Joan Smith

I read over the consultant's report and wanted to add a few comments.

I felt while comprehensive, and it offered models and recommendations, there was so much information to absorb and it was difficult in places to follow. I'm not sure who else will be reading the report but I think it would be hard for lay people in the community to understand. Not sure if there will be state wide forums on this, but it would be nice if there was a white paper of sorts developed that capsulizes the main points.

It appears in much of the current integration planning efforts that are going on it is much more between mental health and addictions, and not the emphasis this document has on primary care, and medical and health homes. Seems as the process moves forward that primary care's role and involvement needs to be better understood and integrated.

There is reference to the Recovery / Wellness work being done in Maryland. We also have an ongoing committee that is defining resilience on the child and adolescent side. While these efforts need to be integrated across the Life Span, there needs to also be a specific emphasis on the development needs and stages of childhood that impact on social and emotional competency in youth. I may not be reading this document right, but it appears this is focused only on people with serious and persistent behavioral health needs. Is the intention to set up a separate system of criteria, authorization, and management for those who need early intervention and supports vs. the high end users? I think that while that may work in the adult system, because of the current target populations, it may have the result of further fragmenting the continuum of care in the C & A system. I think any system we design needs to include prevention, wellness, and mental health promotion, not only because it cost less, but it makes for healthier communities. I did not see how this was being framed within a Public Health model?

I'm sure it is probably being addressed elsewhere but I did not see where minority and geographic disparity issues will be addressed, in terms of service access and cost, resources, chronic conditions with poorer outcomes, and a lack of integrated care. Thank you for the opportunity to comment.

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