Kalamazoo Collaborative Care Project: Its Beginnings & Potential to Save Lives

Mental health support is often inadequate for those without good insurance, but access to care can be equally elusive to those with financial means and medical insurance due to lack of integration of medical and psychiatric care. This was painfully evidenced several years ago when two prominent Kalamazoo leaders, Jim Field, and Tom Harding died by suicide while struggling with severe mental health issues. The severe shock to their families and so many in the community became a catalyst for action. As a tribute to these two gentlemen a task force was formed to focused on

- Early identification / determination of severity of mental health issues presenting in general medical practices.
- Integrating care to include the patient, the family and the practicing physician with timely access to psychiatric consultation, ongoing case management and care navigation.

With the help of the University of Michigan Depression Center, a survey was conducted to identify service gaps for adults experiencing mental health issues across a broad spectrum of individuals and families seen in general practices in Kalamazoo County. Local health care providers and mental health advocates met to develop the scope of the project and assess its feasibility. Initial funds in the amount of $100,000 were raised to support the needs assessment, launch efforts and staffing in order to maintain momentum for implementation. Many prominent mental health professionals were interviewed and mental health support systems studied. Online surveys of area adult primary care physicians were conducted and in-depth interviews with a representative sample of these providers followed. The surveys and interviews explored the challenges mental health and medical providers face in delivering care to patients struggling with various complex mental health concerns. Gaps in services were further analyzed and providers' perceptions of the value of several potential new programs were gauged.

With this information ideas were generated including collaboration with WMU Homer Stryker MD School of Medicine, the University of Michigan Depression Center, both Bronson and Borgess Healthcare systems and the Kalamazoo Community Mental Health and Substance Abuse Services. With the tireless efforts of the steering committee and the leadership of Susan Brown, Drs. Lia Gaggino and David Dunstone, and the Harding and

KCCP Steering Committee
Susan Brown
Lia Gaggino, MD
Cindy Gaines
Rosemary Gardiner
Tim Harding
Beth Ann Meints
William C. Melvin
Dianne Shaffer, LMSW
Robert Strung, MD
Perry Westerman, MD
Field families and their close friends, strategy took shape. Collectively, the group took some solace in the creation of "Kalamazoo Collaborative Care Project” dedicated to integrating mental health screening and case management as part of routine primary health care visits, creating availability of a consulting psychiatrist and mental health care manager to primary care providers within the individual medical practice. Rooted in evidence based medicine, this concept has been proven to lower overall cost of care and improve patient outcomes by managing mental health issues in the primary care setting. The University of Michigan and University of Washington have both been very successful with similar programs in place for 10 years.

As a community effort the Kalamazoo Collaborative Care Project is headquartered at WMU Homer Stryker MD School of Medicine's Department of Psychiatry and will continue to consult with the University of Michigan Depression Center. Core partners include Borgess Health, Bronson Healthcare, and Kalamazoo Community Mental Health and Substance Abuse Services.

KCCP has come a long way to develop an excellent program that will help to not only improve peoples' lives in the Kalamazoo area but in fact save lives as well! Financial support of $150,000 is now needed to launch the first primary care site in Kalamazoo which has now been selected. Our targeted start date for staffing is 2/1/18. As successful experience is gained in the pilot clinic location, the program will promptly expand to other primary care practices in our community. Individual, Corporate, and Foundation gifts to this project will provide working capital funds to support the current Project Manager, the first Mental Health Care Manager, Consulting Psychiatrist, and implementation tools to monitor and evaluate the program.

Through the expansion of services to additional clinics and in partnership with primary care offices’ billing departments, it is expected that the program will become self-sustaining in two to three years. The steering committee will continue to monitor and assist as various clinics join the program.

Your generous support of this innovation in delivery of integrated mental health supports and access to Psychiatric consultative services for adults in our community is a strong investment in the wellbeing of our community – and will save lives.

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