

## Service and Program Evaluation

---

### Background and development

The ACCESS Open Minds Evaluation Protocol was developed following two years of consultation with a number of stakeholders, including youth, families and carers, researchers, service providers, administrators, and policy makers from diverse communities and settings across Canada.

### Purpose

Designed as a cohesive toolkit based on best practices, the ACCESS OM Evaluation Protocol includes validated tools and metrics that have been specially selected to be both clinically relevant in the provision of front-line services and adaptable for communities in diverse contexts. This common protocol is being used at 14 ACCESS OM service sites across Canada.

### Levels and impacts of the ACCESS OM Evaluation Protocol

This toolkit provides real-time, relevant information at multiple levels: for clinicians and other professionals involved in youth mental health care, for administrators in order to inform service planning and delivery, and for policy makers to inform ongoing investment.

#### Individual level: Youth care

- A set of clinical assessment tools that contribute towards supporting youth on their care journey, regardless of the severity of their mental health presentation

#### Service level: Program evaluation

- Real-time performance indicators that allow for continuous monitoring and responsive service design

#### Regional and provincial/territorial level: Informed investment

- Detailed information on: service availability, users, and utilization; performance of individual service providers and teams; wait times; and population needs to help inform planning and future investment

#### National level: Canadian innovation

- Pan-Canadian data set of common indicators from diverse contexts including urban, semi-rural, rural, and Indigenous communities

## Supporting data collection and reporting: Web-based data collection platform

ACCESS OM uses a web-based data collection platform that allows the service sites' clinicians, research staff, and managers/program administrators to input and view data related to service provision, as well as pertinent reports, in real time. To facilitate the mobility of staff in meeting youth where they are comfortable, data and information can be collected directly on a tablet or mobile device without an Internet connection. The ACCESS OM Central Office team offers training and ongoing support for data collection, site-specific reporting, as well as research support. The Central Office team also monitors network-wide performance, and uses the data collected to respond to the project's hypotheses.

## Overview of ACCESS Open Minds indicators and metrics:

	INDICATORS	For service providers	For administrators and service planners	For policy makers
<p><b>Youth profile</b> <i>Who is (and who is not) accessing services?</i></p>	<ul style="list-style-type: none"> <li>✓ Number of youth seen</li> <li>✓ Age</li> <li>✓ Gender and LGBTQQI+ identity</li> <li>✓ Ethnicity, culture, and language(s) spoken</li> <li>✓ Employment, education, and/or training programs</li> <li>✓ Socioeconomic status</li> <li>✓ Housing and living situation</li> </ul>	Provides clinically relevant information (for example: youth resiliency, risk and protective factors, etc.) to inform care	Detailed service user profiles inform service planning and delivery	Indicators based on the Canadian Census (2016) and the Canadian Community Health Survey – Mental Health (2012) allow for comparability within and across communities and populations
<p><b>Care pathway</b> <i>Tracking trajectories of care for youth, from initial help-seeking to appropriate care services</i></p>	<ul style="list-style-type: none"> <li>✓ Dates and number of help-seeking attempts</li> <li>✓ Referral source(s)/how did youth hear about the service?</li> <li>✓ Wait time to access an initial assessment</li> <li>✓ Wait time to accessing appropriate care services (i.e. specialist care), if required</li> <li>✓ Care needs as perceived by youth, and by clinician</li> <li>✓ Availability of local services</li> <li>✓ Effectiveness and appropriateness of intervention/referral service</li> </ul>	Informs current intervention, treatment, and care options for youth	Informs opportunities for integration of services, expansion of partnerships, and programming strengths and gaps	Informs service planning and supports informed resource allocation

	INDICATORS	For service providers	For administrators and service planners	For policy makers
<b>Satisfaction</b> <i>Tracking youth and family/carer satisfaction with their experiences at the service-provision level</i>	<ul style="list-style-type: none"> <li>✓ Session feedback (youth)</li> <li>✓ Service satisfaction (youth and family/carer)</li> <li>✓ Ease of transitions between services (youth and family/carer)</li> </ul>	Session rating supports therapeutic relationship-building with youth	Service satisfaction measured with youth and family/carers informs service planning and design, including targeted programming and partnerships	Indicator of service quality and satisfaction to justify funding decisions
<b>Symptoms</b> <i>Expression of symptoms as experienced by youth</i>	<ul style="list-style-type: none"> <li>✓ Distress</li> <li>✓ Mental health</li> <li>✓ Behaviour</li> <li>✓ General health</li> <li>✓ Suicidality</li> <li>✓ Substance use and misuse</li> <li>✓ Severity of symptoms</li> </ul>	Innovative clinical toolkit to support the collaborative development of intervention and / or treatment goals/plans with youth regardless of the severity of presenting concern	Ensures that clinical care is supported by current best practices; consensus decision processes allow clinical teams to collaboratively determine optimal care options with youth and their family/carers	Supports use of validated, clinical tools being used in diverse contexts, including Indigenous communities, across Canada
<b>Functioning</b> <i>Assessment of youth functioning in their daily life</i>	<ul style="list-style-type: none"> <li>✓ Resilience</li> <li>✓ Personal goals</li> <li>✓ Quality of life</li> <li>✓ Well-being</li> <li>✓ Social, occupational, and educational functioning</li> </ul>			

**For more information about ACCESS Open Minds, visit [www.accessopenminds.ca](http://www.accessopenminds.ca)**

SPOR network funded by the Canadian Institutes of Health Research (CIHR) and the Graham Boeckh Foundation

