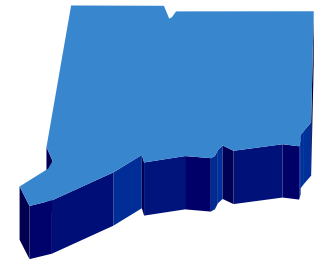


Practical Advice for Serving People with Co-Occurring Conditions

**NASDDDS
2004 Mid-Year Meeting
Reactors Panel**



**Peter H. O'Meara, Commissioner
State of Connecticut
Department of Mental Retardation**

Practical Advice for Serving People with Co-Occurring Conditions



Recent NASDDDS Project Technical Report (April 2003) estimates that 20 – 35% of all persons with mental retardation also have a diagnosable psychiatric disorder.

There is recognition of the need for interagency collaboration to assure the availability of clinical expertise and access to mental health services as needed.

Practical Advice for Serving People with Co-Occurring Conditions



Barriers need to be recognized -

- **Adequacy of financial resources.**
- **A lack of a sufficient number of clinically trained and available practitioners.**
- **There is limited value to formal interagency agreements in and of themselves**

➔ A joint survey issued by NASDDDS and the National Association of State Mental Health Program Directors (NASMHPD) reported that 75% of reporting states have a formal agreement – 43% find them to be less than effective.

Practical Advice for Serving People with Co-Occurring Conditions

Strategies that have been effective in Connecticut -

- **Developing interagency relationships among key professionals.**
- **Provide forums for regular communication at both the state and local level.**
- **Ensure an orientation about each agency to key administrators regarding eligibility, service options, admission criteria, funding, etc.**



Practical Advice for Serving People with Co-Occurring Conditions

Strategies that have been effective in Connecticut (continued)

- **Respond effectively to the organizational needs of both agencies respecting service and budgetary constraints.**
- **Benefit from service planning collaboration and staff training across disciplines and agencies.**



planning