

ACCESS Open Minds

Transformation, Collaboration and Diversity in Youth Mental Health

Ashok Malla, Alan Stevenson, Daphne Hutt-MacLeod and Cindy Gerdes

CMHA - October 22, 2018



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



Welcome to ACCESS OM

▶ **3** presentations that highlight the **Transformation, Collaboration and Diversity of ACCESS OM**

1. A brief overview of the ACCESS OM project and what makes us different, highlighting the perspectives of **3** ACCESS OM sites in Ontario, Nova Scotia and Alberta
2. A presentation and interactive activity presented by ACCESS OM national youth council members on youth engagement and the building of a diverse youth council
3. ACCESS EO Parc-Extension (Montréal, Québec) vous présentera l'importance de l'espace jeunesse (youth space)

ACCESS Open Minds is for Youth (11-25):

A national research and evaluation network transforming **(from within)** youth mental health care across various geographic, cultural and other contexts in Canada through:



Generating new
knowledge &
evidence



Creating a pan -
Canadian
network

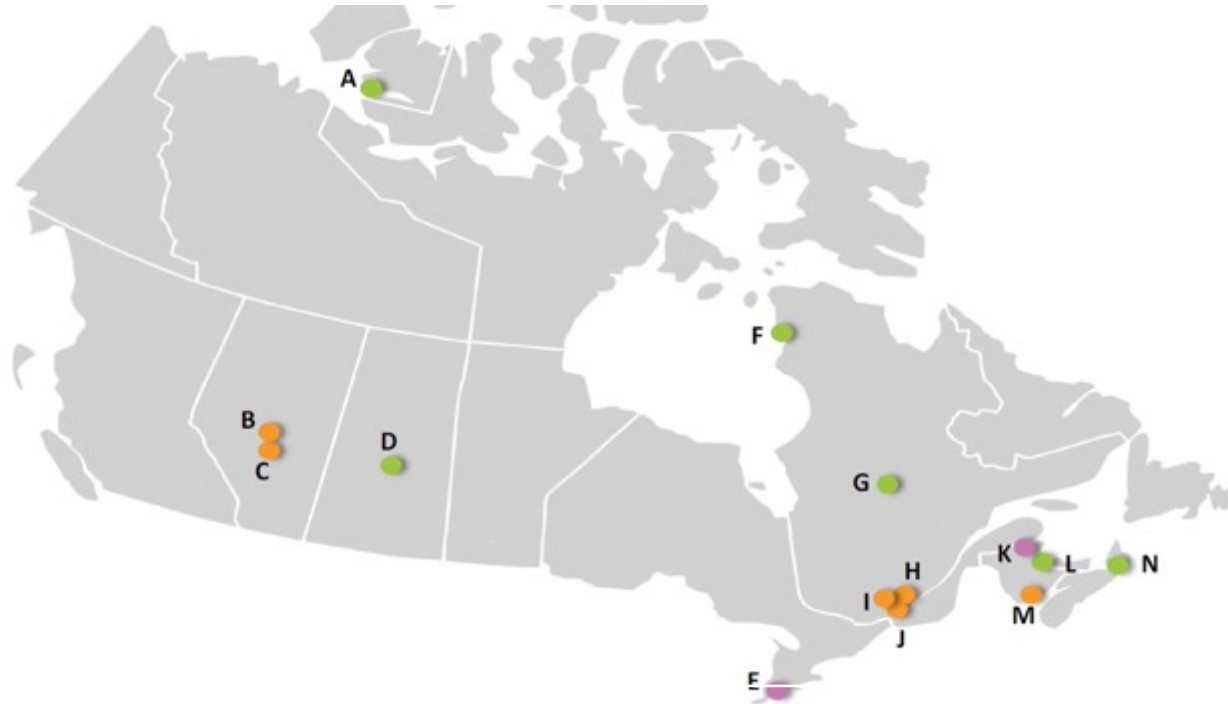


Providing high
quality mental
health care &
services



Involving young people
& their families/carers

ACCESS Open Minds Service Sites and Network:



- Indigenous Community
- Urban Community
- Semi-Urban/Rural Community

- A:** Ulukhaktok, NT
- B:** Edmonton, AB
- C:** University of Alberta, AB
- D:** Sturgeon Lake First Nation, SK
- E:** Chatham-Kent, ON
- F:** Puvirnituk, QC
- G:** Cree Nation of Mistissini, QC
- H:** Dorval-Lachine-LaSalle, QC
- I:** Parc-Extension, QC
- J:** RIPAJ-Montréal, QC
- K:** Province of New Brunswick (P.E.E.R Saint John, Péninsule Acadienne, Elsipogtog First Nation)
- M:** Acadienne, Elsipogtog First Nation
- N:** Eskasoni First Nation, NS

Project Components

▶ Service Planning

- ▶ Strengths-based planning process, tools, and ongoing support that builds on a community's existing resources to transform youth mental health services

▶ Service Delivery

- ▶ Staffing model, service delivery framework, and training to provide youth with an initial assessment within 72 hours of seeking help, and if needed, referral to external services within 30 days.

▶ Service & Program Evaluation

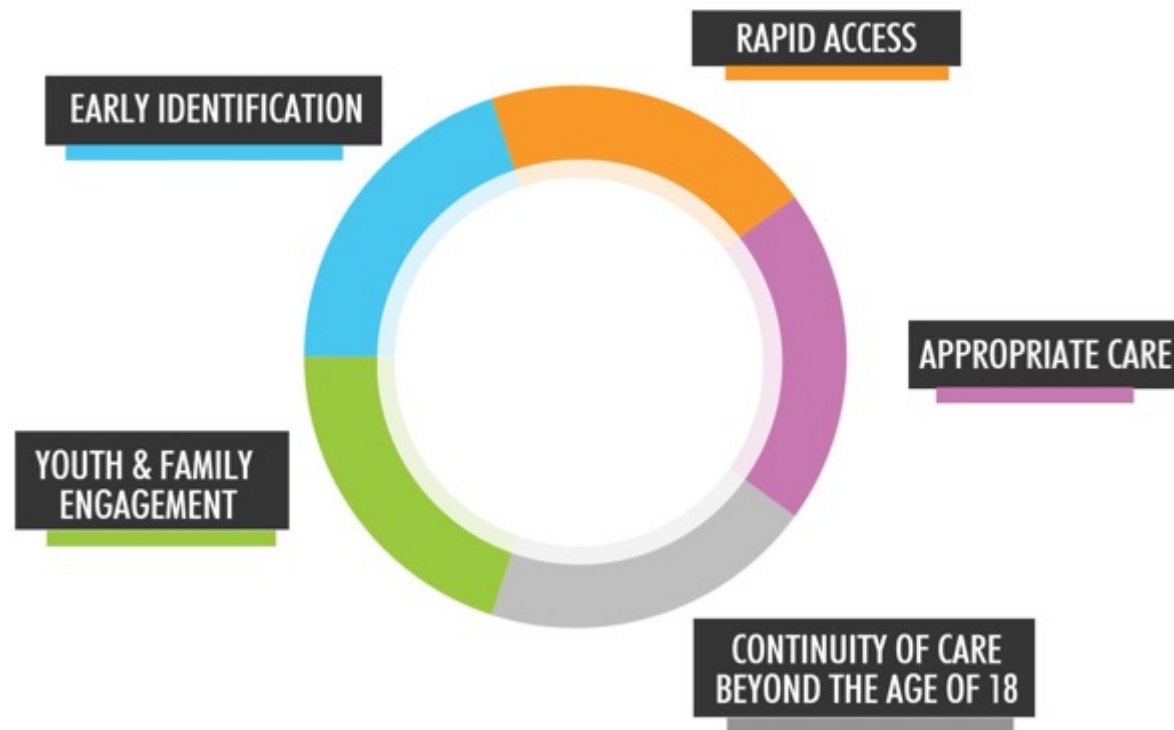
- ▶ Assessment toolkit that provides real-time, relevant information at multiple levels: for clinicians and other professionals providing front-line services to youth, for administrators to inform service planning and delivery, and for policy makers to inform ongoing investment.

▶ Research & Advancing Knowledge

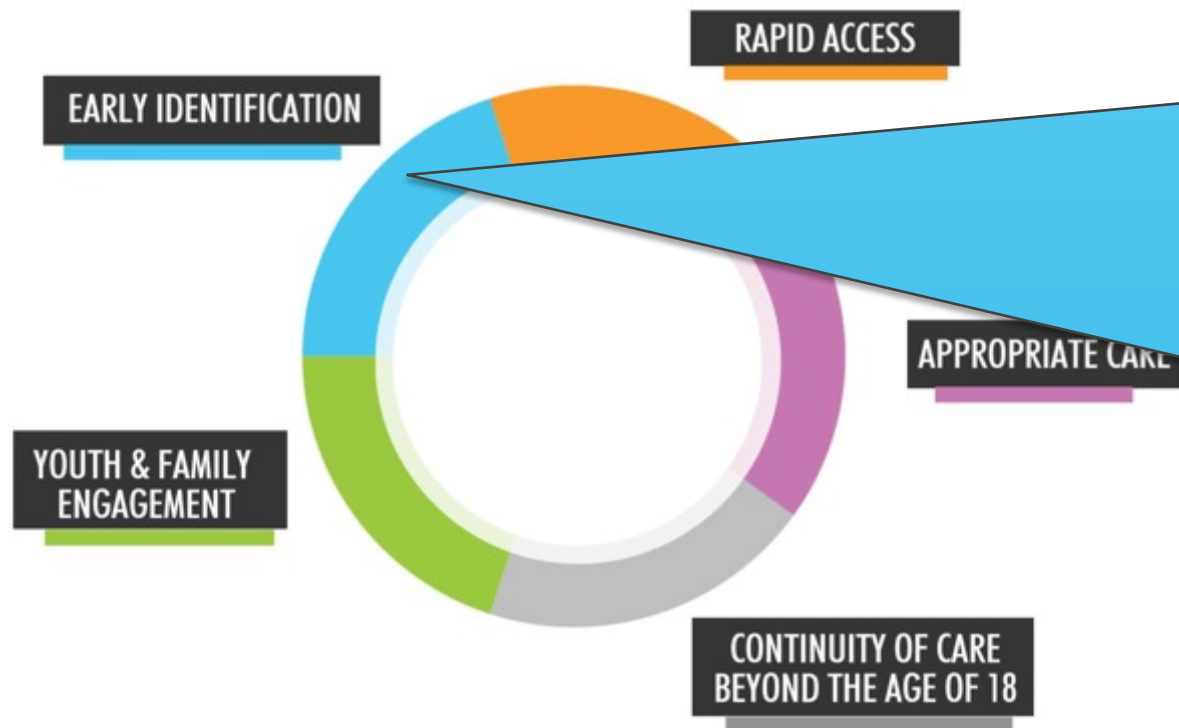
- ▶ Data collected through the ACCESS OM project will create a national data set of common indicators that will help fill current gaps in knowledge about what works in youth mental health care in Canada.



Service Planning: Transformation Based on 5 Core Elements



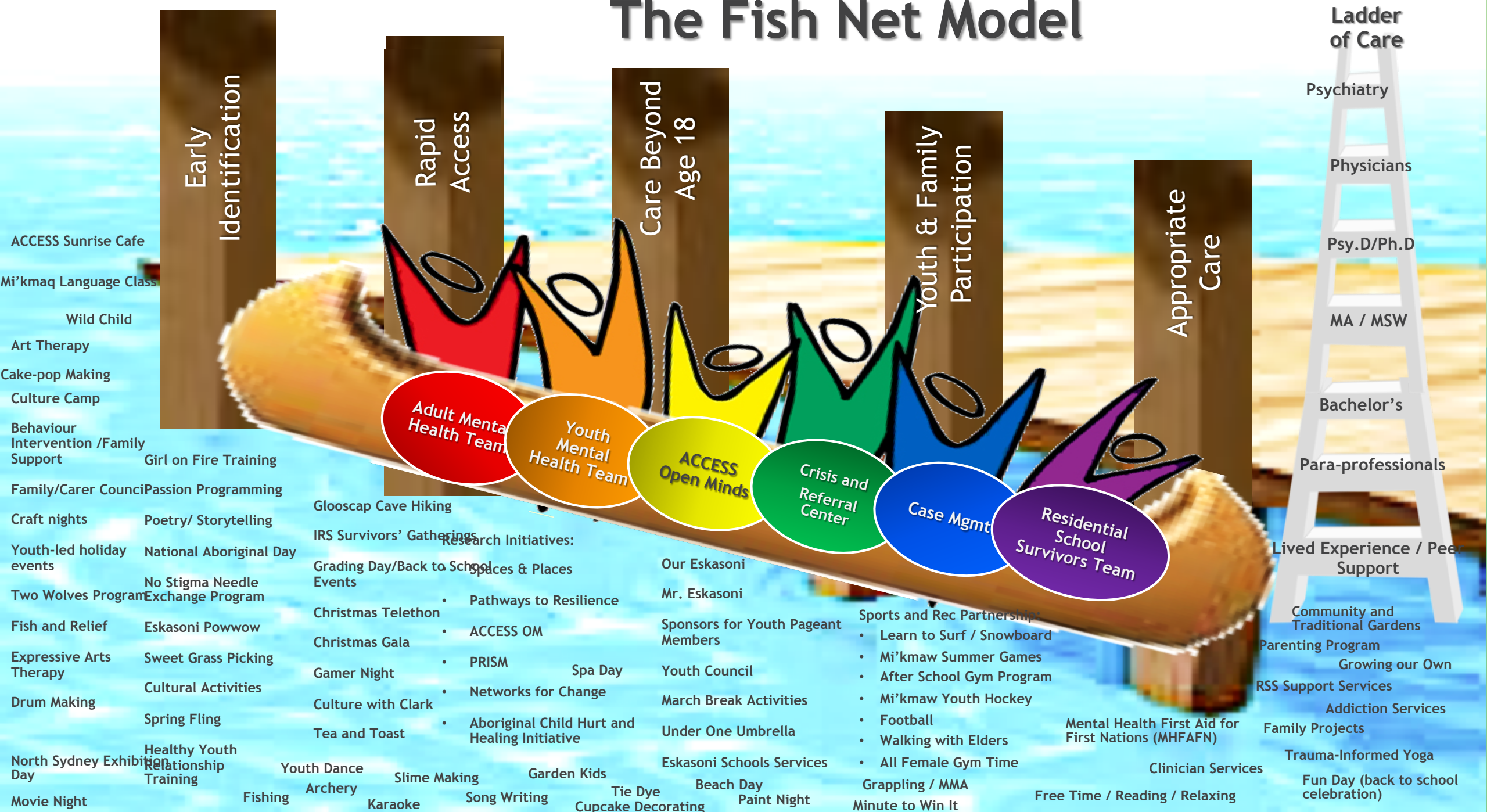
Service Planning: Transformation Based on 5 Core Elements



PRINCIPLE:
Targeted activities that support help-seeking as soon as possible.
Built in evaluation to ensure that effectiveness is being continuously monitored.

Over to you DaphneEskasoni, NS

The Fish Net Model



Early Identification

Rapid Access

Care Beyond Age 18

Youth & Family Participation

Appropriate Care

Ladder of Care

- Psychiatry
- Physicians
- Psy.D/Ph.D
- MA / MSW
- Bachelor's
- Para-professionals
- Lived Experience / Peer Support

Adult Mental Health Team

Youth Mental Health Team

ACCESS Open Minds

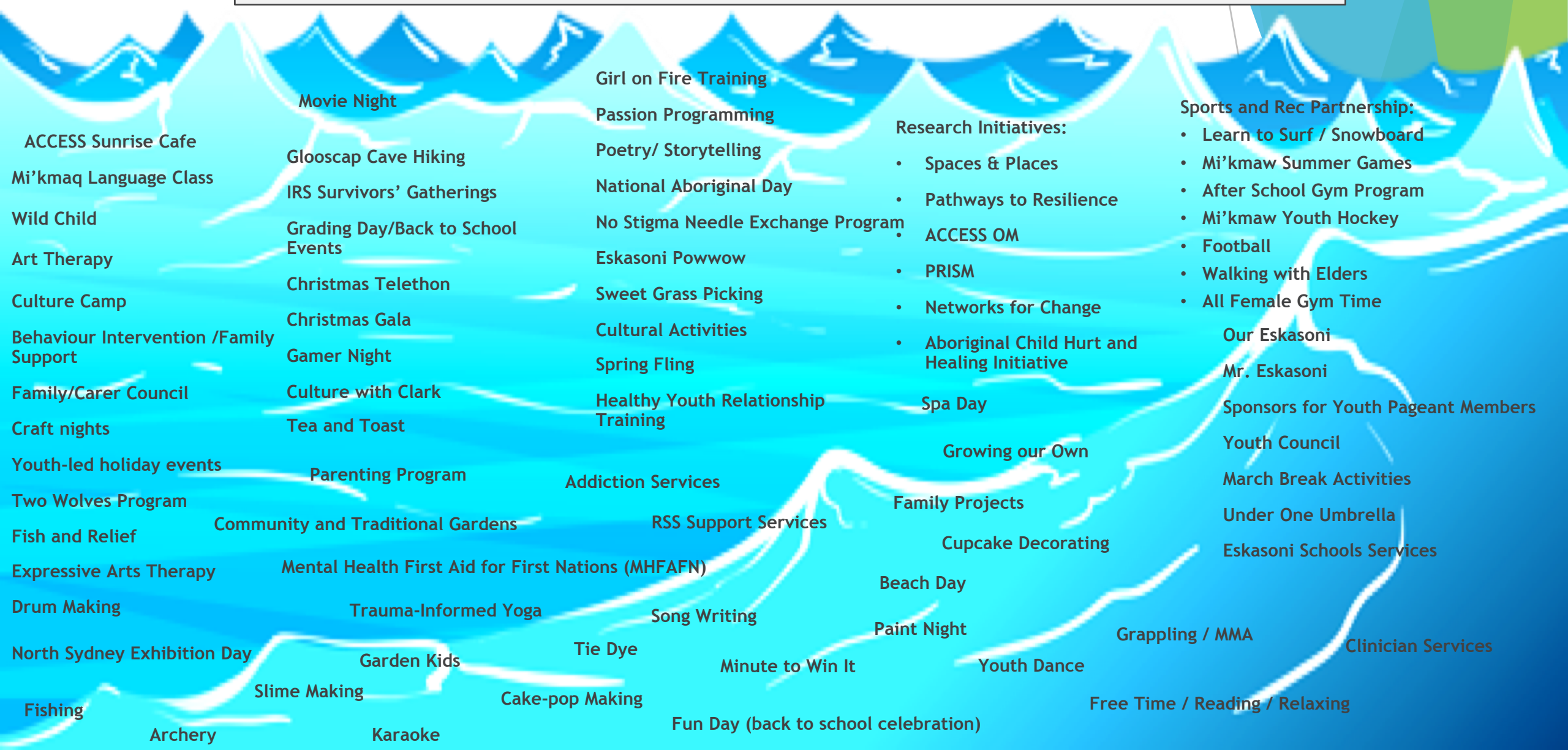
Crisis and Referral Center

Case Mgmt

Residential School Survivors Team

- ACCESS Sunrise Cafe
- Mi'kmaq Language Class
- Wild Child
- Art Therapy
- Cake-pop Making
- Culture Camp
- Behaviour Intervention /Family Support
- Girl on Fire Training
- Family/Carer Council
- Passion Programming
- Craft nights
- Poetry/ Storytelling
- Youth-led holiday events
- National Aboriginal Day
- Two Wolves Program
- No Stigma Needle Exchange Program
- Fish and Relief
- Eskasoni Powwow
- Expressive Arts Therapy
- Sweet Grass Picking
- Drum Making
- Cultural Activities
- Spring Fling
- North Sydney Exhibition Day
- Healthy Youth Relationship Training
- Movie Night
- Fishing
- Youth Dance
- Archery
- Slime Making
- Karaoke
- Garden Kids
- Song Writing
- Tie Dye
- Cupcake Decorating
- Beach Day
- Paint Night
- Our Eskasoni
- Mr. Eskasoni
- Sponsors for Youth Pageant Members
- Youth Council
- March Break Activities
- Under One Umbrella
- Eskasoni Schools Services
- Spa Day
- Spaces & Places
- Pathways to Resilience
- ACCESS OM
- PRISM
- Networks for Change
- Aboriginal Child Hurt and Healing Initiative
- Sports and Rec Partnerships
- Learn to Surf / Snowboard
- Mi'kmaq Summer Games
- After School Gym Program
- Mi'kmaq Youth Hockey
- Football
- Walking with Elders
- All Female Gym Time
- Grappling / MMA
- Minute to Win It
- Mental Health First Aid for First Nations (MHFAFN)
- Clinician Services
- Free Time / Reading / Relaxing
- Community and Traditional Gardens
- Parenting Program
- Growing our Own
- RSS Support Services
- Addiction Services
- Family Projects
- Trauma-Informed Yoga
- Fun Day (back to school celebration)

The Fish Net Model



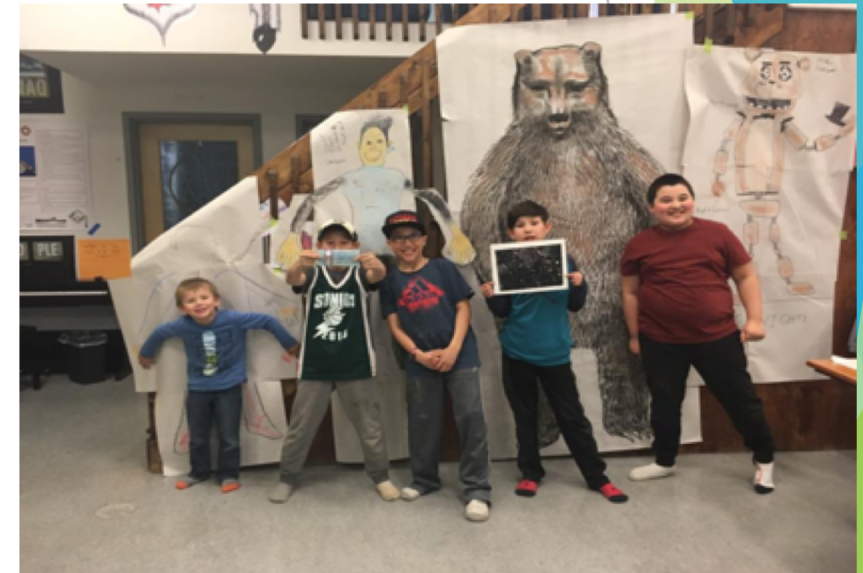
Slime Making Program



Slime Making Program



Expressive Art Therapy



Wild Child Nature Program



Spa Day



Garden Kids Program



Minute to Win It!



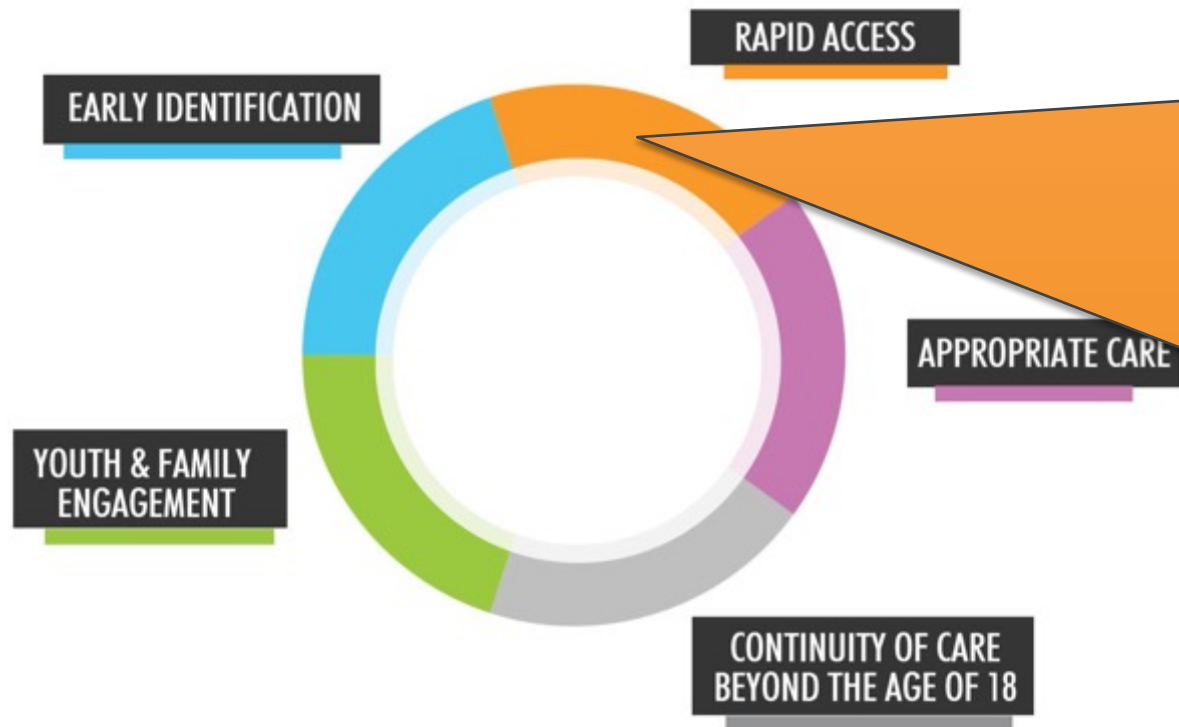
Catch and Relief



Within our site customization of ACCESS Open Minds implementation Early Identification means:

- ▶ Utilizing ACCESS OM assessment and screening protocols
- ▶ Reaching as many youth as possible
- ▶ Observations during programming activates and community events Increasing resilience
- ▶ Decreasing stigma
- ▶ Inclusivity
- ▶ Creating support networks for, now, and the future
- ▶ Building multiple positive relationships
- ▶ Employment opportunities
- ▶ Rapid treatment access
- ▶ Appropriate Care/provider
- ▶ Education and Awareness (i.e., Mental Health First Aid for First Nations, Parenting Programs)
- ▶ Incorporating culture, traditions and language into all programs

Service Planning: Transformation Based on 5 Core Elements



PRINCIPLE:
Offering a mental health assessment to youth within 72 hours of seeking help.

Over to you Alan

AOM Chatham Kent; Rapid Access

Alan Stevenson CEO CMHA Lambton Kent



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



ACCESS Open Minds; May 2016 Launch Celebration, A community affair



June 2018, 2 years post launch.... Grand Opening of CK ACCESS Open Minds, A Youth Wellness Hub Ontario site



Key Elements of Transformation

- ▶ Location, Collaboration & Strong Foundation
- ▶ Offering support from Peers (for both youth and families)
- ▶ By Youth, for Youth
- ▶ Working Together to Address Service Gaps

“...I must say we were encountering numerous obstacles when trying to get things done. Well, with all of the help and guidance...we now have answers and continue to move forward with things in regards to our relative...So with this being said we would like to thank the Centre and both women for their guidance during this confusing time.”

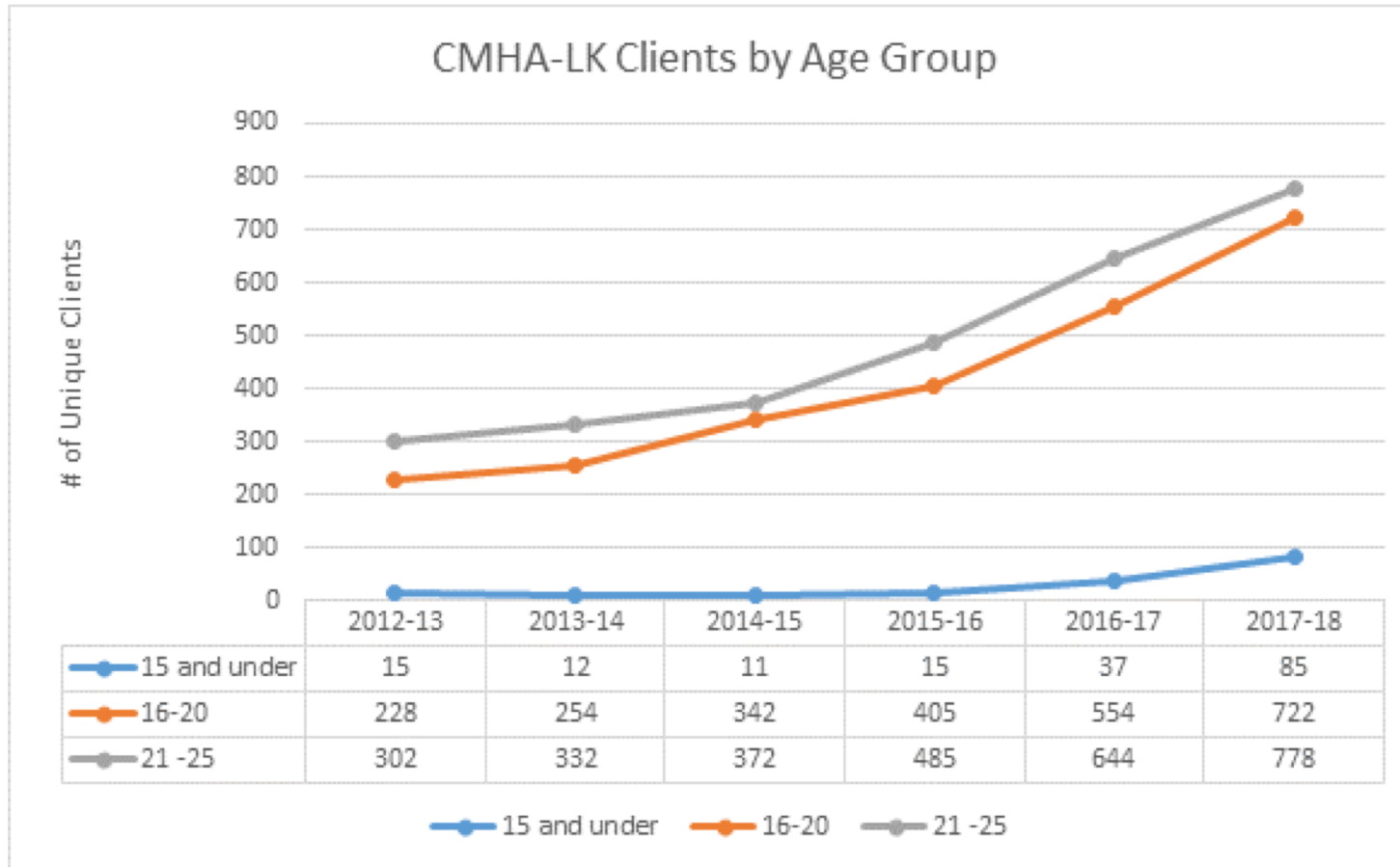
- *Grandma and Aunt*



What We Commit to achieving; ACCESS Open Minds will:

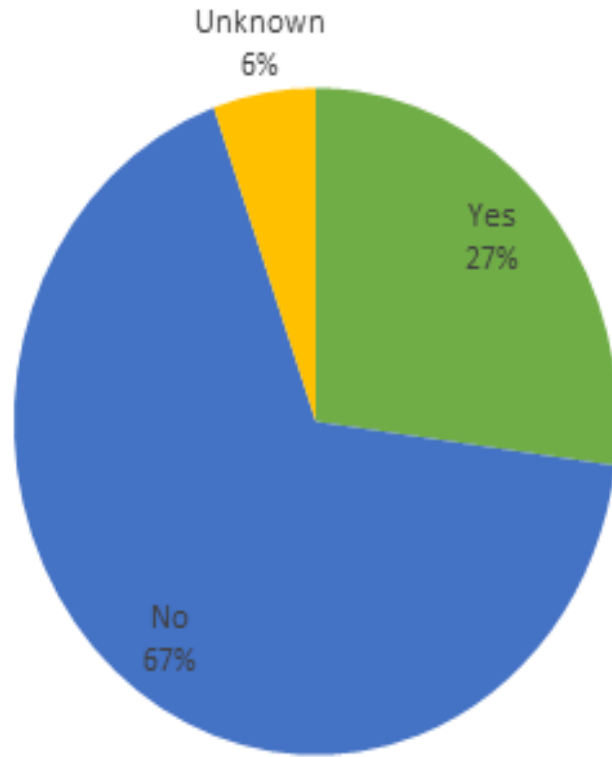
1. More youth in need will self-refer or be referred to mental health services
2. More youth seeking or being referred for help will be offered an initial evaluation rapidly (i.e. in less than 72 hours)
3. More youth will access appropriate care/interventions, quickly (including a less than 30 day benchmark for youth with serious mental illnesses)

ACCESS Open Minds -Creating Capacity

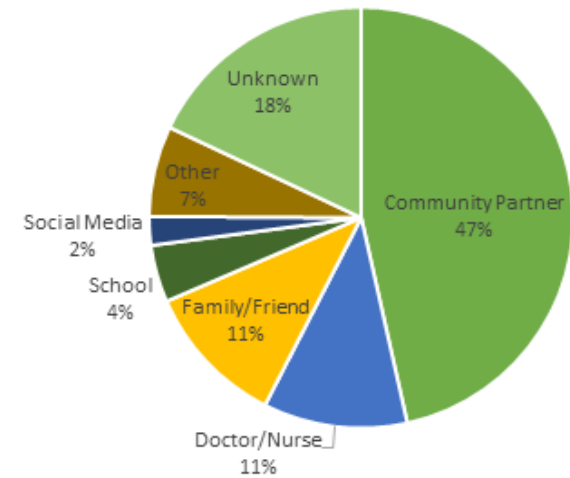


“Once the early case detection strategies are deployed we would expect to increase this number by 20%.”

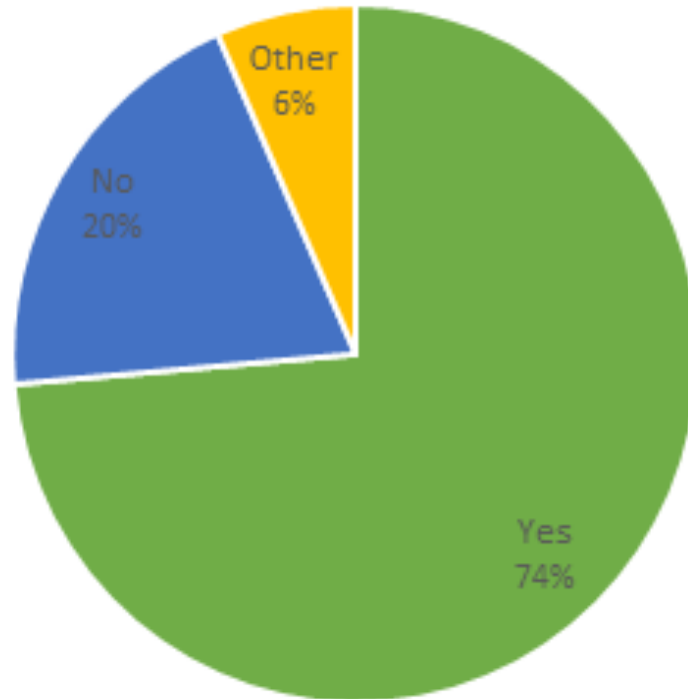
Self Referred



How Did They Hear of Us



Appointment Offered within 72hrs

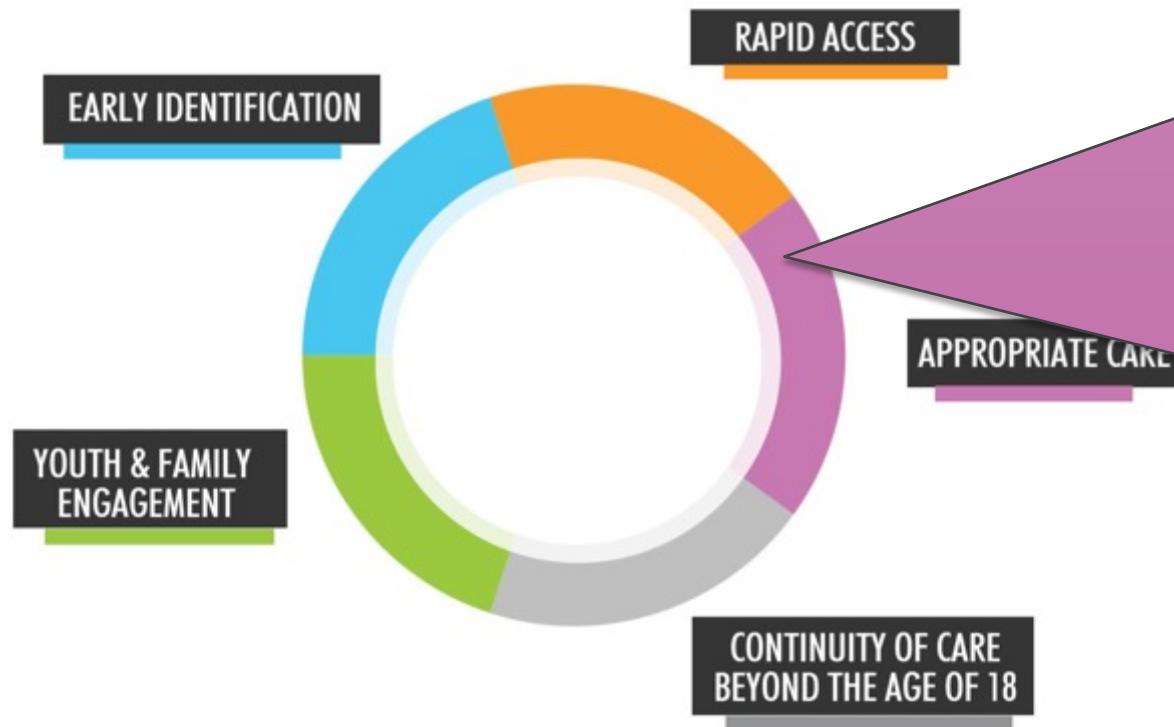


“[ACCESS] is an excellent bridge to help an individual get by when they’re in need of support. 10/10.”

Challenges and opportunities with Rapid Access:

- ✓ Maintaining the momentum. Ongoing Community engagement to expend the services and resources associated with AOM
- ✓ Increase volumes of youth coming in for services (challenge with capacity)
- ✓ Ensure leading practices are implemented i.e. single sessions are in place for more immediate response
- ✓ Establish successful triaging to ensure the right youth is seeing the right provider; improve the fit for psychiatric consult to manage this limited resource most appropriately

Service Planning: Transformation Based on 5 Core Elements



PRINCIPLE:
Referral to additional services, if required,
within 30 days.

Over to you Cindy

Service Planning: Transformation Related to Appropriate Care

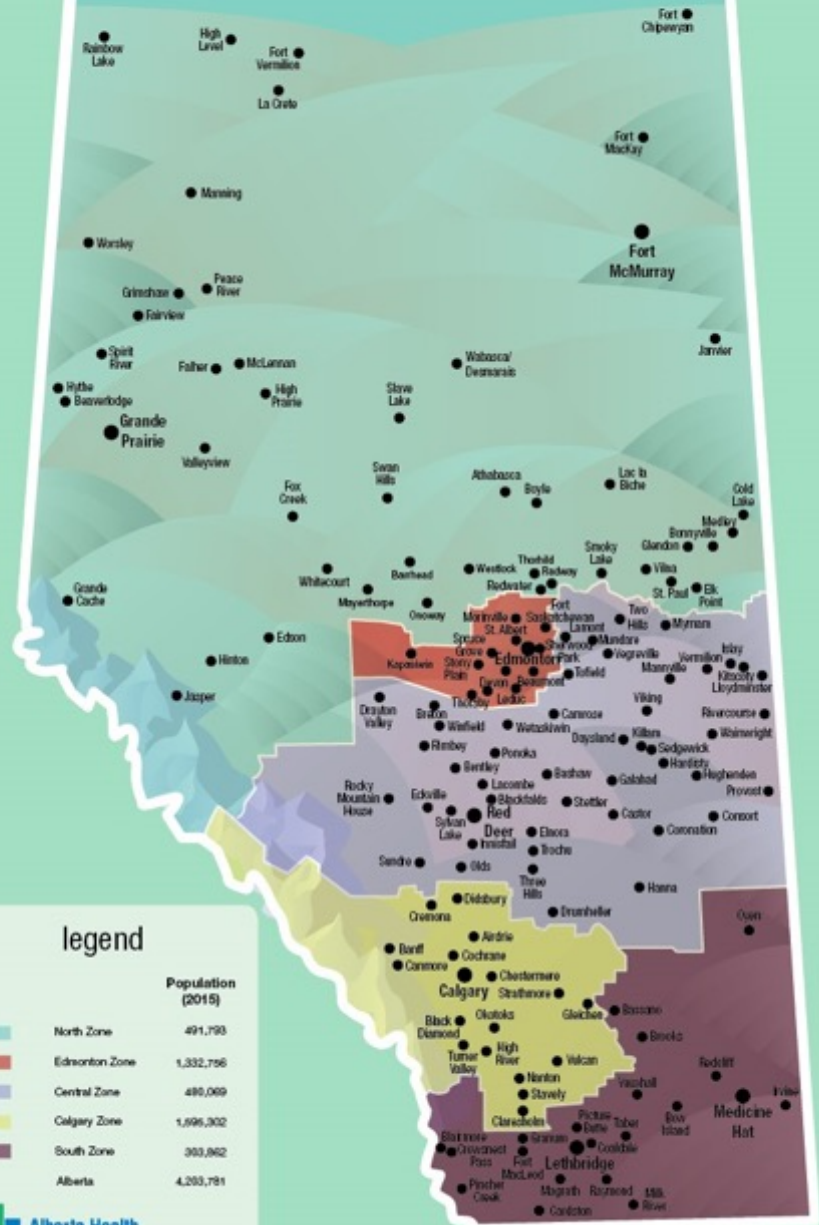
Cindy Gerdes, Project Manager
Alberta Health Services - Edmonton Site



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



Alberta Health Services Zone Map

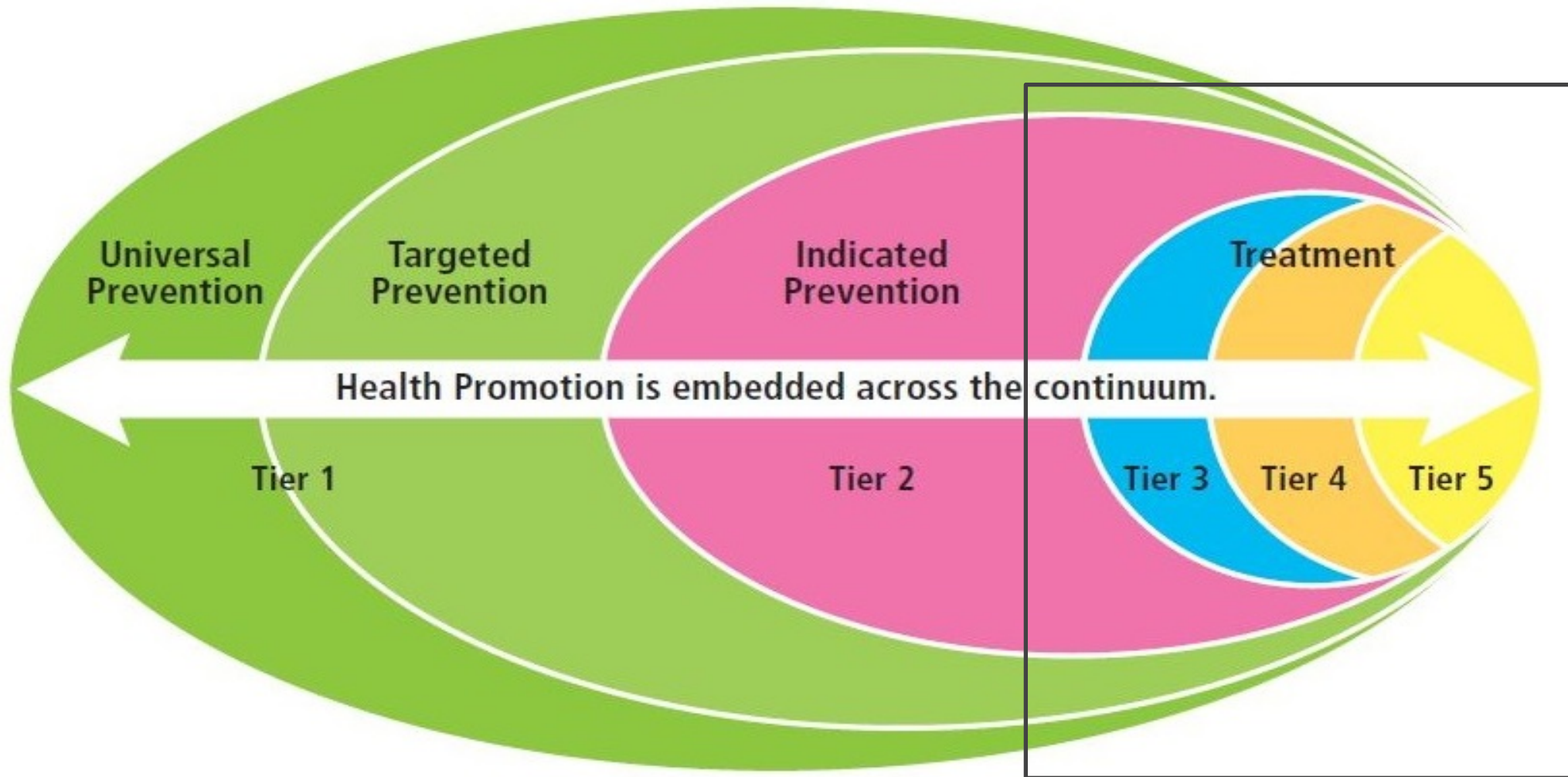


Legend

Zone	Population (2015)
North Zone	491,793
Edmonton Zone	1,332,756
Central Zone	480,069
Calgary Zone	1,595,302
South Zone	303,862
Alberta	4,203,781



Alberta Addiction & Mental Health Integrated Service Framework



Appropriate Care - Begins with the Youth Space: Engagement Hub



LOCATION

Non-stigmatizing, not formal but not going 'down' to get help



YOUTH DESIGN

Attention to colors, layout, power differential in talking spaces



HOMEY SETTING

Elimination of imposed expectations



1

**DROP IN SINGLE
POINT OF ACCESS**

No wrong door, no wrong
time, no waiting

2

SAFE SPACE

To access services, tell your
story, explore options, be
yourself and not be judged

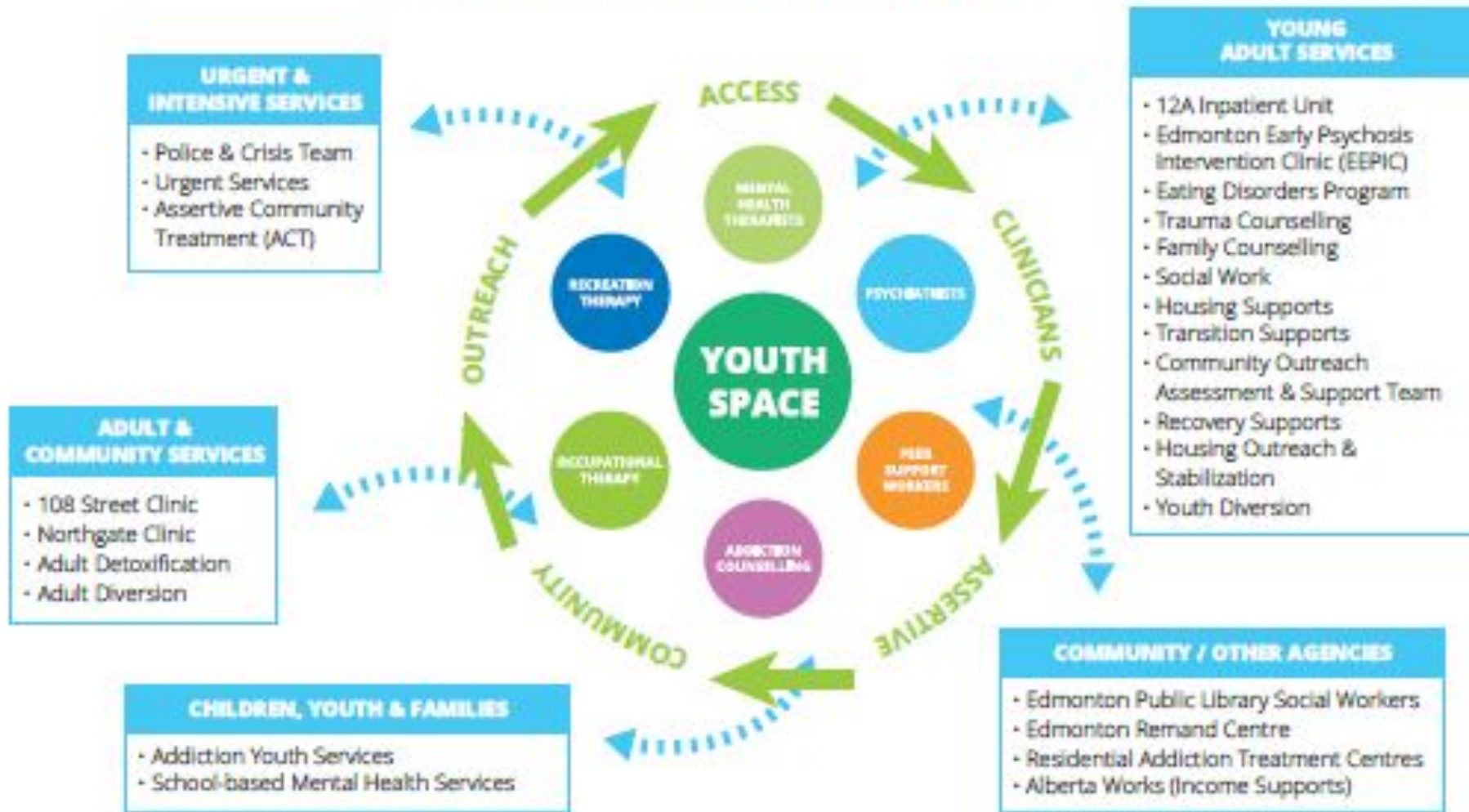
3

**POSITIVE HELP
SEEKING EXPERIENCE**

Empowered as care seekers,
what they want and when

ACCESS: Open Minds Alberta Health Services Edmonton

SERVICE DELIVERY MODEL



Stepped Care Approach

SERVICES

SYMPTOMS

↑ INTENSITY

↑ COMPLEXITY

Specialist Acute Inpatient and Community Services

Mental Health Specialist and Community Services

Community based Mental Health & Addiction Services

Primary Health Services, Family Physician

Step 4

Young people experiencing acute and complex illnesses

Step 3

Young people experiencing severe symptoms and/or long term/ enduring illness

Step 2

Young people experiencing moderate to severe symptoms

Step 1

Young people experiencing mild symptoms

Young People & their Families / Natural Supports

Delivering and monitoring care, so that the most effective yet least resource intensive, treatment is delivered to patients first; 'stepping up' to or down from more intense/specialized services as clinically required.

Guide to determining what Tier Young Adult will benefit from:

- **ALL:** Young Adult identifies goals related to productive activities (employment, education, career planning, and volunteering) and meaningful activity.

- Young Adult is receiving STEP 4 care and would benefit from aftercare or transition planning in areas of education, employment, volunteering, managing Activities of Daily Living.
- OT assessment to determine what is biologically realistic (cognitive and physical ability, interpersonal skills, strengths and challenges) psychologically relevant (values, interests, motivation, stages of change) and socially possible (cultural and social context, social support system, environmental factors). Resulting recommendations indicate what level of support will promote their best ability to function
- **HOW TO ACCESS:** Young Adult is referred to OT by psychiatrist or other hospital staff.
- Future development: Poundmakers, 12-A

- Young Adult's ability to engage in occupations (self-care, productivity, leisure) is impacted due to cognition, environment, personal factors, addiction and/or mental health, stage of readiness, motivation, or admission to hospital or treatment (occupational disruption).
- may have experienced difficulty with initiating or maintaining participation in work, school, volunteering, or meaningful activity.
- may be involved in very minimal to no activities, may be isolated, experiencing ongoing symptoms which are impacting ability to participate, or are struggling to maintain their current participation in school or employment.
- may be in contemplation stage, and need assistance to move forward towards action stage.
- STEP 2 supports are not meeting their needs.
- **HOW TO ACCESS:** Young Adult can move up from tier 2 supports or can be referred by intake coordinator or other Young Adult Services staff.

- Young Adult has experienced, with minimal supports, some success with maintaining employment, attending school, or volunteering.
- is or was previously has been engaged in some meaningful activity and is/was able to sustain same.
- is in preparation or action stage and looking for some support or guidance to get started with their goals in this area.
- STEP 1 supports are not meeting their needs.
- **HOW TO ACCESS:** Young Adult can self-refer, be connected by their current supports, or connected by the intake coordinator. Current supports may also consult OT/SES.

- All Young Adults may benefit from these resources during this stage of development.
- **HOW TO ACCESS:** YA can be supported by their current supports to access resources or they can be directed to these resources by the intake coordinator.

Legend: OT – Occupational Therapist SES – Supported Employment Specialist YA – Young Adult YAS – Young Adult Services

Steps for Occupational Therapy and Supported Employment Specialist Services

STEP 4 (Intensive)
Supports provided by inpatient or residential treatment teams.

STEP 3 (Specialized)
Supports provided to YA are ongoing, individualized, & 1:1. Supports are offered until YA reaches their goals and maximum level of independence is achieved.

STEP 2 (Targeted)
Educational, practical skill development targeted to Young Adults with Addiction and/or Mental Health concerns. Meeting YA where they are at to address their identified goal, with least degree of intervention required. May include support with system navigation.

STEP 1 (Universal)
Community resources

Service options at each Step

- Inpatient or in-reaching OT supports in Hospital or Residential treatment
- OT support with Activities of Daily Living, discharge and aftercare planning, functional assessment to determine level of housing support needed
- Support with participating in meaningful activity on the unit or while in treatment

INTERNAL:

- Caseload clients (more than 1-3 sessions)
- Functional Assessment by OT to determine Occupational Performance Issues, recovery goals, intervention plan, as well as ongoing treatment by OT
- Individualized Placement and Support (IPS) model implemented by SES:
 - The goal of IPS is competitive employment, eligibility is based on YA expressing a desire to work, job search is rapid, the SES is integrated with YA's treatment team and recovery goals, job search is according to YA preferences, YA is offered time unlimited support, SES provides benefits counseling, and SES engages in systematic job development.
- Supported vocational opportunities such as: Tasty Budzzz, vocational cleaning, supported work experience, or group volunteering with YAS.

INTERNAL:

- Consultation (1-3 sessions)
- Booked single sessions
- Drop in hours
- Aftercare group
- CBC groups (employment prep)

EXTERNAL: Employabilities, Onsite Placement, Water Wings, Verto, McBride, Wellness Network, Momentum, Community Linking, Alberta Job Corp, Kids in the Hall, Goodwill Industries

EXTERNAL:

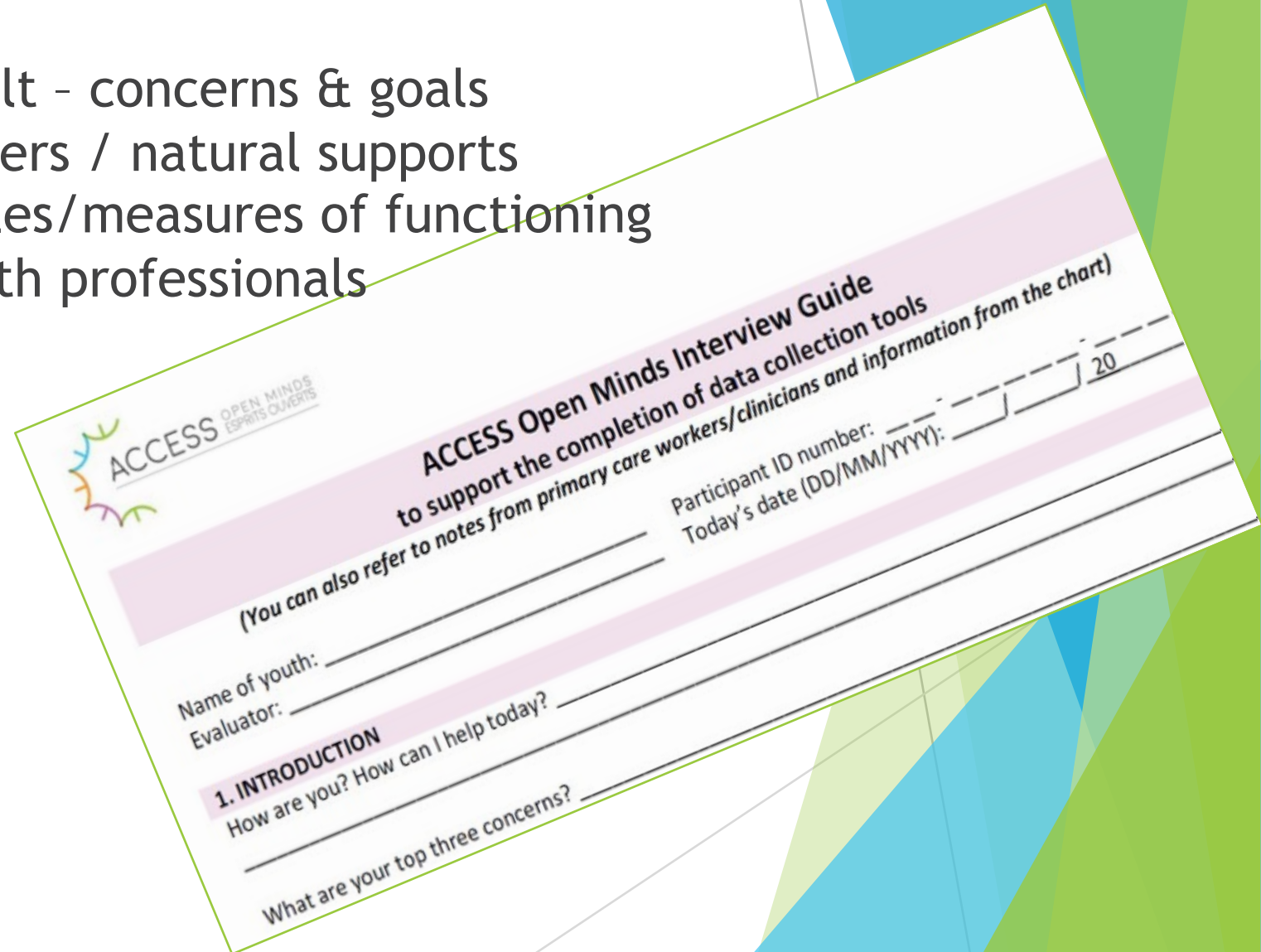
- BGS Enterprises
- Academic Advisors
- Career Insite
- Alberta Learning Information Service
- Meet-up groups
- Go Volunteer
- AB works
- 211
- Edmonton Public School Board
- Edmonton Public Library
- Alberta Job Corp
- Community Recreation Programs
- Academic Institutions

Mutli-Dimensional Intake Assessment

1. Report from the Young Adult - concerns & goals
2. Reports from family members / natural supports
3. Objective Evaluation - scales/measures of functioning
4. Clinical impression of health professionals

Level of Care determined by:

- Most appropriate setting
- Urgency

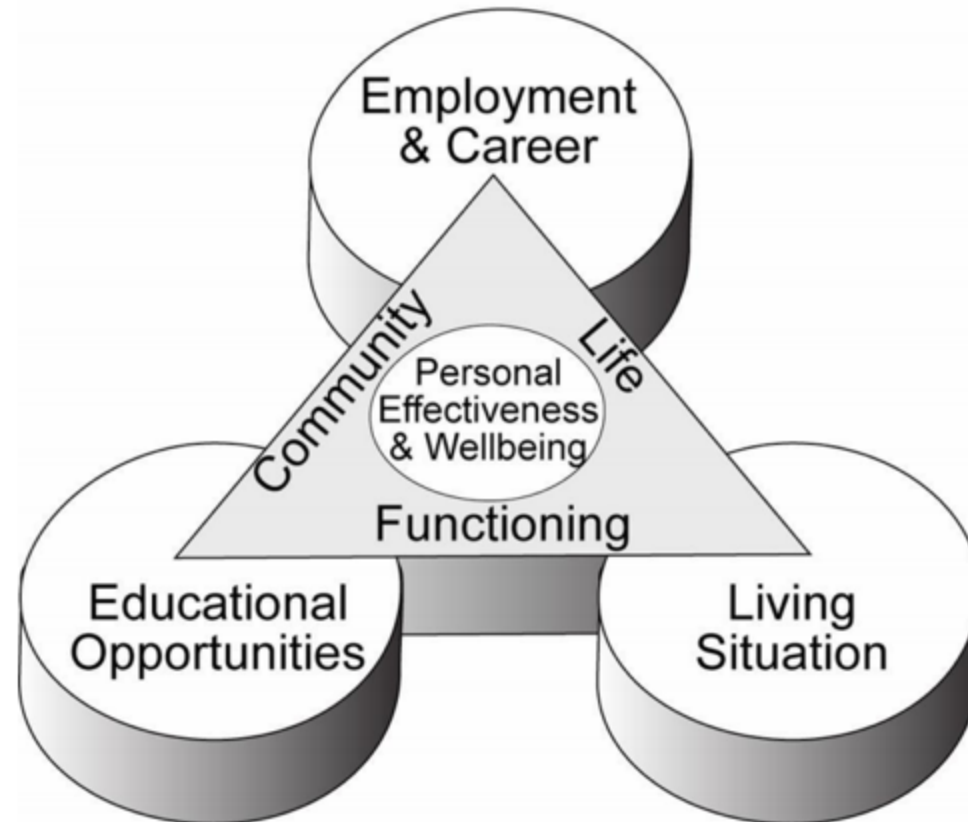


The image shows a tilted document titled "ACCESS Open Minds Interview Guide". The logo at the top left consists of a stylized figure with arms raised, made of colorful lines, followed by the text "ACCESS OPEN MINDS ESPRITS OUVERTS". The main title is "ACCESS Open Minds Interview Guide" in a pink banner, with the subtitle "to support the completion of data collection tools (You can also refer to notes from primary care workers/clinicians and information from the chart)". Below the title are fields for "Name of youth:" and "Evaluator:". To the right, there are fields for "Participant ID number:" and "Today's date (DD/MM/YYYY):" with a "20" in a box. The first section is "1. INTRODUCTION" with the question "How are you? How can I help today?". Below this is the question "What are your top three concerns?" followed by a line for writing.

Transition to Independence Process (TIP) Model

An Evidence-Supported Practice for Improving the Progress and Outcomes of Youth and Young Adults with Emotional and/or Behavioral Difficulties (Stars Behavioral Health Group 2010)

Transition Domains



TIP Care Plans

- Based on the young person's goals
- Responds to the relevant transition domains
- Engages family and community supports
- Are coordinated across services as much as possible - including using the ACCESS clinic as a hub that young people can always come back to for additional support or to revise their plan
- Documented in a common health record so that all clinicians and services (within AHS at least) are aware and understand what the plan is to support the young person.

What we've learned so far

- Our transformation is not complete.
- The “front door” is working well - needs to be replicated to improve access
- Needs of our population:
 - ~1/3 need the warm welcoming environment and the knowledge that they can come back if/when they need services or treatment.
 - ~1/3 need single session / solution focused counselling +/- short term supportive therapy.
 - ~1/3 have moderate to severe mental health and/or addiction concerns that require more specialized Tier (4/5) outpatient, residential or inpatient services.

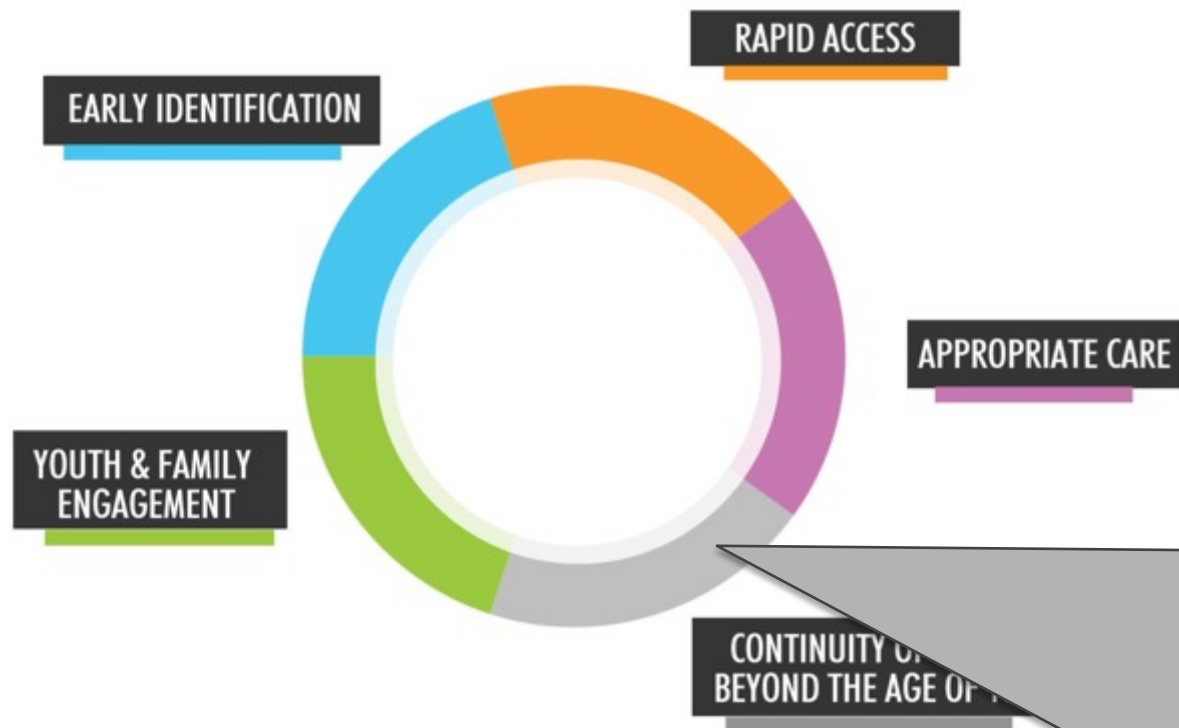
What we've learned so far

- We have good pathways to care within AHS but struggle to stream young adults to Tier 1 and lower level Tier 2 services.
- Need to be more integrated with other organizations and the services they provide.
- Need a high density of offerings particularly at the pre-clinical and Tier 1 levels to provide choice.
- Need iterative evaluation to assess and refine pathways to care within and among organizations.

Integration Challenges

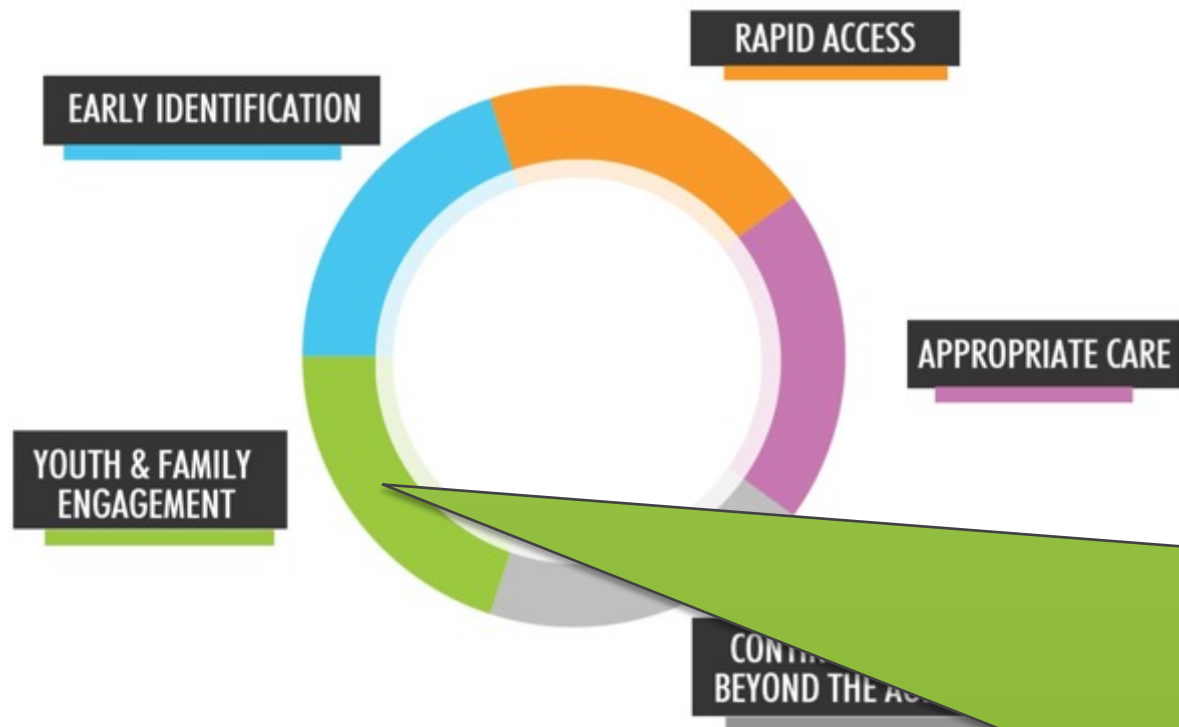
- Understanding the goals of care across tiers of service.
- Creating consensus about appropriate pathways to care that are independent of the “lens” of the person doing the assessment (Family physician, community psychologist, intake coordinator etc).
- Determining which tier of service is the best match for the young person and which pathway(s) to care can respond to those requirements.
- Determining how to manage care when the needed supports span multiple tiers/steps.
- Recognizing the need for and planning of pathways to care for families/natural supports.

Service Planning: Transformation Based on 5 Core Elements



PRINCIPLE:
Many services for youth are designed to end at age 18; all ACCESS OM service sites provide seamless services to youth aged 11-25.

Service Planning: Transformation Based on 5 Core Elements

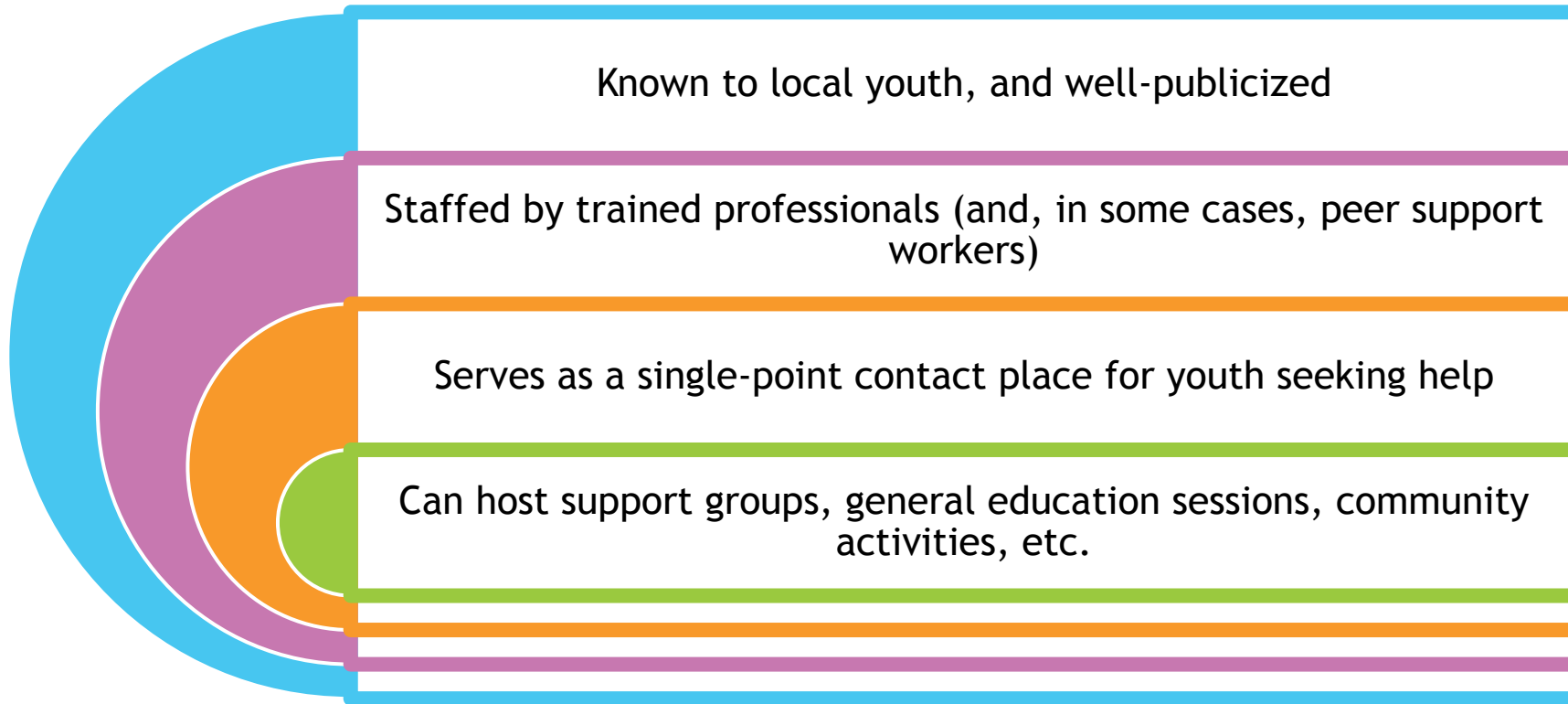


PRINCIPLE:

Youth and their families/carers are considered partners in their own care; they, along with community members, are involved in the design of services at service sites.

More on this in just a few moments when we hand it over to Haley Marion and Jimmy ...

ACCESS Open Minds Youth Spaces (more to come...)



ENDING ON LESSONS LEARNED...

- ▶ ACCESS OM implemented in diverse sites across Canada...yes it is possible!
- ▶ A transformation and evaluation of the transformation... all in 5 years!
- ▶ The value of the network for sites!
- ▶ The value of the network in changing YMH in Canada!
- ▶ LOCAL leadership...essential!
- ▶ Guidance and support... crucial!

And now over to Haley-Marion and Jimmy....

