

# British Columbians vulnerable to mental health and/or substance use problems

## TABLE OF CONTENTS

### PRIORITY: VULNERABLE PARENTS AND FAMILIES

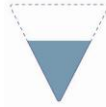
- Action: Launch a nurse-led, in-home individual parent training program for first-time, at-risk parents and their infants, provided during pregnancy and up to two years after delivery
- Action: Implement FASD prevention strategies as outlined in the Fetal Alcohol Spectrum Disorder: Building on Strengths 10 Year Plan for B.C.
- Action: Expand the reach of programs to prevent, identify and respond to perinatal depression as described within Addressing Perinatal Depression: A Framework for B.C.'s Health Authorities.

### PRIORITY: VULNERABLE CHILDREN AND YOUTH

- Action: Implement Strong, Safe and Supported – A Commitment to B.C.'s Children and Youth
- Action: Implement supports for families with parents who have mental health and/or substance use problems to facilitate healthy family development

### PRIORITY: VULNERABLE ADULTS

- Action: Collaborate with employers and unions to develop and implement workplace supports such as self-care resources, opportunities for early identification of problems, and linkages to appropriate interventions
- Action: Implement comprehensive, cross-sectoral initiatives to prevent domestic violence and reduce its impact on children, youth, adults and families
- Action: Implement gatekeeper training programs as described within the Strengthening the Safety Net: A Report on the Suicide Prevention, Intervention & Postvention Initiative of B.C., to effectively identify and intervene with individuals at risk of suicide across the lifespan
- Action: Where appropriate, expand the reach and range of harm-reduction services that prevent and reduce the health, social and fiscal impacts of illegal drug use



## British Columbians vulnerable to mental health and/or substance use problems

### **PRIORITY: VULNERABLE SENIORS**

Action: Implement a coordinated provincial initiative to prevent elder abuse so that seniors will be less vulnerable to emotional, psychological and physical abuse

Action: Improve routine screening protocols for mental health and substance use problems during primary care interventions with seniors

Action: Use the *Seniors in British Columbia: a Healthy Living Framework* platform and partnerships with local government and other organizations to promote opportunities for older adults to remain socially connected and meaningfully engaged in their communities, including workforce, learning and volunteer opportunities

### **PRIORITY: PEOPLE WITH CHRONIC PHYSICAL DISEASE OR COMPROMISED HEALTH**

Action: Implement routine screening in primary care settings for mental health and/or substance use problems among children, youth and adults with chronic health problems and illnesses



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Parents and Families

**Action: Launch a nurse-led, in-home individual parent training program for first-time, at-risk parents and their infants, provided during pregnancy and up to two years after delivery.**



The B.C. Healthy Connections Project aims to help the most vulnerable families get the best start in life. The project will scientifically evaluate the effectiveness of B.C.'s new Nurse-Family Partnership. The partnership is a public health nurse-led home visiting program designed to help young, low income pregnant women who will be first time mothers, and their children. As of early 2012, public health nurses in all health authorities have received specialized education and have begun to work with guiding clients. Over 100 families are currently being seen throughout the province.



In VIHA's Child, Youth & Family Health Services, universal prenatal registration is now being used to identify the needs of pregnant women and their families. To determine whether an expectant mother is eligible for the Nurse Family Partnership program, VIHA has developed a new social vulnerability screening tool. The program is also available to other perinatal women and families experiencing vulnerabilities associated with the social determinants of health.



The B.C. Healthy Connections project is being piloted in six communities throughout Interior Health. This project aims to help the most vulnerable families in British Columbia get the best start in life. This is a public health nurse home visitation program offered to vulnerable, young, first-time mothers who have low incomes and who are at an early stage in their pregnancy (24 weeks or earlier). Those who join the program are assigned a specially trained public health nurse who works with them to provide health and nutrition counselling, pre- and post-natal advice and guidance, and referrals to other supportive health and social services.



## British Columbians vulnerable to mental health and/or substance use problems



### Vulnerable Parents and Families



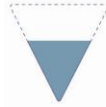
The Ministry of Children and Family Development (MCFD) continues to provide consultative support to the regional health authorities in their implementation of the B.C. Healthy Connections project. Specifically, MCFD is working to ensure appropriate referral pathways and information sharing processes are used in the provision of services to support vulnerable infants, children and their parents. In addition, MCFD supports the project through scientific evaluation of the B.C.'s Nurse Family Partnership program.

#### **Action: Implement FASD prevention strategies as outlined in the Fetal Alcohol Spectrum Disorder: Building on Strengths 10 Year Plan for B.C.**

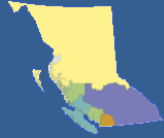




To achieve greater impact prevention of FASD, the Ministry of Health has adopted a prevention focus that includes broad-based awareness building and health promotion efforts. This includes the Healthy Start strategy, which includes public health support during the prenatal period to at-risk mothers and their families to initiate positive changes in their health – supporting healthy pregnancies and positive health outcomes for children.

The Ministry of Health also continues to work collaboratively with key partners to ensure that accurate, broad-based FASD prevention messaging is available to the public. In support of FASD Prevention and Support Day and Month 2012, the Ministry of Health partnered with the Ministry of Children and Family Development (MCFD) and the Public Health Agency of Canada to develop a toolkit and supporting resources, including an online FASD awareness trivia game and interactive quiz for health care professionals and women. The FASD awareness materials can be downloaded and used by any organization or business with an interest in prevention and spreading awareness of the impacts of FASD on children and families. This was disseminated to public health providers, MCFD key workers and B.C. pregnancy outreach programs. (continued on next page)



## British Columbians vulnerable to mental health and/or substance use problems

	<h3>Vulnerable Parents and Families</h3>
	<p>In addition:</p> <ul style="list-style-type: none"><li>• In 2011, the brochure <i>Alcohol &amp; Pregnancy Don't Mix</i> was developed by the B.C. Liquor Distribution Branch in collaboration with the Ministry of Children and Family Development, the Ministry of Health, B.C. Women's Hospital and Health Centre, and the Public Health Agency of Canada. Brochures are available year-round in B.C. liquor stores as well as online, and are also widely distributed to parent support agencies and other health and women's organizations throughout the province.</li><li>• The Ministry of Health provides information on alcohol use in pregnancy to the public and health care professionals in <i>Baby's Best Chance: Parent's Handbook of Pregnancy and Baby Care</i> and online on the Healthy Families B.C. website at <a href="http://www.healthyfamiliesbc.ca">www.healthyfamiliesbc.ca</a>. Baby's Best Chance is provided in sufficient quantity for health authorities to distribute to every family across the province on an annual basis.</li><li>• The Ministry of Health also participated, along with staff from the University of Victoria, in the development of the Canadian low-risk drinking guidelines that were released in 2012. These guidelines support health care providers to discuss alcohol use and related risks with all women of childbearing age. For more information, refer to <a href="http://www.heretohelp.bc.ca">www.heretohelp.bc.ca</a>.</li></ul>
	<p>The Vancouver Island Health Authority is working with the Ministry of Children and Family Development and community partners to develop the Her Way Home program. This program will support women who are pregnant or mothers of very young children who are experiencing problematic substance use.</p>



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Parents and Families

**Action: Expand the reach of programs to prevent, identify and respond to perinatal depression as described within Addressing Perinatal Depression: A Framework for B.C.'s Health Authorities.**



The Ministry of Health is working with agencies of the Provincial Health Services Authority, including the B.C. Reproductive Mental Health program, Ministry of Children and Family Development and health authorities to determine priorities for actions to assist health authorities in addressing education, prevention, screening and diagnosis (as outlined in *Addressing Perinatal Depression: A Framework for B.C.'s Health Authorities*). The focus is on consistent messaging to assist health care providers in screening, referral and collaboration when working with women experiencing perinatal depression and their families.



Fraser Health has recruited one psychiatrist for the reproductive team at the Jim Pattison Outpatient Care and Surgery Centre, bringing the total number of psychiatrists on the team to three.







The Ministry of Children and Family Development (MCFD), in partnership with the Ministry of Health, health authorities, and the Provincial Health Services Association, is promoting the mental health of infants, young children, parents, and families experiencing perinatal mental health or substance use problems. This strategy aims to promote the social inclusion of families with perinatal mental health challenges and to develop and distribute provincial health literacy resources for professionals, families, and community members.

In addition, MCFD is partnering with the Ministry of Health and community partners on the Family Perinatal Mental Health Promotion project, the design phase for which was completed in 2012. Implementation will begin in 2013.



British Columbians vulnerable to mental health and/or substance use problems

	<h2>Vulnerable Parents and Families</h2>
 	<p>Vancouver Coastal Health, in partnership with Providence Health Care, has developed a perinatal depression action plan. The plan includes education and prevention, screening and diagnosis, treatment and self-management, and the development of coping and support networks. The action plan also includes professional education for public health nurses, mental health and substance use clinicians, physicians and midwives. In 2011 and 2012, over 400 staff were trained. <a href="http://www.vch.ca">www.vch.ca</a></p>
	<p>VIHA's Child, Youth &amp; Family Health Services has perinatal depression screening and brief intervention as a key area of focus.</p>



## British Columbians vulnerable to mental health and/or substance use problems



### Vulnerable Parents and Families



Vancouver Coastal Health completed the following work in 2012 in relation to perinatal depression:

- Drafted *Perinatal Depression Strategy & Three-year Action Plan 2010 – 2013*. Work on this document included consultation with women and community-based agencies. The strategies outlined in this document are in the process of being implemented.
- The action plan includes 13 objectives in four key areas:
  - Education & prevention,
  - Screening & diagnosis,
  - Treatment & self-management, and
  - Coping & support networks.
- Perinatal depression-related educational materials have been developed, with education being offered to public health nurses, mental health and substance use clinicians, physicians and midwives. The education materials describe what perinatal depression is, how to screen for perinatal depression, and services and resources available for clients diagnosed with perinatal depression. In 2012, education was provided to over 400 staff and physicians.
- A partnership was established with the VCH Practice Support Program (family physicians and medical office assistants). As part of this, perinatal depression content was added to the mental health education module. We are currently in the process of completing the development of a perinatal depression resource manual to share with clinicians.
- For women with severe perinatal depression, Vancouver Coastal Health is establishing linkages with the acute home-based treatment teams as a potential treatment option.





## British Columbians vulnerable to mental health and/or substance use problems



### Vulnerable Children and Youth

**Action: Implement Strong, Safe and Supported – A Commitment to B.C.’s Children and Youth.**



Improvements to child and youth mental health services is one of three priorities for the Ministry of Children and Family Development over the next several years. Examples of areas for action include strategies to address the social/emotional and mental health needs of children and youth in care and approaches to enhance the cultural relevance of services for Aboriginal children, youth, families and communities.



At the Ministry of Children and Family Development (MCFD), some of the Aboriginal and general child and youth mental health teams are working with community partners to build community capacity to support children and youth with mental health challenges and their families. For example:

- On Vancouver Island, some teams have clinicians providing mental health consultation and education to MCFD child welfare staff and school personnel.
- In other communities on the island, Aboriginal child and youth mental health teams are working with Aboriginal Elders to enhance the cultural relevance of their services.



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Children and Youth

**Action: Implement supports for families with parents who have mental health and/or substance use problems to facilitate healthy family development.**



Until 2012, there were no services in downtown Victoria dedicated to helping new and expectant mothers struggling with substance use or mental health issues. HerWay Home is a community-based program modeled after SheWay in Vancouver’s downtown eastside and the Maxxine Wright Centre in Surrey. The program offers a wide range of health and social services for mothers and their babies and will eventually be expanded to include housing services. Community partnerships with local groups are the backbone of the program.






The ministries of Health and Children and Family Development are partnering with the regional health authorities to identify and support families experiencing parental mental health and substance use problems. This work has been initiated as part of the government’s cross-ministerial response to the Representative for Children and Youth’s report, *Honouring Kaitlynn, Max and Cordon: Make Their Voices Heard Now*. Tools and processes are being developed to better screen for mental health and substance use and domestic violence when people enter into health and child serving systems and two pilot sites have been identified (one rural and one urban) for implementation. Better screening will also ensure referrals to appropriate services to better support families. [www.rcybc.ca](http://www.rcybc.ca)



An important shift in the culture of how we view and respond to mental health and substance use problems as a society is the recognition of the critical role of families. In 2012, Families Organized for Recognition and Care Equality Society (F.O.R.C.E) released *Families Matter: A Framework for Family Mental Health in British Columbia*. The framework, supported by the ministries of Health and Children and Family Development, acknowledges the profound relationship between families and mental health and prioritizes whole family approaches to research, policy and practice. [www.forcesociety.com](http://www.forcesociety.com)



# British Columbians vulnerable to mental health and/or substance use problems

	<h2>Vulnerable Children and Youth</h2>
	<p>Northern Health's Mental Health and Addictions Services has established a service contract with the Canadian Mental Health Association and the British Columbia Schizophrenia Society to provide education and family support.</p>
	<p>Fraser Health launched <i>Families are Part of the Solution Strategic Direction for Family Support and Inclusion</i>. This document includes three key recommendations:</p> <ol style="list-style-type: none"> <li>1. Develop an infrastructure in mental health to support family-friendly services across Fraser Health.</li> <li>2. Develop and implement an education and training program in working with families for mental health staff.</li> <li>3. Implement enhanced and new family services so families have a range of options of support.</li> </ol> <p>In addition, the following actions relating to family supports have been completed:</p> <ul style="list-style-type: none"> <li>• A family support specialist position was posted and filled in June.</li> <li>• The Family Support and Inclusion Steering Committee has been formed and is meeting monthly.</li> <li>• The family support specialist has been meeting with stakeholder groups to share the strategic direction (more than 60 per cent complete).</li> <li>• A dialogue on family support group therapy has been initiated with some stakeholders.</li> </ul>



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Adults

**Action: Collaborate with employers and unions to develop and implement workplace supports such as self-care resources, opportunities for early identification of problems, and linkages to appropriate interventions.**







The Canadian Mental Health Association’s B.C. division (CMHA-BC) offers workshops, presentations and training opportunities to help B.C. workplaces address issues related to mental health. Mental Health Works, a national program of the CMHA, helps people in various roles in the workplace provide effective support to employees struggling with mental health issues. In 2012, workshops were delivered to workplaces in Vancouver, Victoria, Cranbrook and Kelowna. Larger employers such as the Regional District of East Kootenay, UBC, and SFU have held in-house training. With the help of funding from the B.C. Mental Health Foundation, CMHA-BC has also developed a unique workshop, “Safe and Sound – building and sustaining psychologically safe and healthy workplaces,” that has been piloted in Kelowna and Vancouver. This workshop addresses organizational factors affecting overall workplace mental health, including bullying and harassment with an emphasis on creating healthy work environments. [www.cmha.bc.ca](http://www.cmha.bc.ca)



On May 31, 2012, the B.C. government passed Bill 14, which revises the *Workers Compensation Act* as it relates to compensation for mental disorders. The bill entitles a worker to compensation where a mental disorder is a reaction to traumatic events arising in the course of employment or a significant work-related stressor, including bullying or harassment. In addition, the Minister Responsible for Labour requested that WorkSafeBC develop an occupational health and safety policy on workplace bullying and harassment, as well as a tool kit to assist employers and workers. [www.worksafebc.com](http://www.worksafebc.com)



## British Columbians vulnerable to mental health and/or substance use problems

	<h3>Vulnerable Adults</h3>
	<p>Northern Health Human Resources has entered into a contract to provide employee assistance programs to all staff. Self-care resources are brought to employee's awareness through posters throughout all sites, as well as on the Northern Health i-portal internet. Phone and website contact information is provided to all staff to contact the support agency.</p>
	<p>VIHA has a very comprehensive Employee &amp; Family Assistance program which is a critical component of VIHA's Health and Wellness program. In addition, VIHA has a Tobacco Cessation program and have recently introduced an alternative work arrangement program for staff. VIHA meets with their union partners to discuss how to support staff self-care. These meetings are held monthly at each site, as well as with a broader union group bi-annually. VIHA has introduced the manager support team, a proactive and innovative team working one to one with managers to monitor and improve sick time, overtime, injury rates, and injury duration. There are also a variety of tools and supports that are available on the VIHA intranet site to keep staff well at work.</p>
	<p>The Canadian Mental Health Association (CMHA) B.C. Division continues to offer a series of workshops, presentations and training opportunities to help build capacity within B.C. workplaces to effectively address the many issues related to mental health in the workplace. <i>Mental Health Works</i>, a national program of the CMHA, strives to improve working lives by helping workplaces provide effective support to individual employees struggling with mental health issues. The program also addresses organizational factors that affect overall workplace mental health, with an emphasis on creating psychologically safe and healthy work environments benefiting all workers.</p>



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Adults

**Action: Implement comprehensive, cross-sectoral initiatives to prevent domestic violence and reduce its impact on children, youth, adults and families.**



The Provincial Office of Domestic Violence was created in March 2012 to serve as the B.C. government lead on the services and supports available for children and families affected by domestic violence. This office is accountable for ensuring that all domestic violence policies, programs and services are effective and delivered in a comprehensive and unified way across government. The office led the development of *Taking Action on Domestic Violence in British Columbia*, released in October 2012. This action plan is the B.C. government's response to the findings and recommendations made in the Representative for Children and Youth's report, *Honouring Kaitlynn, Max and Cordon: Making Their Voices Heard Now* (2012). The office is currently developing a three-year plan, inclusive of an Aboriginal strategy, to address domestic violence that will continue to strengthen the response to domestic violence. [www.mcf.gov.bc.ca/podv](http://www.mcf.gov.bc.ca/podv)



Northern Health has a representative on the provincial committee looking at recommendation number one from the Representative for Children and Youth report.



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Adults

**Action: Implement gatekeeper training programs as described within the Strengthening the Safety Net: A Report on the Suicide Prevention, Intervention & Postvention Initiative of B.C., to effectively identify and intervene with individuals at risk of suicide across the lifespan.**



In 2012, the Ministry of Children and Family Development (MCFD) provided advanced clinical training to over 80 child and youth mental health practitioners in Recognizing and Responding to Suicide Risk. Through this action, practitioners are better prepared to respond to at-risk children and youth and their families. Over the last five years, MCFD has trained over half of its practitioners (a total of 376, including some from contracted agencies). [www.mcf.gov.bc.ca/suicide\\_prevention](http://www.mcf.gov.bc.ca/suicide_prevention)



The development of the *Provincial Suicide Clinical Framework*, led by the B.C. Mental Health and Addiction Services in 2011, has been implemented in all regional health authorities and was acknowledged by Accreditation Canada as an appropriate response to the required organizational practices related to suicide assessment and prevention.






VIHA's Seniors Health program has implemented a suicide risk assessment guideline, focusing on risk-factors and interventions specific to the elderly. All staff, including non-professionals, have been included in the training to learn how to assess for risk and access intervention, and to get access to ongoing support and community resources. Evaluation of the uptake and use of the guideline is underway.



VIHA's Mental Health and Addiction Services team of Applied Suicide Intervention Skills Training (ASIST) trainers have delivered 34 ASIST workshops to a total of 735 VIHA staff, Aboriginal community partners and contracted community partner participants from across Vancouver Island. The VIHA ASIST program is expanding to provide training to Vancouver Island Aboriginal communities with high rates of suicide completions and attempts. VIHA ASIST workshops are offered across Vancouver Island on a regular basis throughout the year.



## British Columbians vulnerable to mental health and/or substance use problems

	<h3>Vulnerable Adults</h3>
	<p>Interior Health has supported a series of four community-based workshops throughout the area to engage area providers, survivors and advocates in a dialogue regarding suicide prevention, intervention and postvention. These were set up to provide foundational information and to support the building of suicide safer communities. These communities are connected and supported through the use of a web-based community of practice that shares relevant information and promotes ongoing discussion on issues related to suicide in the community.</p>
	<p>During June and July of 2012, the Suicide Risk Management Working Group hosted three large staff stakeholder consultation sessions, as well as a physician engagement session. In addition, the group consulted with some specialized groups such as the Diversity Committee and Transitions of Care Committee. There were 235 participants in total and the working group received 171 pages of feedback about the draft suicide risk management clinical practice guideline. The group spent August and September analyzing the feedback, editing the draft document based on the input and recommendations received, and communicating this progress at the regional manager/director meeting. Also in September, the initial planning for the Rapid Appraisal and Review phase began.</p> <p>An application to present the clinical guideline development and stakeholder engagement process was submitted to the Canadian Association of Suicide Prevention for presentation at their annual conference. This abstract was accepted, and a committee representative will be sharing a 25-minute presentation titled “Developing A Suicide Risk Management Guideline In A Large And Complex Organization” at the conference, followed by a panel discussion about suicide risk management in acute settings.</p>





# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Adults

**Action: Where appropriate, expand the reach and range of harm-reduction services that prevent and reduce the health, social and fiscal impacts of illegal drug use.**



BC Centre for Disease Control  
An agency of the Provincial Health Services Authority

Toward the Heart, an online portal to support harm reduction practices in B.C., was launched in April 2012. This website allows British Columbians to easily access harm reduction information sources, a catalogue of harm reduction supplies, naloxone pilot program information, and referrals to other health services. Other social media resources include an electronic magazine, email distributions, Facebook, and Twitter to facilitate easily accessible knowledge exchange between the B.C. Centre for Disease Control's harm reduction program and others in the health care system. The site was visited 2,662 times in the first five months.

[www.towardtheheart.com](http://www.towardtheheart.com)



northern health  
the northern way of caring

Northern Health has integrated mental health and addiction services in each of the communities in the north. In addition, a number of the communities have recently created community-based day treatment programs. The people in these communities have been advised of these service changes and the expanded programs which allow them to access more information regarding the affects of substance use.



VANCOUVER ISLAND  
health authority

VIHA, in collaboration with the City of Victoria and downtown stakeholders, has developed a targeted model of care for the hardest to reach in downtown Victoria – those who struggle with homelessness, mental illness and substance use. An implementation plan and evaluation framework are in place, with implementation expected to begin in 2013/14.



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Seniors

**Action: Implement a coordinated provincial initiative to prevent elder abuse so that seniors will be less vulnerable to emotional, psychological and physical abuse.**



In early 2012, the Ministry of Health held regional consultations and focus groups with seniors, caregivers and stakeholders around the province to help guide the development of an elder abuse prevention, identification and response strategy to be released in early 2013. In addition, the B.C. government invested \$1.4 million in the formation of more community response networks across the province. The networks work to promote a coordinated community response to adult abuse and neglect. [www.gov.bc.ca/elderabuse](http://www.gov.bc.ca/elderabuse)



After a consultation process with stakeholders, the Ministry of Health's Communicable Disease Prevention, Harm Reduction and Mental Health Promotion branch produced a draft document titled *Elder Abuse Prevention in B.C.: Blueprint for Action*. The draft has been approved by all ministries with identified actions, and final recommendations to government are being drafted.



Northern Health is a delegated agency under the *Adult Guardianship Act* and has assigned investigation and support responsibilities to the programs and staff.



In 2012 the British Columbia Psychogeriatric Association sponsored the development of the new resource, *Meeting Seniors' Mental Health Care Needs in British Columbia*. This resource is for those involved in providing care to seniors, including planners, program managers, policy makers, mental health and other health professionals. It provides evidence-based practices for enhancement of the quality of seniors' mental health services, and addresses the implications of new trends and strategies for the mental health care of seniors by reflecting emerging best practice. [tinyurl.com/bcpga2012](http://tinyurl.com/bcpga2012)



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Seniors

**Action: Improve routine screening protocols for mental health and substance use problems during primary care interventions with seniors.**



Fraser Health's Mental Health and Substance Use Services is a partner with the Chilliwack Primary Care Seniors Clinic, a collaborative inter-disciplinary clinical model that provides care to clients and that liaises with their family physician. Skills enhancement and case-based education are an important aspect of this approach.



VIHA's Practice Support Program engaged 376 general practitioners in the mental health learning collaborative series, focusing on anxiety and depression screeners for all adult populations.



To better assist primary care centres with their care plans, Northern Health's elderly services team accepts referrals from primary care physicians to assess elderly people and also to provide medication education, social support and management suggestions.



# British Columbians vulnerable to mental health and/or substance use problems



## Vulnerable Seniors

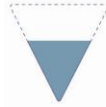
**Action: Use the *Seniors in British Columbia: a Healthy Living Framework* platform and partnerships with local government and other organizations to promote opportunities for older adults to remain socially connected and meaningfully engaged in their communities, including workforce, learning and volunteer opportunities.**



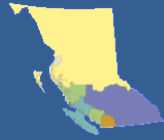
VIHA's Seniors at Risk integrated health network partnered with the Alzheimer Society of B.C. to support the development of the Minds in Motion program for families of persons with dementia. The program offers fitness and social sessions for people with mild cognitive impairment to attend with their family, spouse or caregiver. It is now offered by the Alzheimer Society at ten recreational centers on Vancouver Island. [www.alzheimerbc.org](http://www.alzheimerbc.org)



Northern Health's Home and Community Care uses the *Seniors Healthy Living Framework* and has partnerships with local agencies, social programs, and organizations that support elderly people in remaining socially connected and engaged in their communities.



British Columbians vulnerable to mental health and/or substance use problems



## People with Chronic Physical Disease or Compromised Health

**Action: Implement routine screening in primary care settings for mental health and/or substance use problems among children, youth and adults with chronic health problems and illnesses.**



As part of their chronic disease planning, Northern Health's Mental Health and Addiction Services community response includes the provision of community assessments for youth and adults with mental health or substance use problems.