

Research and Evaluation Hypotheses

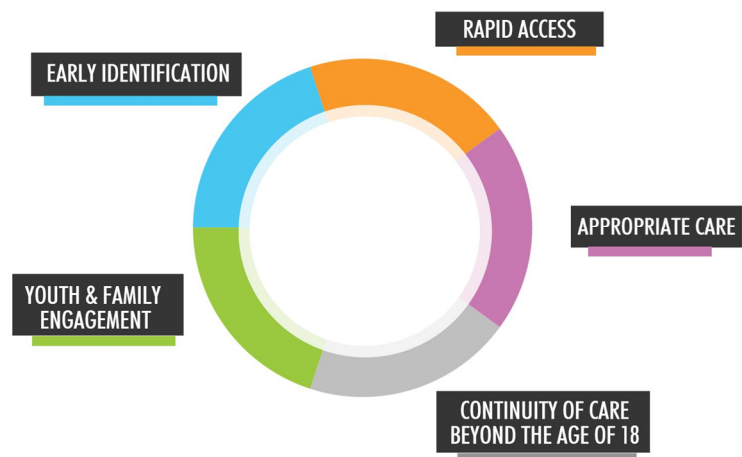
Background

There are 14 ACCESS Open Minds service sites operating in 6 provinces and 1 territory across Canada. Facilitated by the ACCESS OM network, these sites have transformed their existing youth mental health services in diverse ways based on local context and needs. All ACCESS OM service sites are using a common evaluation framework, and collecting common metrics at their sites, as part of the ACCESS OM Evaluation Protocol.

Research hypotheses linked to service transformation objectives

The primary ACCESS OM research hypotheses were designed in parallel with the five ACCESS OM Service Transformation Objectives. Based on the data collected from all sites as part of the ACCESS OM Evaluation Protocol, it is hypothesized that over time, the ACCESS OM service design and delivery framework will accomplish the following:

- Early Identification:** There will be a significant increase in the number of youth being referred for mental health services, accounting for variations in the population of youth in the areas served by sites.
- Rapid access:** The number of help-seeking youth being offered an initial assessment by a trained clinician within 72 hours will increase.
- Appropriate care:** There will be a higher proportion of youth with serious mental health problems whose wait times for appropriate care/interventions meet the modified benchmarks set by the Canadian Psychiatric Association (less than 30 days, except in urgent cases).



Secondary hypotheses

Based on the comprehensive data collected across all ACCESS OM service sites, it is also hypothesized that over time, the ACCESS OM service transformation will provide:

1. **Simpler pathways to care:** Youth will have to make fewer help-seeking contacts before accessing care appropriate to their needs.
2. **Improved youth mental health outcomes:** Youth receiving services at ACCESS OM sites will have better clinical, functional, and subjective outcomes.
3. **Improved satisfaction:** Youth and family member/carer satisfaction with mental health services will be higher among youth and their families/carers receiving services at ACCESS OM sites.
4. **Cost-effectiveness:** Having youth receive services at ACCESS OM sites will contribute to an overall reduction in the cost of providing mental health services to youth, and an overall improvement in youth outcomes.

Evaluation protocol: Local data collection, national scope

