



PREDICT



World Psychiatric Association



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World Psychiatric Association
Thematic Conference

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DEPRESSION AND OTHER COMMON MENTAL DISORDERS IN PRIMARY CARE

CONFERENCES AND EXHIBITIONS CENTRE
18 - 21 JUNE, 2008 - GRANADA, SPAIN

Organizers



Sociedad Española de Psiquiatría



Grupo Andaluz de Investigación en Salud mental. Universidad de Granada
GASAM



Sociedad Española de Medicina Familiar y Comunitaria

GP Clinic

Dr Charles Alpren

Teresa Luland

Literature Review

- International and local studies (Phelan et al 2008, Hodgson et al 2007, Mackin et al 2007, Sane Australia 2008) conclude that mortality rates from physical illnesses for those with mental health issues is significantly higher than the general population

Contributing Factors

- People with serious mental illnesses less likely to report physical symptoms
- Actual signs and symptoms:
 - cognitive impairment
 - isolation
 - depressed mood etc

Contributing Factors

- Lifestyle factors
- Difficulty in accessing services
- Difficulty in paying for health services
- Communication difficulties
- Transport difficulties
- Lack of consultation time
- Services working independently

The Clinic - Objectives

- Improve the general medical care of people with a mental illness
- Address equity and access issues
- Use standardised measures to track physical and mental health
- Empower clientele

Structure of the Clinic

71% of our clients could not nominate a GP

- All clients are bulk billed
- All clients are given double appointments
- Clients are contacted and reminded of their appointment time by case manager
- Transport / child care issues are identified

Services

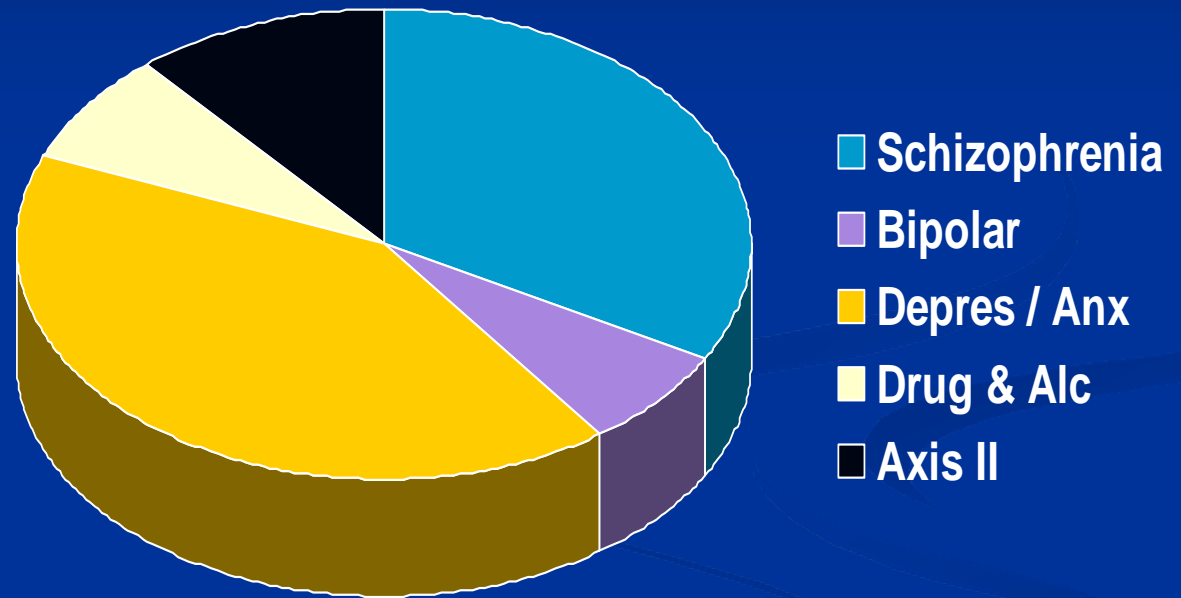
- Baseline physical investigations (e.g. blood tests, ECG etc)
- Seasonal interventions e.g. influenza shots
- Lifestyle issues addressed e.g. smoking cessation, dietary information
- Medication reviews
- Mental Health Assessments
- Other physical health needs

Results

- Approx 90 clients seen on first ten months
- 71% of these had not previously engaged with a GP
- Physical issues identified included : smoking, obesity, cardiac anomalies, hypertension, hypercholesterolemia, osteopenia
- Referral to other services made as required

Who We See

- 91 people
- 71% no prior GP
- Male: Female 1:1
- 77% smokers

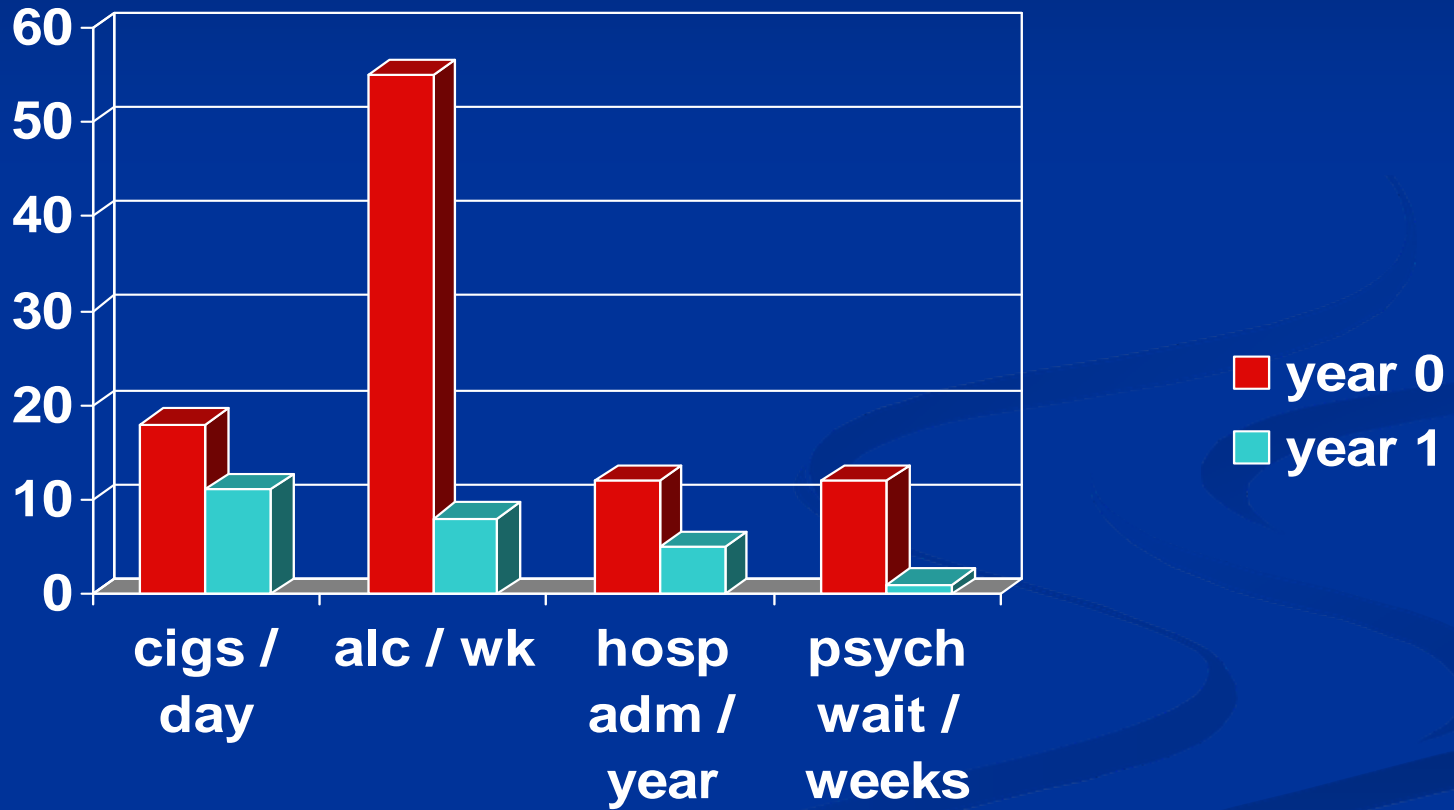


A Snapshot

- Random analysis of 15 clients:
 - 82% reduction in alcohol use
 - 52% reduction in cigarettes smoked
 - A reduction in exercise
 - Pre clinic 15 admissions to a hospital
 - Post clinic 4 admissions to a hospital

Changes over Year 1

Year 1



Why did the K-10s Worsen?

- “I thought you’d use it to schedule me.”
- “I just thought it was another useless piece of paper.”
- “I didn’t think you’d look at it until you started asking me about last month’s.”

Outcomes

- Increased number of clients reached and serviced
- Physical health issues identified and care plan in place
- A change in behavior of clients as self reported by standardised measures and by other lifestyle changes

Outcomes

- A change in the VMO – Psychiatrist capacity to service clients
- An increase in service response
- A change in organizational capacity
- An improved relationship between the mental health service and local GPs
- Minimal setup costs
- A change in the way we use measures



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