



## British Columbians with severe and complex mental disorders and/or substance dependence

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## Enhance Evidence-Based Community Interventions across the Lifespan

**Action: Implement integrated evidence-based primary and community care practices for people with severe and complex mental disorders and/or substance dependence.**



The Ministry of Health conducted a best practice literature review on the integrated models of primary and mental health and substance use care in the community to act as a guide for health authorities and assist in the development of new evidence-based approaches. Nine core models were identified as best or emerging practices. The following are a few examples of how that knowledge has been translated into service delivery:



Rapid access clinics in White Rock, Chilliwack, Mission, Abbotsford, and Langley provide timely access to psychiatry consultations for general practitioners in local mental health centres. The consultation process includes an opportunity for information and knowledge exchange during a follow-up conversation between GP and psychiatrist.








Northern Health is developing integrated primary care for clients in communities across the north. In 2012, Northern Health identified three prototype communities (Prince George, Fort St. John and Fraser Lake) to focus on the integration through hiring primary care leads to help develop models of care. This project will create stronger attachments to primary care providers, increase the rate of post hospital follow up, and reduce emergency department visits and hospital admissions.



With funding from Shared Care, a joint B.C. Medical Association and Ministry of Health committee, the Rapid Access to Psychiatry program was developed to expedite access to psychiatric assessment, effective intervention, and follow-up for patients with depression, anxiety, bipolar disorder, concurrent problematic substance use issues and/or co-morbid psychiatric conditions. Staff at the Mood Disorders Association of B.C. Vancouver premises provide assessments and care for approximately 1500 new patients a year, while maintaining a follow-up cohort of 2000 patients (a traditional psychiatrist working full time might see 150 new patients every year).



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	<h3>Enhance Evidence-Based Community Interventions across the Lifespan</h3>
	<p>Accelerated funding has been approved for a project that will see the integration of community mental health and substance use services and primary care in nine locations across Interior Health over three years. This will mean the addition of physician services to work more effectively with complex mental health and substance use clients with health problems who have no regular family doctor. Kamloops, Vernon and Cranbrook sites are scheduled to open in early 2013.</p>
	<p>The University of Victoria is working with health authorities and the Ministry of Health to develop program standards and guidelines for the intensive case management model of care. This model serves very hard to reach individuals with severe substance use problems and mental health needs through an outreach, community based approach and is an integrated model for primary care.</p>
	<p>Funded by Health Canada and led by Mental Health &amp; Addiction Services, with support from the Ministry of Health and regional health authorities, B.C.'s Drug Treatment Funding program (DTFP) Strengthening Treatment Systems program targets complex systems-change to support knowledge exchange and evidence-informed practice across substance use services and supports. The DTFP has contributed to deepening understanding for different types and sources of <i>evidence</i> that inform practice, including Indigenous knowledge, practice knowledge, client and family experience, and research knowledge.</p>
	<p>Integrated care teams in Victoria and Cowichan have been operational since October 2011. These teams are made up of a nurse case manager, a psychiatrist, a general practitioner and the client.</p> <p>Oceanside Mental Health and Addictions Services are working with primary health care physicians to expand the outreach role for the addictions outpatient detox structure. Currently, primary health care sites have a nurse or clinician providing services.</p>



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## Enhance Evidence-Based Community Interventions across the Lifespan

**Action: Implement early psychosis intervention programs utilizing provincial standards and guidelines.**



Vancouver Coastal Health and Northern Health joined the Early Psychosis Intervention Advanced Practice Pilot (EPI APP) last year. The training and clinician community of practice has been well underway. The manager/leader community of practice started earlier this year. Fraser Health led the development of the *Provincial EPI Evaluation Framework*, based on the provincial standards and guidelines, which has been approved by the Provincial Mental Health & Substance Use Planning Council in September. The EPI APP will support the implementation of the EPI evaluation framework.



Northern Health Mental Health and Addictions has implemented the Early Psychosis Intervention (EPI) program standards and guidelines. In addition, Northern Health EPI has developed the program model to include substance use with EPI.



Victoria Early Psychosis Intervention (EPI) program has reviewed the B.C. EPI standards, completed the program evaluation form, and conducted a peer review in December 2012. Findings from the review are being utilized to continue to enhance the program to better meet provincial standards and guidelines.




**Action: Implement optimal evidence-based medication treatments.**



Individuals who have a poor response to treatment for their psychosis experience poorer quality of life, longer hospital stays, lost years of activity that is meaningful to them and possible premature death. Fraser Health has launched a Psychosis Treatment Optimization program, in which a person's primary care physician, psychiatrist, and other health care providers work collaboratively to improve health outcomes, including a reduction in emergency visits and admissions to hospital. In 2012, this program was extended to include all communities



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	<b>Enhance Evidence-Based Community Interventions across the Lifespan</b>
	within Fraser Health.
	The psychiatry department in Prince George discusses current research findings in medications.
	The Ministry of Children and Family Development provided consultation to the development and implementation of an action plan to optimize pharmacological treatment for children, youth, and adults with psychotic disorders that are not responsive to first level treatment. The action plan will be completed by the end of 2012.



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## Enhance Evidence-Based Community Interventions across the Lifespan

### Action: Implement evidence-based forms of assertive community case management.



The Surrey Assertive Community Treatment (ACT) program began in February 2012 and a graduated ramp-up to a full client load is underway, with 52 clients enrolled in the program as of September and 80 active clients planned by March 2013. The program is fully staffed, the housing broker contract has been awarded and clients are experiencing excellent clinical outcomes. In addition, a new ACT team will be implemented in January 2013 to serve New Westminster and Tri-Cities, with capacity to serve 80 to 100 clients.



Northern Health Mental Health and Addictions created an Assertive Community Treatment team in Prince George based on the provincial guidelines and standards (using the remaining Riverview funding).



In VIHA, five Assertive Community Treatment teams are currently in place: four in Victoria and one in Nanaimo. The implementation of two more teams is underway in Port Alberni and Campbell River.






### Action: Implement evidence-based models for crisis intervention including suicidal crises.



Northern Health Mental Health and Addictions participated in the provincial suicide clinical framework committee. In addition, the creation and implementation of centralized intakes has created capacity for community crisis response in each of the communities.







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	<h2 style="text-align: center;">Enhance Evidence-Based Community Interventions across the Lifespan</h2>
	<p>An integrated mobile crisis response team operates in south Vancouver Island seven days per week. The team consists of Mental Health Addiction Services social workers, nurses, a child/youth clinician, and plainclothes police officers.</p>
<p><b>Action: Implement evidence-based rehabilitation services including employment, education, leisure and wellness.</b></p>	
	<p>In 2012, Fraser Health offered wellness recovery action plan (WRAP) classes throughout the region. WRAP guides participants through the process of identifying and understanding their personal wellness tools and resources and helps them to develop individualized plans to use these tools in their day-to-day lives to manage their mental illness. The classes instruct participants in the key concepts of recovery (hope, personal responsibility, education, self-advocacy, and support). WRAP also assists participants to create advance directives that guide the involvement of family members or supporters when appropriate action on their own behalf is no longer possible and supports participants to develop individualized post-crisis plans for return to wellness.</p>
	<p>In cooperation with Douglas College, health authorities, the Ministry of Health, and partner ministries are working to create a psychosocial rehabilitation (PSR) framework that will provide guidance to the mental health and substance use system on best practices in PSR across the continuum of care. This work is foundational for the future development of provincial program standards and guidelines in PSR.</p>
	<p>Mental Health and Addiction Services day hospital and therapy services were reviewed in light of evidenced-based best practices. The expansion of cognitive behavioural therapy programming for individuals with psychosis, depression and anxiety disorders is underway.</p>








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	<h2 style="text-align: center;">Enhance Evidence-Based Community Interventions across the Lifespan</h2>
	<p>Northern Health Mental Health and Addictions (MHA) has implemented rehab services as part of all MHA service teams. In addition a specialized service team has been created in Prince George to provide higher levels of assessment and planning for people with mental health and addiction issues.</p>
<p><b>Action: Enhance and improve B.C.'s methadone maintenance treatment system (including medical, pharmaceutical and psychosocial support components).</b></p>	
	<p>Quibble Creek Primary Care Services opened September 2012, with two sessional physicians providing services 1.5 days per week. Physicians are methadone licensed and clients are also able to access counselling through Surrey Substance Use Services (outpatient/outreach counselling), which is located directly across the hall from Quibble Creek Primary Care Services.</p>
	<p>The Methadone Maintenance Treatment Steering Committee is lead by the Ministry of Health Pharmaceutical Services division and includes partners from Mental Health and Substance Use, Population and Public Health, Patients as Partners, and Aboriginal Healthy Living. This committee is working to enhance medical, pharmaceutical and psychosocial supports to clients of B.C. methadone maintenance programs.</p>





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	<h3>Enhance Housing with Supports</h3>
	<p>Through the provincial housing strategy Housing Matters B.C., the B.C. government has partnerships with eight communities to build more than 2,200 units of supportive housing for those who are homeless or at risk of homelessness, many of whom live with mental health challenges, addiction, or both. To date, construction of over 1,100 units has been completed at more than half of the 32 supportive housing developments, with the remaining buildings to be completed over the next several years.</p>
	<p>Early findings of the Mental Health Commission of Canada (MHCC) At Home/Chez Soi research study suggest that having adequate and affordable housing alongside assertive community care is integral to the overall health and mental health care of individuals experiencing homelessness and mental illness or substance use disorders. As a research study site, Vancouver is learning about the particular needs of those living on the inner city streets and Vancouver Coastal Health will ensure the ongoing care for these clients continues after MHCC funding ceases in April 2013. The knowledge from the study is helping guide planning for appropriate housing options across the province.</p>
	<p>Prince George is one of the five communities identified provincially for the Immediate Homelessness Integration project. This project has twenty community agencies, as well as several ministry and health authority programs, all working in cooperation to provide clinical and support services for people who meet the homelessness criteria.</p>
	<p>The new centralized access to supported housing process has been initiated. This process brings together VIHA and community partners to provide a single access point to supported housing resources for individuals with mental health and substance use challenges. In addition, VIHA has secured a site for developing 22 supported community housing units for high support needs mental health and addictions clients in Nanaimo.</p>



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## Strengthen Community Residential Treatment Options

**Action: Enhance appropriate access to evidence-based community placements and community residential therapeutic options for children and youth with mental disorders.**



The Ministry of Children Family Development (MCFD) completed its Residential Review Project, which seeks to improve the experience and outcomes for children and youth who require residential care. The review included intensive consultations with stakeholders throughout the province and from all aspects of the community services sector. The MCFD *Operational and Strategic Directional Plan 2012/13-2014/15* is addressing the recommendations from the review.



The MCFD Coast Fraser region is implementing complex care intervention, a promising practice originally developed in the Interior region, to support foster parents and others involved in the care of children and youth with complex and challenging behaviours. This model combines recent developments from the trauma, neurodevelopment, emotional regulation and attachments fields to help youth build on their strengths and develop greater skills and resiliency. [www.mcf.gov.bc.ca/foster](http://www.mcf.gov.bc.ca/foster)



Northern Health Mental Health and Addictions (MHA) has developed an integrated service delivery model combining mental health and addictions in all programs from community through secondary and residential. To facilitate access, the community programs have implemented a centralized intake process for both programs in all communities. To support the integration, Northern Health MHA has implemented the new mental health and substance use minimum reporting requirement information system.



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## Strengthen Community Residential Treatment Options

**Action: Provide evidence based treatment options in youth and adult residential substance-use programs, including abstinence based programs as well as those based on harm reduction.**



Northern Health Mental Health and Addictions completed a program review of the Nechako Youth residential treatment program and has implemented an integrated service model based on concurrency.



With the recent release of the service model and provincial standards for adult and youth residential services, the Ministry of Health and B.C.'s health authorities are working together to support implementation through knowledge exchange activities. These activities include: identifying and sharing evidence-informed practices within B.C. residential programs, the creation of a training DVD to assist service providers in incorporating the principles of the standards into their daily practice, regional workshops and a provincial knowledge exchange event. The standards apply to residential treatment and supportive recovery facilities funded by health authorities.



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## Ensure Appropriate Access to Hospital and Specialized Bed-Based Treatment

**Action: Conduct a province-wide satisfaction survey of adults and youth who have received services in inpatient psychiatric and substance use residential facilities.**



Northern Health took part in the provincial satisfaction survey and has disseminated the results to staff and posted for public information.

**Action: Establish provincial health and safety policy requirements for specialized mental health facilities.**



In alignment with the Mental Health Commission of Canada strategic direction, and requirements under the *Mental Health Act* to ensure health and safety of certified individuals receiving inpatient care, a best practices literature review has been completed to guide the development of standards and guidelines for the use of secure rooms across all designated facility sites, from observation units through tertiary and specialized facilities.



Following Accreditation Canada survey requirements, Northern Health Mental Health and Addictions developed a staff, client and family safety pamphlet for use across all programs and sites.



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## Ensure Appropriate Access to Hospital and Specialized Bed-Based Treatment

### Action: Complete the Riverview Redevelopment Project.



Riverview Hospital, established in Coquitlam in 1913 has closed. As of July 2012, the remaining Riverview Hospital patients were transferred to regional health authorities. The province has supported ongoing efforts to transfer patients from Riverview Hospital to new or renovated facilities in communities throughout the province. The new facilities, being built in partnership with the health authorities, provide supportive, home-like environments and facilitate community ties, making rehabilitation and reintegration easier. All health authorities have developed new facilities, with work completed in the Fraser, Interior and Northern Health authorities, and substantially complete in other regions.



As of October 2012, Fraser Health opened the last of the Riverview redevelopment projects called Timber Creek. Timber Creek is a 59 bed tertiary mental health and substance use (MHSU) facility located in Surrey that contains 17 rehabilitation beds, 30 acute assessment and treatment beds, and 12 psychiatric intensive care beds (six beds are funded by Vancouver Coastal Health). With the opening of Timber Creek, this completes Fraser Health's commitment to develop 267 tertiary level MHSU beds through the Riverview Redevelopment project. These tertiary level beds provide significant support to Fraser Health's secondary MHSU system of care and provide tertiary level care closer to home. The 267 beds are located across nine sites within Fraser Health and one site in Vancouver Coastal Health.



Northern Health has completed the Riverview devolvement project. The residential beds transfer was completed through a utilization agreement with Interior Health for the Hillside Centre for three acute beds. The final Riverview funding was used to develop and implement the Assertive Community Treatment team in Prince George in 2009/2010.



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## Ensure Appropriate Access to Hospital and Specialized Bed-Based Treatment



In VIHA, readiness activities are underway at the Cowichan Lodge on Vancouver Island for the opening of 27 adult tertiary beds and 24 seniors mental health tertiary residential beds, to be completed in 2013. In October 2012, Nanaimo Regional General Hospital opened new units for psychiatric intensive care and psychiatric emergency services.

### **Action: Continue to develop the Burnaby Centre for Mental Health and Addiction as a centre of excellence for treatment, research and knowledge exchange.**



The Burnaby Centre for Mental Health and Addiction is a residential treatment facility for clients who live in any region of British Columbia where highly specialized treatment is not available or who are unable to benefit from local treatment and service options. In 2012, a working group comprised of health authority representatives and other stakeholders produced a new functional plan for the Burnaby Centre which responds to recommendations from an external review. The plan includes extensive revisions to the treatment model, access protocols, and service integration components. The Burnaby Centre also assists community mental health and substance use services in each of the health authorities to improve their capacity to serve this challenging, high-needs population. Ongoing discussions with stakeholders will continue to address referral pathways, treatment and transition to community services, the management of access, and post-discharge community supports.



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## Develop Improved Coordinated Responses for People with Complex Challenges

**Action: Ensure appropriate access by children, youth and adults with developmental disabilities and mental illnesses to integrated community-based treatment and support services.**



The Ministry of Health is supporting an opportunity for health authorities, the Ministry of Children and Family Development and Community Living B.C. to explore a collaborative approach to providing standardized training and education, access to research and clinical guidance, and a community of practice for caregivers to individuals with a developmental disability and mental illness, through an advanced practice. While in its developmental stages, Fraser Health is leading this work to bring the necessary providers together to consider improvements in collaborative practice. The work is in alignment with the recommendations of the Deputy Ministers' Review of Community Living B.C. [www.eia.gov.bc.ca/pwd/docs/Improving\\_Services\\_to\\_People\\_with\\_Developmental\\_Disabilities\\_Report\\_FINAL.pdf](http://www.eia.gov.bc.ca/pwd/docs/Improving_Services_to_People_with_Developmental_Disabilities_Report_FINAL.pdf)



Northern Health Mental Health and Addictions took part in a review process that was sponsored by the Ministry of Health on youth transitioning to adult services. Currently, Northern Health is working with the representative for children and youth on a similar review exercise.



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## Develop Improved Coordinated Responses for People with Complex Challenges

**Action: Implement British Columbia’s Children and Youth with Special Needs Framework for Action and the Transition Planning Protocol for Youth with Special Needs.**



The *Children and Youth with Special Needs Framework for Action* and the *Transition Planning Protocol for Youth with Special Needs* continue to guide the partner ministries in the coordinated delivery of services and supports for children and youth with special needs and their families. Over the past year, *Inter-Ministerial Protocols for the Provision of Support Services to School-Aged Children* has been reviewed and updated (posted at [www.bced.gov.bc.ca/specialed](http://www.bced.gov.bc.ca/specialed)), to support and guide co-ordinated delivery of effective services to school-aged children. In addition, the Ministry of Children and Family Development, Ministry of Social Development, and Community Living B.C. have led the cross-ministerial/organizational collaboration to improve the planning process for youth who are likely to transition to adult services. This protocol can be found at [www.mcf.gov.bc.ca/spec\\_needs/pdf/transition\\_planning\\_protocol.pdf](http://www.mcf.gov.bc.ca/spec_needs/pdf/transition_planning_protocol.pdf).





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## Develop Improved Coordinated Responses for People with Complex Challenges

**Action: Develop provincial policies and guidelines for clinical services (such as clinical case management and outreach services) for adults with mental illness and/or problematic substance use and developmental disability.**



Northern Health Mental Health and Addictions and Home and Community Care have been meeting on a regular basis with Community Living B.C. and the Ministry of Children and Family Development to regionally implement the provincial policies and guidelines for this population.



VIHA has a representative on the provincial committee to develop intensive case management standards and guidelines.



Fraser Health is leading the development of a developmental disabilities mental health advanced practice in partnership with the Ministry of Health and Interior Health. Phase 1 of this project (to be completed by March 2013) focuses on foundation building and includes the following deliverables:

- Develop a project charter and establish a provincial advisory committee.
- Define an education and training program that assesses the readiness and education needs of partners, determines the delivery mechanism for training, and also researches materials specific to substance use.
- Develop training materials.
- Develop an implementation and sustainability plan with partners.



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## Develop Improved Coordinated Responses for People with Complex Challenges

**Action: Develop guidelines to ensure that youth and adults with a mental illness and/or problematic substance use who are in contact with the criminal and youth justice system have access to appropriate transition and support services.**



Through an inter-ministry partnership between the Ministry of Health and the Ministry of Justice, work is underway to improve continuity of care for adults with mental health and substance use problems who are in contact with adult custody and community corrections. Intended outcomes of the work are to improve integrated planning for clients, to improve service linkages to better support transitions between corrections and community health resources, and to facilitate appropriate information sharing between the two systems. The development of a transition protocol for corrections clients with mental health and substance use problems is nearing completion, further work will include a provincial service framework and information-sharing protocols between the health and justice systems.



Northern Health Mental Health and Addictions collaborates with the Ministry of Children and Family Development on youth transition services for youth identified with complex needs.



VIHA's Youth and Family Substance Use Services, Children Youth and Family Mental Health, and Ministry of Children and Family Development Youth Justice are working on developing protocols and guidelines to enhance collaborative practice, treatment planning, and transitions across the respective services. A survey and environmental scan is being conducted to identify key themes, areas of excellence in collaborative practice, and challenges when working across systems and mandates.



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## Develop Improved Coordinated Responses for People with Complex Challenges



The Ministry of Children and Family Development is currently developing guidelines to support the smooth transition to appropriate services and support for youth with severe mental illness involved in the justice system.