

Changing Our World in Alameda County:



A Welcoming, Recovery and Resiliency Oriented, Integrated System of Care

Treatment for people and families with substance use and mental health problems is complex. Traditional "parallel" treatment approaches for both have not been proven to be very successful. Services must be hopeful, strength-based and integrated, and designed to support the *whole* person or family. **Integrated treatment** reduces the risk of poor outcomes and increases an individual's quality of life.

In addition, individuals and families with any combination of mental health and substance use issues are so common that we say **co-occurring issues are an expectation, not an exception**. For that reason, we have to build **co-occurring capability** in an organized manner into every program, and **co-occurring competency** for all staff in the entire system of care. Cultural competency must also be built into professional core competency.

To achieve this objective, **Alameda County BHCS** has recognized the **Comprehensive, Continuous, Integrated System of Care (CCISC) Model** principles, as outlined by Dr. Ken Minkoff and Dr. Chris Cline.

These principles define the core integrated interventions for each consumer as well as the job of each program to provide matched services to its cohort of consumers in the system of care.

Principles of Comprehensive, Continuous, Integrated Systems of Care

Minkoff K, Cline CA, Psychiatric Clinics of North America, December 2004 (Vol. 27, Issue 4, Pages 727-743)

1. Co-occurring issues are an expectation, not an exception, and should be included in a **welcoming** manner in every contact.
2. The core of success in any setting is the availability of **empathic, hopeful, integrated, recovery and resiliency oriented relationships** at any moment in time, and that continue over time.
3. Utilization of the **four quadrant consensus model** based on high and low severity of each disorder.
4. All relationships and programs have the **right balance of support, reward, and expectation** to promote integrated learning.
5. When multiple problems or issues are present, **each problem must be considered primary**, and **skills to manage each** are needed.
6. Interventions for each primary problem must be **matched to phase of recovery, developmental maturation and stage of change**.
7. There is no SINGLE correct intervention or program; **each intervention must be matched according to the principles**.
8. Similarly, successful **outcomes for each problem are individualized** according to the principles.