

Mental Health and Drugs and Alcohol- A Holistic Approach

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My Background

- Director of Community Forensic Mental Health Services.
- Director of Joondalup Community Mental Health Services.
- Psychiatrist in Perth Mental Health Court.
- Psychiatrist at the Autism Association of WA
- Psychiatrist at Bunbury Community Mental Health Service.
- Psychiatry member of the Mental Health Review Tribunal.
- Provider of private court reports- criminal and coronial.

Imagine

- You have mental health problems:
- Abuse.
- Trauma.
- Substance abuse.
- Mood lability.
- History of self harm and suicidal ideation.
- Episodic drug induced psychosis.
- Psychosocial problems.
- How would you like to be managed?

Introduction

- Maths and logic.
- Suicide and Homicide by people with mental illness.
- Drug induced psychosis.
- Navigating the maze- a one stop shop proposal.

Maths

- Risk prediction.
- Niels Bohr: 'Prediction is very difficult, especially if it's about the future'
- Risk management.

Maths Of Risk Assessment

	Suicidal	Not Suicidal
Risk Assessment Positive	True Positive	False positive
Risk Assessment Negative	False Negative	True Negative

Logic And False Logic In Clinical Risk Management

- | | |
|--|--|
| 1. Intervention X is not available | 1. Patient needs intervention X |
| 2. Document the deficiency, give 2 nd best Rx | 2. There is no point in recording X |
| 3. Patient needs intervention X | 3. Do something else |
| 4. Pressure on planners to meet the deficiency and consider buying X | 4. Planners never become aware of need for X so service never improves |
| 5. Disaster arising from lack of X | 5. Disaster arising from lack of X |
| 6. Clinicians smell of roses. Planners have some explaining to do | 6. Planners smell of roses. Clinicians look incompetent |

Faulty Logic

- ‘I do not have enough beds; so I cannot say that the patient needs a bed; so I diagnose a condition that allows me not to recommend admission’
- ‘Clinicians in mental health seem to want to do the dirty work of politicians’

National Confidential Inquiry into Suicide and Homicide by People with Mental Illness

- From Death We Learn.

Key Elements of Safer Care in Mental Health Services:

1. Safer wards (removal of ligature points, reduced absconding, skilled in-patient observation).
2. Care planning and early follow-up on discharge from hospital to community.
3. No 'out of area' admissions for acutely ill patients.
4. 24 hour crisis resolution/ home treatment teams.
5. Community outreach teams to support patients who may lose contact with conventional services.

Key Elements of Safer Care in Mental Health Services:

1. Specialised services for alcohol and drug misuse and “dual diagnosis”.
2. Multidisciplinary review of patient suicides, with input from family.
3. Implementing NICE guidance on depression and self harm.
4. Personalised risk management, without routine checklists.
5. Low turnover of non-medical staff.

Key Elements of Safer Care in the Wider Health System:

1. Psychosocial assessment of self-harm patients.
2. Safer prescribing of opiates and anti-depressants.
3. Diagnosis and treatment of mental health problems especially depression in primary care.
4. Additional measures for men with mental ill-health, including services online and in non-clinical settings.

Drug Induced Psychosis

- “It’s not our problem”.
- Stigma.
- Huge problem.

Co-morbidity

- Chicken or egg?
- Drugs or mental disorder?
- 2 problems- 1 person- where to get best help?

Navigating The Maze

- A single point of mental health triage.
- Emergency Departments.
- “No wrong door”.
- Headspace model.

No Wrong Door?

- ECT.
- CTO.
- Drug induced psychosis.

Emergency Departments

- Busy, noisy, not mental health friendly.
- ?Detox areas.
- Mental health areas

Headspace model

- The National Youth Mental Health Foundation providing early intervention mental health services to 12-25 year olds, along with assistance in promoting young peoples' wellbeing. This covers four core areas: mental health, physical health, work and study support and alcohol and drug services.
- The centres are there to help people access health workers- whether it's a GP, psychologist, social worker, alcohol and drug worker, counsellor, vocational worker or youth worker.

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Proposal

- Single mental health triage, for all services.
- Adult 'headspace' services- ie a one stop shop.
- Improved data sharing, ?patient thumbdrive.
- Specialist mental health emergency service.