

West Midlands Regional development Centre

**Substance Misuse and Acute In-patient
Mental Health Care across the West
Midlands**

Definitions

- The term “dual diagnosis” is generally applied to people who have two disorders
- Combined mental health and substance use problems
- More than “dual problems”- likely to have complex health and social needs
- Wide range of people with varying degrees of need- need individualised treatment

Serious mental illness

E.g. someone with bipolar affective disorder who smokes cannabis twice per week

Table 1

E.g. Someone with schizophrenia and alcohol dependence

Minor substance use

E.G. Someone with anxiety who snorts cocaine occasionally

Severe substance use

E.g. someone with heroin dependency and depression

Minor mental illness

Policy Drivers and related Documents

- Dual Diagnosis Good Practice Guide (2002)
- Inpatient Dual Diagnosis Guidance (2006)
- Standards for Better Health
- NIMHE Suicide Toolkit
- NSF 5 Years On
- Health Care Commission
- The management of Dual Diagnosis in prisons (2009)
- Themed Review in Dual Diagnosis
- NHSLA Risk Management Standards/ Clinical care
- Capabilities Framework

Training and Development

- Dual Diagnosis training is advocated by most policy documents
- Staff should be appropriately recruited and trained for the work they do
- Gap around sustaining capabilities after training
- Need to consider the retention of learning by the use of specialist supervision and support, forums/interest groups

Dual Diagnosis Good practice Guide (2002)

- Mainstreaming
- Develop focused definition of dual diagnosis based on local need and clarify target group of service users.
- Specialist team should provide support to mainstream mental health services
- All staff in AOR must be trained to work with people who experience dual diagnosis.
- Adequate numbers of staff in crisis resolution, early intervention, CMHTs and inpatient services must also have suitable training.
- All services including drug and alcohol services must ensure that clients with SMI and substance misuse are subject to CPA and have a full risk assessment.

Review of the National Service Framework (2004)

- The importance of assertive outreach team and dedicated services for dual diagnosis.
- The need for better collaboration between community drug and alcohol teams and mental health teams.
- Training for mental health staff in the assessment and clinical management of substance misuse.
- The need for intensive efforts to prevent drug misuse, including cannabis use in people with severe mental illness
- The prevention of drug misuse in in-patient units.