

“What was typically a three month wait before this partnership went to two weeks’ wait, a significant change.”

—Julie Ohnemus, MD
Family Practitioner

Humboldt County Case Study:

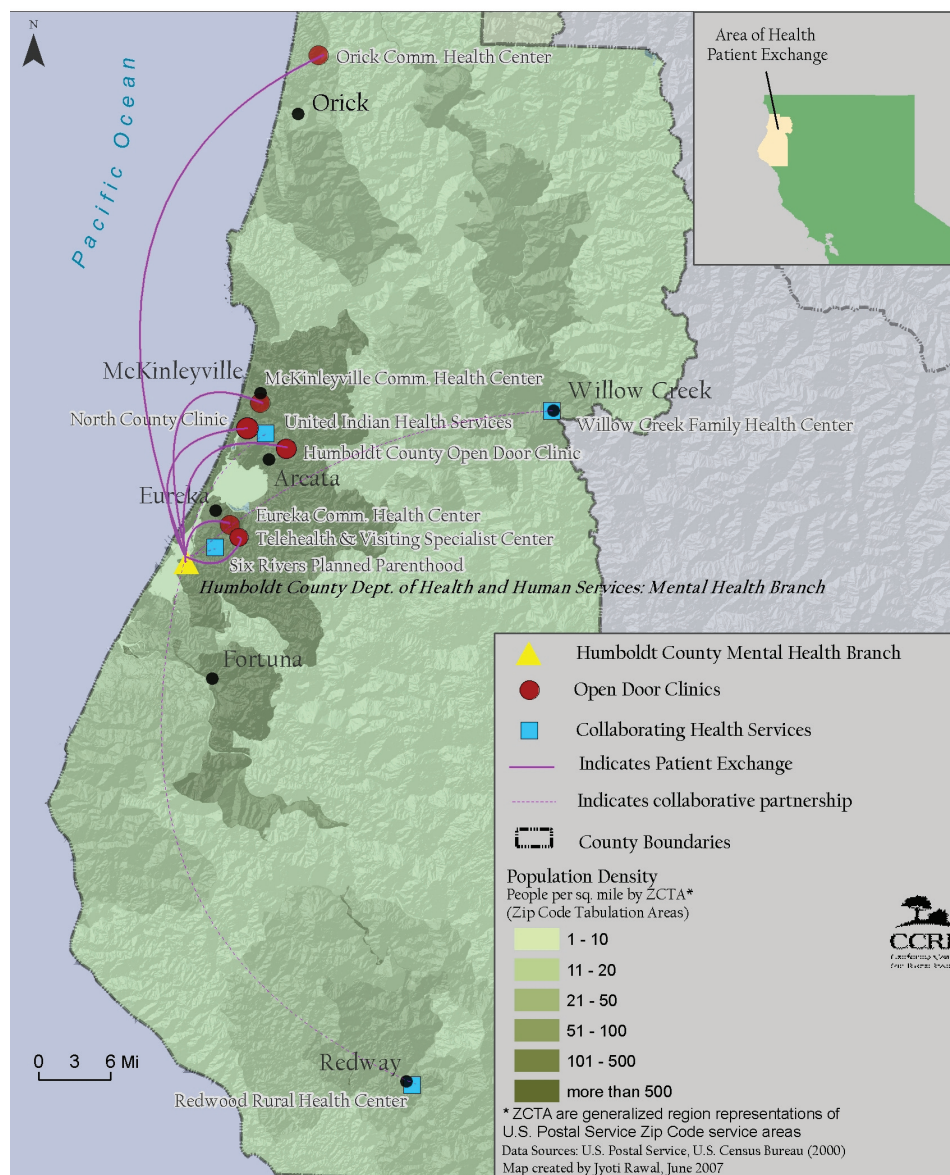
A Partnership to Deliver Integrated Health Care

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Rural residents often live quite a distance from hospitals and health clinics and as a result, getting the necessary medical treatment can be difficult. This is especially true for treatment of mental health problems where the number of people with unmet mental health needs has reached crisis proportions.

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Rural Mental Health Patient Exchange: Northern California



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“One of the fundamental aspects for implementing a similar model is a trusting relationship between the varying players, from county and community clinics to self-help groups to providers.”

—Herrmann Spetzler
Executive Director
Open Door Community
Health Centers

Consider Humboldt County on the north coast of California, where approximately 130,000 people live in isolated pockets spread over 3,600 square miles. There, health professionals have developed an innovative way of sharing scarce health resources in order to provide a high level of care to rural residents.

The Humboldt County Department of Health and Human Services has partnered with the Open Door Community Health Centers, a network of health clinics in Humboldt County, to develop a patient exchange program where those patients needing mental health treatment can get the level of care they need by service providers who are best prepared to provide it. Through the exchange, Open Door patients requiring treatment for more serious mental health disorders are directed to the county’s mental health specialists, and patients who can be treated using behavioral health programs are directed to the Open Door network.

Herrmann Spetzler, executive director, oversees a network of Open Door health clinics that now serves about 38,000 patients, or nearly 30 percent of the county population. Spetzler said the county-community clinic link brings resources together to address a communitywide problem using a much more integrated approach than most traditional health care programs (see map on previous page).

Two years ago, he and Dr. Julie Ohnemus, M.D., a family practitioner who also serves as the network’s mental health director at one of the Open Door Community Health Centers, began looking for a better way to deliver mental

health services. Ohnemus said the partnership is a success, in part because it incorporates a behavioral health treatment model into its care. Behavioral health programs involve social workers, psychologists and other specialists who offer counseling. Because the model allows health practitioners to see more people each day, it results in improved access to primary health care treatment as well as mental health services. “What was typically a three-month wait to get treatment prior to this partnership became a two-week wait; this is a significant change,” Ohnemus said.

Some health organizations are now looking to replicate the patient exchange model as well. For example, elsewhere in northern California other health care providers also are introducing similar behavioral health models into their treatment programs. Northern Sierra Rural Health Network, based in Nevada City, CA for example, has been working for several years to integrate its different areas of health care. In addition, the California Endowment, a private foundation, is funding pilot projects that work toward a more seamless and comprehensive health care system.

This partnership model is especially promising for rural communities where resources are limited. It is likely that successes in mental health treatment, such as this one, will prompt other specialty areas to develop similar models.

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