To implement standardized screening and assessment skills
- To support capacity building beginning in the Mental Health and Addiction Program and expanding hospital wide
- To include community partners in training
- To develop a model that can be utilized across the larger system





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