

# Consensus Conference on the Mental Health of Emerging Adults

Making Transitions a Priority in Canada

## Facilitated service integration:

Because no one has cornered this market

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The focus of this submission considers the following:  
Concurrent System Transitions in Health and Social  
Services.

What services should exist in an integrated model of  
care? What elements are needed to integrate those  
services? Are there Canadian initiatives that could be  
supported?

# Objectives

## The objectives of this submission are to:

1. Identify the services that youth use which can be integrated to provide seamless care;
2. Discuss how services become integrated and what key elements need to exist for the integration to be successful;
3. Examine an example of integration in practice;
4. Acknowledge need for either national or provincial level oversight to ensure that standards and benchmarks exist.

# What we know

## Let's be clear on the numbers:

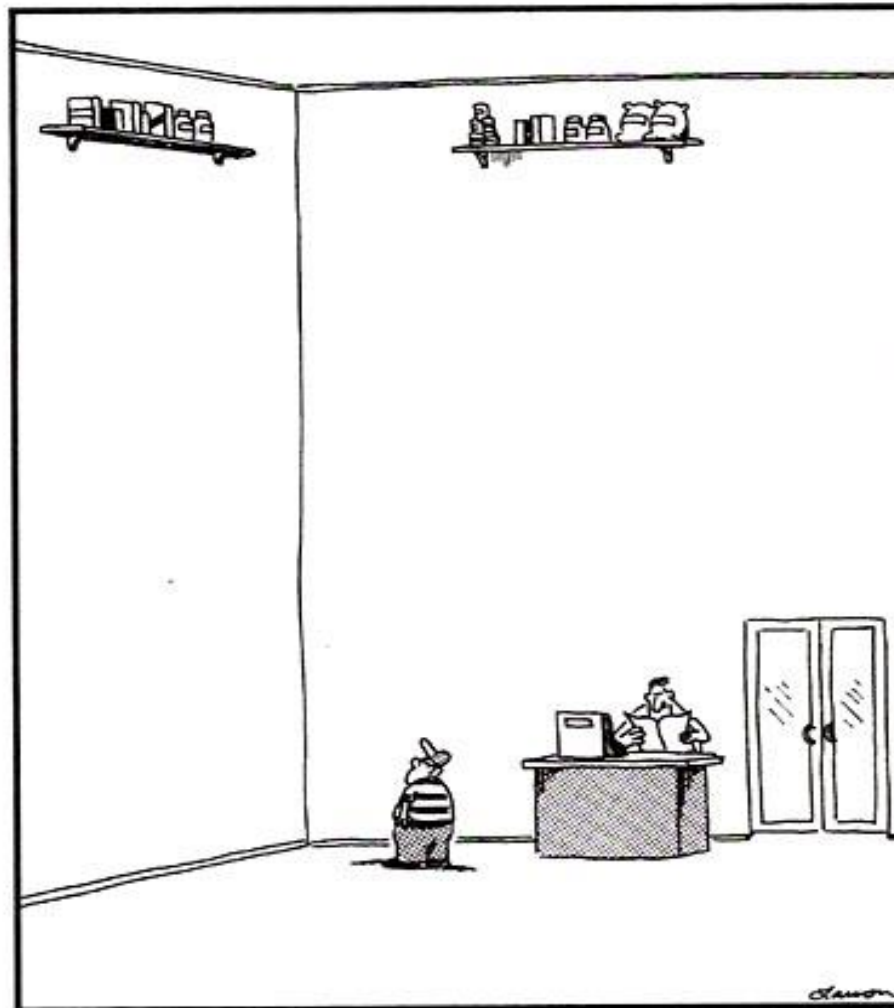
- In British Columbia, 172,000 young people (under 24) sought help for mental ill health or substance use in 2012/13
  - We may have as many as 300,000 young people in need
- Challenge:
  - How do we reach those youth in need?
  - How do they reach us?
  - What are the service touch points?
  - Which services logically clustered offer better outcomes than if separated?
  - Can we get those services working together?

# What we know



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Inconvenience stores

# What we know

## Youth have multiple touch points in various ministries:

- Child and Youth MH (Ministry of Children and Families)
- Emerging Adult MH via Mental Health Teams, PC, ER, Walk in clinics or Counselling (Min of Health)
- Education ( Min of Education )
- Post –secondary ( Min of Advanced Education )
- Income Assistance ( Min Social Development and Social Innovation)
- Housing ( Own Minister!)
- Vocation ( Min SDSI – multiple contracts)

# What we know

## Youth have multiple touch points in various ministries:

- Addictions ( Min of Health- multiple contracts/ addictions)
- Primary Care ( Min of Health- fee for service/physician contract silo)
- Public Health ( Min of Health- Public Health silo)
- Youth Justice ( Min of Justice and Attorney General/ MCFD)
- Aboriginal Services ( First Nations Health Authority/ Local Health Authority)
- Developmental Disabilities ( Min SDSI – Community Living BC)
- Foster Care ( Min of Children and Families)
- Recreation, Leisure and Outreach ( Municipalities)

# What has worked well in achieving positive outcomes during transitions?

## Intersectoral Collaborations - lessons from the frontlines (Saewyc et al.):

1. Championing in multiple organizations e.g. medical leader and a manager;
2. Collaborative visioning e.g. improve access for homeless youth;
3. Establishing values e.g. youth centred; family engagement;
4. Sharing resources e.g. office space, admin time;
5. Putting youths' needs before organizational dogma e.g. policy changes;
6. Frontline workers initiating new lines of services; e.g. group therapy;
7. Collecting common data e.g. outcome metrics



# What has worked well in achieving positive outcomes during transitions?

## Core Principles

(from the Doctors of BC Collaborative for Child and Youth Mental Health and Substance Use - Youth and Young Adult Working Group):

1. Patient/client-centered
2. Integrated and comprehensive
3. High quality
4. Responsible operations

What has worked well in achieving positive outcomes during transitions?



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- Granville -  
**YOUTH**  
HEALTH CENTRE

# Services at the GYHC

Service	Ministry	Model	Access	Hours
Counseling	MOH	Brief 2-4 sessions	Walk-in	M-F 3-6pm Sat*
Primary Care	MOH-physician	NP or GP-unlimited	Walk-in or apt	M-F 1-6pm
Addictions	MOH	MET and substitution*	Walk-in or apt	M-F 3-6pm
Mental Health	MOH	Shared Care and Brief 8 sessions	Referral from PC or Counseling	M-F
Income Assistance	MSDSI	As needed	Walk-in or apt	Tues walk-in M-F
Housing Support	BC Housing	Low Barrier/ Subsidy	Apt and program	Ad hoc

# Services at the GYHC

Service	Target	Model	Access	Hours
Groups	Self-harm and emotional roller coasters	DBT- closed	Referral from Psychiatrist	Tuesdays
	Low mood, anxiety, inattention	MBCT	Referral from PC or Psych	Mondays
	Low mood and anxiety	Photovoice	Self-referral	Mondays
	Addiction	Contingency Management	Intensive Case Management	Tuesdays
	Activities of Daily/Ind living	Life skills education	ICM	M-F
	All youth	Peer Support	Health Centre	M-F
	All youth	Recreation	ICM	M-F

# What has worked well in achieving positive outcomes during transitions?

## Services provided at The Granville Youth Health Centre, Vancouver, BC- ages 12-24

### Intensive Case Management Partners and Links:

- Downtown Community Courts (Justice)
- Youth Rapid Response Team (MCFD)
- Assertive Community Treatment (ACT- MOH)
- Housing- 80 low barrier, 30 subsidies (BC Housing)
- Child and Youth Mental Health Team (MCFD)
- Urban Hospital (St Paul's) ER and inpatient beds (MOH)
- Youth Shelters (shared case management) and Drop- ins (NP)
- Gathering Place ( MEd) and Vancouver Community College ( MAdv Ed.)
- Supported Employment ( MSDSI)

Implications  
#1 is the loneliest number



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# Recommendations

## Create a Branded, National Youth Health and Social Services Network with a Backbone Organization:

1. Build Youth Health and Social Service Centres with services co-located and integrated ***to improve the experience of care and make transitions seamless:***

### ***Fundamental Services\****

- Primary Care – i.e., physical health, sexual health
- Mental Health Services – continuum approach from mental health and wellness to mental illness
- Substance Use Services – harm reduction to treatment approach
- Social Services – i.e., vocational, educational, financial, housing/shelter
- Youth and Family Peer Support and Navigation

\* As determined by the Youth and Young Adult Working Group of the Doctors of BC Collaborative for Child and Youth Mental Health and Substance Use

# Recommendations

## Create a Branded, National Youth Health and Social Services Network with a Backbone Organization:

1. Build Youth Health and Social Service Centres with services co-located and integrated ***to improve the experience of care and make transitions seamless:***

***Ancillary Services\**** (based on local needs and can be a service component or partnership link)

- Financial literacy and skill development
- Recreation
- Food security
- Child care and transportation
- Legal aid

\* As determined by the Youth and Young Adult Working Group of the Doctors of BC Collaborative for Child and Youth Mental Health and Substance Use



# Recommendations

## Create a Branded, National Youth Health and Social Services Network with a Backbone Organization:

2. Develop a national brand linked to a common communication strategy ***to increase acceptability of services;***
3. Build a common research and evaluation platform with a national database ***to better understand and meet the needs of our evolving youth;***
4. Create a national knowledge exchange/translation clearinghouse ***to improve implementation of effective interventions;***
5. Expand and integrate a national e-health service ***to improve availability and affordability of services;***

## Create a Branded, National Youth Health and Social Services Network with a Backbone Organization:

6. Establish national benchmarks (e.g. ACCESS Canada) ***to transform the quality of services provided by our youth:***

Let's measure:

- i. Sense of purpose and wellbeing
- ii. Wait times to see a professional and to see a specialist
- iii. Youth satisfaction with services received
- iv. Family mental health literacy
- v. Prevention efforts as they link to early intervention
- vi. Increased service delivery
- vii. Decreased ER visits/Increased ER diversion/Decreased re-admission rates



## BC Integrated Youth Services Initiative Coming in 2016!!!

- Up to 5 sites- one per health authority
- Backbone Organization
- Branded
- Common Communication Strategy
- Shared Research and Evaluation
- Shared Knowledge Exchange

# Recommendations



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## 200 Youth Health and Social Service Centres

The screenshot displays the Service Canada website interface. At the top, the header includes the Government of Canada logo, navigation links for 'Canada.ca', 'Services', 'Departments', and 'Français', and the 'Service Canada' logo with the tagline 'People serving people'. A search bar is located on the right. The 'Subjects' dropdown menu is open, listing various service categories such as Education and training, Employment, Health, Housing, Immigration, Income assistance, Legal assistance, Personal documents, Savings plans, Special events, Starting a business, and Travel. Below the menu, there are sections for 'I WANT TO' (with links like 'Apply for Employment Insurance') and 'TOP SEARCHES' (with links like 'Canada Pension Plan (CPP)'). A sidebar on the right promotes the 'My Service Canada Account'.

Service Canada  
People serving people

Canada.ca | Services | Departments | Français

Subjects

- Education and training
- Employment
- Health
- Housing
- Immigration
- Income assistance
- Legal assistance
- Personal documents
- Savings plans
- Special events
- Starting a business
- Travel

Subjects - Main page

I WANT TO

- Apply for Employment Insurance
- Complete my Employment Insurance report
- Access or Update Employment Insurance Information
- Apply for Canada Pension Plan Retirement
- Calculate my Retirement Income
- Apply for a passport or renew my passport

TOP SEARCHES

- Canada Pension Plan (CPP)
- Direct Deposit
- Employment Insurance (EI)
- GST/HST Credit
- Job Bank
- Old Age Security (OAS)
- Tax Slips
- Records of Employment (ROE)
- Social Insurance Number (SIN)

My Service Canada Account

Use My Service Canada Account for convenient, fast and secure access to your information.

## In Summary

Backbone Org	Federal	Provincial	Municipal	Service Sector
Oversee Comm. Strategy, branding, research/evaluation and knowledge exchange	Provide Funding for Backbone Organization, Vocational Programs, Disability Workers, E-Health, research/evaluation and Aboriginal Services	Provide staffing for youth justice, education, substance use, mental health, primary care, public health, income assistance and Aboriginal Services in addition to housing	Provide Space for Centres in addition to Outreach staff, Youth Engagement and Wellbeing opportunities	Provide housing support, youth and family navigators, MH and SU programs