

Representatives of TKC Participate in Mental Health Summit

June 8, 2015 – Providence Journal: Summit examines ways to deliver proper treatment to R.I.'s mentally ill (by Journal Staff Writer Rich Salit).

WARWICK, R.I. — Recognizing that the state is falling short when it comes to caring for people with behavioral health problems — and too often imprisoning those struggling with addiction and mental illness instead of treating them — Governor Raimondo and other top state officials convened a day-long conference on Monday to discuss what's wrong with the state's health-care system and to identify potential solutions.

Close to 250 health care and social service providers heeded a call to attend the "Rhode Island Mental Health Summit," hosted at The Radisson Hotel by the Department of Behavioral Healthcare, Development Disabilities and Hospitals and its new director, Maria Montanaro.

It was a day to listen to experts from out of state describe programs that are being held up as models for improving mental health care and for those on the front lines here in Rhode Island to gather in small groups and come up with ideas for how Rhode Island can do a better job.

At the heart of the problem is how people with mental illness or substance abuse issues — or both — fail to get the care they need for their physical well-being, including coping with chronic and costly conditions such as diabetes, high-blood pressure and asthma, speakers said.

Meanwhile, when their behavioral struggles lead to public incidents, they often land at the Adult Correctional Institutions, driving up prison costs while not getting the appropriate type of care.

Isolating inmates

"As soon as someone mentally ill comes through our doors, they are considered an inmate, not a patient," said A.T. Wall, director of the state corrections department.

He said studies indicate that one in nine inmates is "severely mentally ill." With safety being the number one priority, prison officials are focused on "stability, order and predictability."

"As a result, we isolate people we have difficulty controlling to keep the rest of the population calm," he said, explaining how those with mental illness can easily wind up in some of the most difficult conditions at the prison.

Wall said his staff includes medical experts in behavioral health who take a team approach to managing inmates with mental illness. Nearly two dozen of the team members raised their hands to show that they were present for the summit.

"I do believe our staff has a commitment to treating mentally individuals," he said, but added, that "doesn't change the fact that ... mental health disturbance ... is another risk to security." The goal, he said, would be "to address the illness so they don't arrive at our doors."

Alternatives to jail

That set the stage for former Superior Court Judge Judith Savage, who spent 20 years on the bench and now is at Roger Williams University Law School focusing on mass incarceration, to talk about ways to prevent people with behavioral health problems from repeatedly returning to jail.

"You have been shoveling against the tide," she said, urging the state to expand efforts that have begun on a small scale here, and on a larger scale in other states.

Among the initiatives she touted are training police officers on options to simply arresting people with behavioral problems and establishing so-called "mental health courts" and "crisis intervention teams" that attempt to divert defendants out of the judicial system and into treatment.

While Rhode Island may have long ago succeeded in eliminating a system that relied on placing people with behavioral health problems into mental institutions, it now has created another problem.

"The ACI is not only our state prison, it is our largest mental hospital," she said. "I see brokenness. I see a broken mental health system, broken people. I don't see justice. I see injustice."

The summit also featured a presentation by Charles Cutler, chief medical officer of Magellan Complete Care, a Medicaid health plan in Florida that has been working with behavioral health care providers to integrate primary care into their practices. A two-year program funded through the Affordable Care Act has been making progress but will continue to need the investment of state funds to mature and succeed in cutting down on costly medical expenses for untreated chronic conditions.

Dale Klatzker, president and CEO of The Providence Center, said that the life span of people with behavioral health problems can be 13 to 30 years shorter than average and cited related statistics that he called "indefensible" and about which too many people "have been largely silent."

Echoing other speakers who emphasized the need to deal with social problems such as inadequate housing and education, Klatzker said, "Treatment works and is essential, but [addressing] the social determinants, that's the secret sauce of all of this."

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