

# What is Stepped Care 2.0?



Stepped Care 2.0<sup>®</sup> (SC2.0) is a transformative system of care for organizing and delivering evidence-informed mental health and substance use services. It uses a person-centred, strengths-based, recovery-oriented approach to provide timely, flexible access to a range of options – including formal and informal wellness and mental health services that best meet people’s needs and preferences.

## Background

SC2.0 was developed in Canada by Dr. Peter Cornish, who reimagined the stepped care model first used in the U.K. After being implemented as a campus mental health framework at Memorial University, the Mental Health Commission of Canada (MHCC) led a demonstration project across Newfoundland and Labrador that scaled up the model with positive results: SC2.0 was not only well received by service users and providers, **it contributed to a 68 per cent reduction in wait times.**<sup>1</sup>

The SC2.0 model is now being implemented in other provinces and territories through an MHCC partnership with Stepped Care Solutions which provides support on SC2.0 implementation, training/consultation, project management, evaluation and knowledge exchange.

## What is the value of SC2.0?

Because the failure to meet mental health needs comes at a high cost<sup>2</sup>, SC2.0 offers people access to support when they are ready and comfortable with doing so. That is, the model is designed to best meet people’s needs and preferences through **a range of formal and informal options**, with benefits that providers also share.

## How does it benefit service users and people with lived and living experience?

During their first engagement with the SC2.0 system, people receive an intervention to address their primary concern and are supported by a community of care with meaningful connections and diverse options.

In the MHCC demonstration project, about 80 per cent of clients reported that lower intensity options (such as e- mental health tools, or self-directed resources) met at least some of their needs.

I feel like a new person. The program has helped me moving forward...  
I have hope and happiness back and something to look forward to.

- Service User

## How does it benefit providers?

SC2.0 gives providers more flexibility in their schedules. In the demonstration project, they also saw the model as an effective, evidence-based way to help their practices evolve. As well, providers reported much greater knowledge of the stages of change and more self- confidence to enact change.

The biggest difference with the walk-ins, single session, and e-mental health is that I have more time and flexibility. Clients come in or book a time with me when they want service [which] opens up my schedule.

- Care Provider

<sup>1</sup> Mental Health Commission of Canada. (2019). *Newfoundland and Labrador Stepped Care 2.0 e-mental health demonstration project*. <https://mentalhealthcommission.ca/resource/newfoundland-and-labrador-stepped-care-2-0-demonstration-project-final-report/>

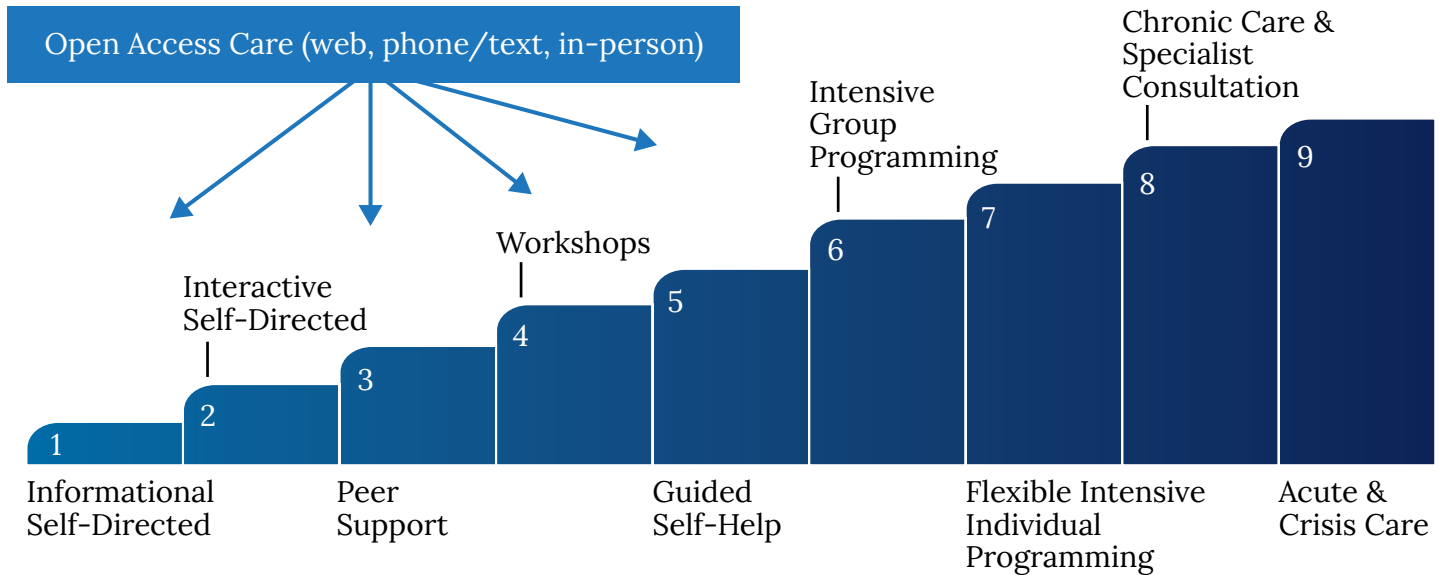
<sup>2</sup> Mental Health Commission of Canada. (2013). *Strengthening the Case for Investing* [Backgrounder]. <https://www.mentalhealthcommission.ca/English/case-for-investing-backgrounder>

## SC2.0 Nine-Step Framework

The SC2.0 model for systems of care is organized around nine steps, which can be populated with diverse, culturally relevant care options.

The steps in the planning framework range from self-directed (lower intensity) services to acute care (higher intensity) services. As intensity increased across the steps, so too does

stakeholder investment (i.e., time, effort and cost), and service user readiness to engage also increases. Service user decision making is greatest in informal, self-directed services and decreases in formal acute crisis services. In acute care, readiness may be low for involuntary hospital admissions.



These services are organized by service user autonomy, and stakeholder investment/service user readiness. See more details here: <https://steppedcaresolutions.com/methodology/>

## Guiding Principles

The foundational values and philosophies upon which the SC2.0 model is built:



Social justice drives effective care systems transformation and is an intervention in itself.



Multiple and diverse care options are required as one approach will not work for everyone.



All individuals and communities have strength and capacity.



People engage with what they are ready to do; gold-standard intervention is that which best fits the service user at any given time.



Professionals do not carry all the wisdom; people often know what is best for them.



Mental health literacy is required for people to make informed decisions.



An effective care system ensures people have access to care when and where it is needed.



The whole is greater than the sum of its parts; the strength of the system relies on multilevel collaboration.



Minimal interventions can produce powerful results.



There is no ideal solution; trial-and-error leads to growth and change.

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