



## **The Bulletin - November 21, 2009**

### **State Pilot Project Aims to Improve Health of People with Mental Illness**

*By Hillary Borrud / The Bulletin*

Central Oregon is the first site approved for a state pilot project to improve the health of people with serious mental illnesses, who die on average earlier than the general population.

Local health workers say the project will increase the coordination of care for patients dealing with a combination of mental and physical illnesses and, in some cases, substance abuse. They hope to get the project up and running in the first quarter of 2010.

In 2006, a national report by the National Association of State Mental Health Program Directors found that people with serious mental illnesses were dying on average 25 years earlier than the general population, largely because of treatable medical conditions related to factors such as obesity, smoking and inadequate access to medical care. State Sen. Alan Bates, D-Ashland, and Rep. Tina Kotek, D-Portland, pushed for the pilot projects in the 2009 Legislature.

Health care providers plan to improve care and reduce costs for patients through primary care “medical homes” to give them more coordinated care and reduce their visits to the emergency room.

Each participant in the pilot project will eventually be able to choose a local community clinic or behavioral health clinic to serve as a “medical home” and provide the majority of his or her care.

This will enable medical staff to keep better track of patient information, such as what tests a patient has received, and provide more coordinated care, said Dr. Robin Henderson, the director of behavioral health services for Cascade Healthcare Community, which owns St. Charles hospitals in Bend and Redmond, operates Pioneer Memorial Hospital in Prineville and provides management services to Mountain View Hospital in Madras.

Groups backing the pilot project want to hire two or three community health care workers, a nurse and an administrator to help project participants navigate the health care and social services systems. For example, a health care worker could help enroll a patient with diabetes in wellness classes and find low-cost or free exercise options for the patient, Henderson said.

“That’s to help people move from getting most of their services from the ER, to help them get engaged with community-based services such as Mosaic (Medical) and community health clinics,” Rick Treleaven, executive director of BestCare Treatment Services, said of the community health care workers. BestCare provides prevention and treatment of addiction and mental illness.

Finally, the pilot project is supposed to improve how medical providers share patient information. Henderson said health care providers have yet to determine exactly how to achieve this.

Scott Johnson, director of health and human services for Deschutes County, said the Central Oregon pilot project aims to improve health care outcomes for patients, raise patients’ satisfaction with their care and reduce health care costs.

The state Department of Human Services awarded \$150,000 to the project for 2009-11, and local health care providers are still deciding how to raise additional funding and ironing out the details of how to carry out the project, Johnson said.

Jane-ellen Weidanz, integration demonstration manager at DHS, said one of the agency’s goals is for the pilot projects to reduce the number of patients who experience a mental health crisis and end up in acute care hospitals and the state hospital. Counties in northeastern Oregon have also proposed a pilot project.

“I would love to see us in our first year have between 50 and 75 people in the program,” Henderson said. “Once we prove that it works and it actually can save health care providers money and provide better overall outcomes, I think we can raise that number pretty quickly.”

The local pilot project will recruit participants with serious mental illnesses and physical health issues who frequently seek care in emergency rooms. “We have people who have had between 20 and 40 (ER) visits in a nine-month period,” Henderson said of CHC.

The health care organizations carrying out the pilot project include mental health programs in Crook, Deschutes and Jefferson counties, CHC hospitals, BestCare Treatment Services and Mosaic Medical clinics in Bend, Prineville and Madras.

“What we’re really aiming for eventually is to have a common medical record between the primary care clinic and behavioral health clinic,” Treleaven said.

Treleaven said BestCare Treatment Services has already started a separate initiative to emphasize physical health at a mental health drop-in club it operates in Jefferson County, by having clinicians measure body mass index and blood pressure of people who go there. So far, people have reacted enthusiastically.

“We started measuring that and low and behold, everyone got motivated, and we started implementing things like a walking club,” Treleaven said.

*Hillary Borrud can be reached at 541-617-7829 or at hborrud@bendbulletin.com.*