



October 29, 2009

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Commissioner

How Co-Occurring Capable Are We Now?

The federal Substance Abuse and Mental Health Services Administration (SAMHSA), through the Connecticut Co-Occurring State Incentive Grant (COSIG), sponsored the Co-Occurring Disorders Conference that took place on October 6th at the Marriott in Cromwell. Over 200 people attended, including mental health and addiction treatment providers, state agency staff, consumers/persons in recovery, advocates, and other stakeholders. It was an important event to highlight the progress made thus far and recommit ourselves to the work of continuing to integrate services at all levels. A four minute video of the event can be viewed at: [COSIG Conference video link](#).

So, how are we doing overall? How Co-Occurring Capable is the DMHAS system of care? Certainly the 25 DMHAS-operated facilities and funded private non-profit agencies that were recognized at the October 6th event, and that are listed below, have clearly increased their co-occurring capability. In addition, four additional private non-profit Local Mental Health Authorities (LMHAs) and three chemical maintenance treatment programs joined the Co-Occurring Practice Improvement Collaborative in recent months to do this work as well.

The requirement that most all DMHAS-operated and funded programs administer a standardized mental health *and* substance use screen upon all admissions went into effect more than two years ago; as we visit programs and review charts, we see them being used and incorporated into the assessment and treatment planning process. There are data reports available to all agencies summarizing their screening data and their co-occurring population, to inform their services and program development. Two new Co-Occurring Enhanced Residential Treatment Programs were implemented in 2008 adding twenty new community-based residential beds to the system of care. Implementation of a Co-Occurring Policy is underway for Medicaid Enhanced Care Clinics (ECC). More co-occurring workshops are offered through the DMHAS Education and Training Catalog and contracted trainers/consultants help programs implement the Integrated Dual Disorders Treatment (IDDT) or Dual Diagnosis Capability in Addiction Treatment (DDCAT) models, contingency management with co-occurring groups, and family psychoeducation.

I recently read this quote by Joseph Parks, M.D., Chief Clinical Officer for the Missouri Department of Mental Health: "We held out for the expectation that every mental health agency would be competent in treating substance abuse to the extent they found that a current condition of their patient population, and that a substance abuse agency would be competent in treating mental illness to the extent they found that present in their substance abuse patient population" (Anthony & Huckshorn, 2008). Are we getting closer to this level of capability? From your view, what do we need to do to get there? We must not lose focus on continuing to invest in the development of a workforce capable to meet the needs of individuals with CODs. We must continue to re-align our services to be responsive to the COD populations presenting for care. We must continue to look for opportunities that bring us closer to a co-occurring enhanced system of care. Overall as a system we've made great strides—this isn't the time to stop—we still have a way to go.

Please comment at pat.rehmer@po.state.ct.us

Commissioner Recognition Award Recipients

- Alcohol Drug Recovery Centers
- APT Foundation
- Birmingham Group Health Services
- Capitol Region Mental Health Center
- Cedarcrest Hospital
- Center for Human Development
- Connecticut Renaissance
- Community Prevention and Addiction Services
- Connecticut Mental Health Center
- Harbor Health Services
- InterCommunity Mental Health Group
- McCall Foundation
- Midwestern Connecticut Council on Alcoholism
- Morris Foundation
- Perception Programs
- Regional Network of Programs
- River Valley Services
- Rushford Center
- Southwest Community Health Center
- St. Mary's Hospital
- Southeastern Mental Health Authority
- Southwestern Connecticut Mental Health System
- United Community & Family Services
- Western Connecticut Mental Health Network
- Wheeler Clinic