

# Ambulatory care and the mental health services

[Health & Medicine](#), [Mental Health](#)



Adults with serious mental illness and children who have serious emotional problems are part of the mission for the Substance Abuse and Mental Health Services Administration's Center for Mental Health Services (CMHS). SAMHSA (substance abuse and mental health services administration's center for mental health services, according to their principles provides a national leadership forum that "improves quality and availability of treatment for the mentally ill, especially adults with serious illness and children with emotional disturbances.

" They promote managed care systems in order to carry this out. This paper will compare the principles of this system with those of the IOM. SAMHSA promotes two major principles in care and those include quality of care and consumer participation and rights.

In quality of care is included the need to treat all patients with respect and dignity, basing all decisions and treatments on best practice, developing delivery and data collection systems, ensuring that services are tailored to individual needs, established verification processes for credentials, providing a way for providers to resolve disputes, ensure a continuum of care, ensure a wrap around for children, and incorporate targeted prevention activities. Further, they have a set of principles which involve consumer rights and protection.

Plan members should be involved in discerning care, respect should be shown for choice of service, necessary legal and ethical rights, education for all consumers, families, and supporting consumer rights, and ensuring confidentiality. Comparison with IOM In comparing this to the supportive beliefs of the IOM, the primary goals are quality of care and improvement if

not doing away with the inequities of care in this country as well as the ideal of seamless service. These are very important factors in moving care from the treatment of illness to the prevention of illness.

Allowing for a continuum of care as well as a stable base of care is important as well as the need to be able to have testing done that might provide prevention for diseases such as colon cancer. Mental health and community care is also strong in the quality principles that they have applied (IOM. edu). In fact many of the principles of the two areas are well matched. It appears that some of these principles will be seen in the new healthcare also, as it includes prevention as part of the mandatory insurance rules.

For example, many people were unable to have a colonoscopy because of the cost or the copay that will not longer be so as preventative has no cost or copay if you have insurance. Treating Veterans with PTSD The new IOM as well as the SAMHSAC have principles that dictate treatment based on need, respect, and dignity. The new principles in both cases address serious mental illness which would certainly include PTSD. Veterans with mental illness are presently one of the disparity groups and these groups are the ones that the IOM is attempting to bring to attention at this time.

This can only help this group of people. Conclusion The mental health issues in this country, among other very difficult health issues have been on the back burner for some time. With the advent of the new health program and support by these two agencies, there is hope that there will be improvement in this care. SLP Articles The articles chosen were Prevention best Medicine and Health Centers to get 250 million in grants. These two articles seemed to be collaborative articles in solving the same issues.

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Prevention best medicine by Emily Bregel (2010), states that there has been a history of delay in preventative care in the US. This is caused because of the expense of the tests, not covered by insurance or those that have costly co-pay. Under the new healthcare reform law, health insurance plans that begin on or after Sept. 23 must cover recommended preventive services and cannot charge patients co-payments or deductibles. This causes a shift in the type of care that is given from coverage for illness to coverage for prevention of illness.

Many of the larger insurance companies were interviewed and it was felt by most that this would not be a large difference in cost for them as it will decrease costs in the end. This whole change will be better quality care for the patient. Health Center to get \$250 million in grants by Fears (2010) reviews the newer grants that are available for building community clinics in an effort to boost service. Of course, health centers across the country are lining up to get a piece of this money.

Many of which got quite a large grant last time it was offered and because of growth need granted money again. The funding is available under the Patient Protection and Affordable Care Act and is meant to establish medical homes for patients that at this time do not have them. These health centers have been the safety net for the uninsured to provide comprehensive medical care as well as pharmacy, mental health, substance abuse treatment, and dental care. This is a part of the continuum of care as well as a place to use the new prevention funds to stave off chronic illness.

References Bregel, E. (2010). Prevention best medicine. Health. Fears D. (2010). Health Centers to get \$250 million in grants to build clinics, boost  
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services. Washington Post. Principles for Systems of Managed Care. National Mental Health Information Center, (2010) available at <http://mentalhealth.samhsa.gov/> NLM Gateway. (2005). The evidence and recommendations of IOM report for achieving the 6 aims of quality in rural America. Academy Health22 (3876)