

It Dokkumer Lokaaltsje

Collaborative care in a rural area

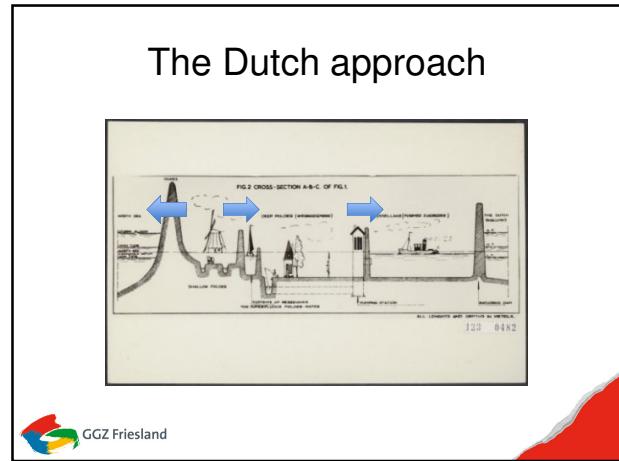
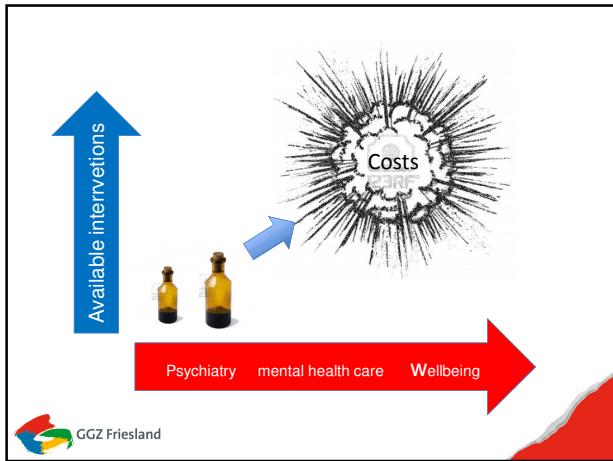
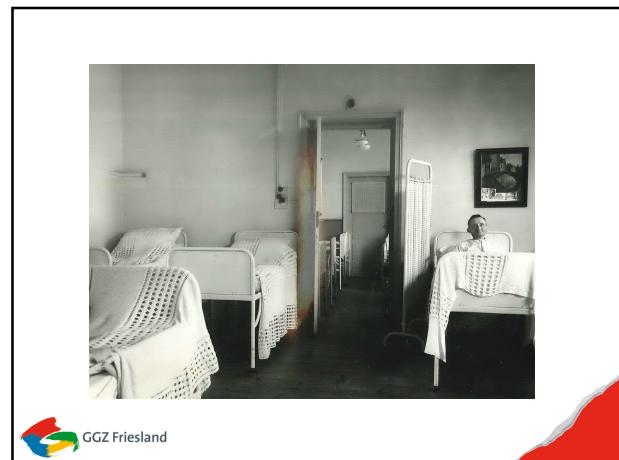
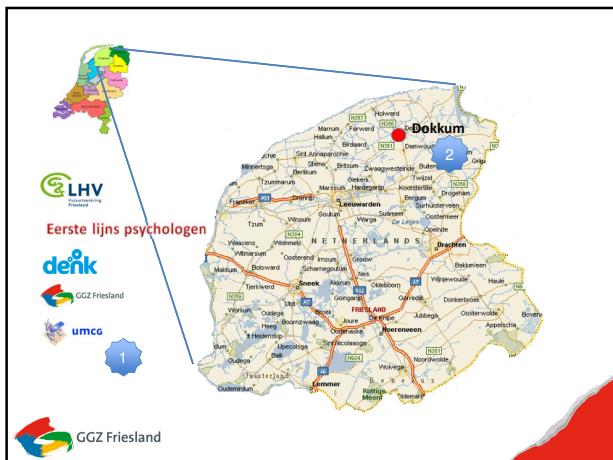
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Sybolt Okke de Vries

GGZ Friesland



Disclosure slide Sybolt Okke de Vries

Conflict of interests	None
Relevant relationship with companies	None
<ul style="list-style-type: none"> • Sponsoring or research money • Fee or other reimbursement • Shareholder • Other relationship, namely ... 	<ul style="list-style-type: none"> • • • •



The Dutch approach



Mental Health Care settings post 1/1/2014



Selfcare (SC)



General practitioner+nurse (GP)



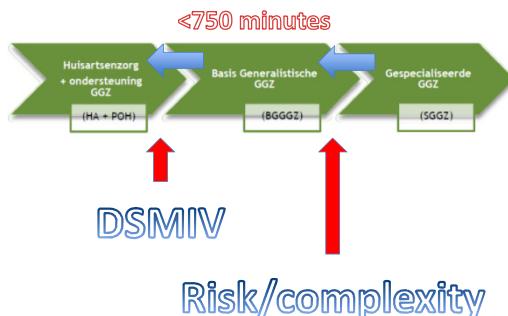
Basic Mental Health Care (B-MHC)



Specialized Mental Health Care (S-MHC)



Proposed referral criteria



One size fits all

DSM	Eind	Risico	Complexiteit	Duur	Chronisch	Product / behandelduur
Klachten	subklinisch	laag	geen/laag		Nee	Huisartsenzorg/PDH-GGZ preventie/ online zelfhulp
Klachten	licht	laag	geen/laag	< 3 mnd	Nee	Huisartsenzorg/PDH-GGZ preventie/ online zelfhulp
DSM	licht	laag	geen/laag		Nee	Basis GGZ kort
DSM	matig	laag	geen/laag		Nee	Basis GGZ middel
DSM	matig	matig	geen/laag		Nee	Basis GGZ intensief
DSM	ernstig	laag	geen/laag		Nee	Basis GGZ intensief
DSM	ernstig	matig	geen/laag		Nee	Basis GGZ intensief
DSM	ernstig	laag/matig	geen/laag	Ja, < 5 jaar		Basis GGZ chronisch
DSM	matig	laag/matig	geen/laag	Ja, < 5 jaar		Basis GGZ chronisch
DSM	ernstig	laag/matig	geen/laag	Ja, > 5 jaar		Basis GGZ chronisch
DSM	licht/ernstig	hoog	geen/laag/hoog			Gespecialiseerde GGZ
DSM	licht/ernstig	laag/matig/ernstig	laag/matig/hoog			Gespecialiseerde GGZ



Maximizing Cost effectiveness

$$\text{Cost effectiveness ratio} = \partial E / \partial C$$

	SC	GP	B-MHC	S-MHC	Total E
Individual 1	$\partial E_1 / \partial C_1$	$\partial E_2 / \partial C_2$	$\partial E_3 / \partial C_3$	$\partial E_4 / \partial C_4$	$B_1 \cdot \partial E_1 / \partial C_1$
Individual 2	$\partial E_1 / \partial C_1$	$\partial E_2 / \partial C_2$	$\partial E_3 / \partial C_3$	$\partial E_4 / \partial C_4$	$B_2 \cdot \partial E_3 / \partial C_3$
Individual 3	$\partial E_1 / \partial C_1$	$\partial E_2 / \partial C_2$	$\partial E_3 / \partial C_3$	$\partial E_4 / \partial C_4$	$B_3 \cdot \partial E_2 / \partial C_2$
...
Individual p	$\partial E_1 / \partial C_1$	$\partial E_2 / \partial C_2$	$\partial E_3 / \partial C_3$	$\partial E_4 / \partial C_4$	$B_p \cdot \partial E_4 / \partial C_4$



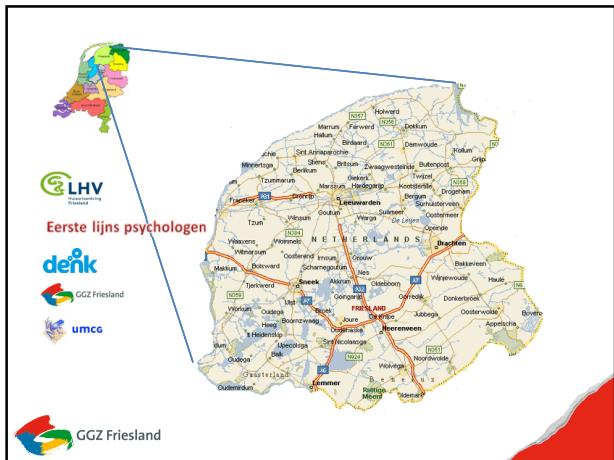
Optimal referral criteria

- Unless we assume that

$$\partial E_1 / \partial C_1 > \partial E_2 / \partial C_2 > \partial E_3 / \partial C_3 > \partial E_4 / \partial C_4$$

- We need to address the problem of optimal individual referral





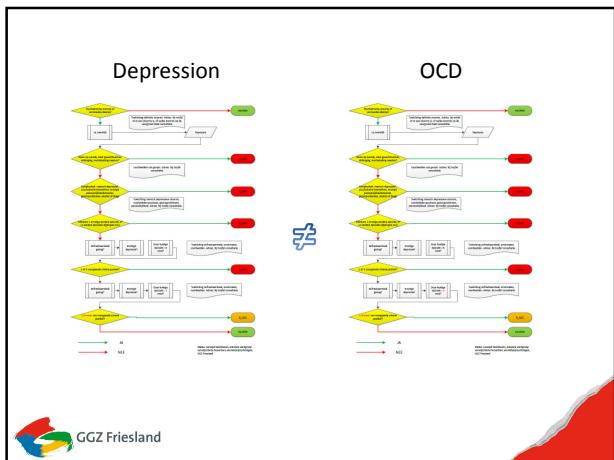
Optimizing referral criteria

Referral criteria based on

- Type of mental disorder
- Characteristics of the disorder (staging)
 - risk
 - complexity
 - history sofar (duration, #episodes)
 - severeness
 - coping
- Prognostic factors (individual profiling)

Phase 1

Phase 2



Research: optimal referral

