

Clause 10 in Report No. 1 of Committee of the Whole was adopted, without amendment, by the Council of The Regional Municipality of York at its meeting held on January 25, 2018.

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Update on the Mental Health Matters Initiative

Committee of the Whole recommends:

1. Receipt of the presentation by Katherine Chislett, Commissioner of Community and Health Services.
 2. Adoption of the following recommendation contained in the report dated December 7, 2017 from the Commissioner of Community and Health Services:
 1. The Regional Clerk circulate this report to York Regional Police, the Central Local Health Integration Network and the Canadian Mental Health and Addictions Association York & South Simcoe Branch.
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Report dated December 7, 2017 from the Commissioner of Community and Health Services now follows:

1. Recommendations

It is recommended that:

1. The Regional Clerk circulate this report to York Regional Police, the Central Local Health Integration Network and the Canadian Mental Health and Addictions Association York & South Simcoe Branch.

2. Purpose

The purpose of this report is to provide an update on Mental Health Matters, an initiative led by Community and Health Services in partnership with York Regional Police.

3. Background and Previous Council Direction

York Region continues to support residents with diverse and complex mental health needs

One in five Canadians will experience a mental health problem or illness in any given year. Stigma with respect to mental health can seem invisible but its effects are not. It can be a barrier to accessing services. While municipalities generally do not have a significant role in providing mental health services, the mental health of the people we serve can have impacts on their ability to access services.

In [November 2016](#), Council received an update on the York Region Mental Health Matters initiative. The need for this initiative continues with the growing complex needs of the residents we serve:

- York Region Paramedic Services and York Regional Police have experienced an increase in calls related to mental health issues by approximately 40 per cent from 2012 to 2016
- 70 per cent of clients in Social Services face multiple barriers, including mental health issues
- Residents struggle to maintain their housing due to mental health issues
- Youth cycle on and off the streets, couch surf, and are in and out of emergency shelters

Mental Health Matters includes a range of actions intended to improve the way we provide services, focusing on early intervention, prevention and effective responses to crisis

The York Region Mental Health Matters initiative is led by Community and Health Services in partnership with York Regional Police. It's overarching purpose is to change the way we provide services in recognition of the mental health issues that people we serve may be experiencing, including partnering with community agencies to help access supports. The action plan includes the following priority areas:

1. Promote culture change through capacity building, training and resiliency
2. Coordinate services for early intervention and identification of gaps
3. Develop effective crisis intervention strategies to reduce preventable reoccurrences

4. Promote psychological health and safety among staff by fostering a positive and productive work environment

4. Analysis and Implications

Action Area 1: Training and resiliency building will increase staff capacity and promote a culture of change

Many York Region programs are used by clients with multiple and complex barriers, including mental illness that may limit their ability to access services. Many of our frontline programs continue to experience challenges helping clients with mental health issues. For example, some clients struggle to complete applications for programs such as housing and Ontario Works, lack follow-through to maintain their eligibility for programs, and/or fail to keep appointments for accessing much needed services.

It is important to have a culture that ensures equitable access to Regional services for people with mental health issues. Therefore, knowing that we have clients who may not be able to access services as they are currently delivered due to mental health issues and related behaviours, as part of the 2017 Action Plan, a strategy was implemented to train staff on the skills they need based on their work with clients. To date, a total of 1,282 Community and Health Services staff and managers have received one or more of the following training modules (see Attachment 1):

- Mental Health First Aid (Basic and Seniors)
- safeTALK
- The Working Mind
- Refugee Mental Health
- Applied Suicide Intervention Skills Training
- Non-violent Crisis Intervention
- Workplace Mental Health for Leadership Certificate Program

Over 95 per cent of staff who participated in Mental Health First Aid Training are better able to recognize, respond and guide clients with poor mental health or mental illness

Preliminary data from the training shows that it is having a positive impact on staff's capacity to recognize, respond and appropriately refer clients with mental health or mental illness. In 2018, training will be continued and enhanced to further build capacity across the department to meet the growing mental health needs of clients.

To further support efforts in creating a welcoming and inclusive environment for accessing Regional services, internal anti-stigma and awareness campaigns were undertaken. These campaigns focused on addressing stigma and creating safe spaces to talk about mental health without the fear of being viewed differently.

In addition to being aware of and responsive to the mental health needs of our clients, staff may experience compassion fatigue as they support clients in difficult circumstances. In recognizing this, the campaigns were also targeted to promote coping strategies for staff to build their own resilience. Research shows that a mental health environment that supports and nurtures resilience in staff indirectly supports and nurtures resilience in their clients.

Action Area 2: Providing services in a coordinated manner eases accessibility of services for clients with mental health needs

One of the most often reported challenges in accessing programs and services is service navigation. Even when services exist, and where there are minimal or no wait lists, it is difficult for anyone to know all of the services they are eligible for and how to access them. Residents who experience mental health issues have expressed frustration with having to tell their story multiple times to multiple workers to receive various services. Two key barriers to service coordination are:

- Privacy concerns that prevent the sharing of personal information between program areas
- Lack of an integrated case management system

A "Common Client Consent" pilot is helping to balance privacy concerns with improving communication between programs and allowing coordination of care for clients

Privacy legislation correctly limits government program areas from sharing information about individuals. Many program areas have their own rules and requirements for getting consent from their clients to receive and use personal

information. Clients typically must give informed, written or verbal consent to every service area they access. For example, a homeless single parent may need to work with four or more different program areas – housing, Ontario Works, children’s services and homelessness services – and staff from those programs may not share information about the mother with each other in order to reduce the burden for her, or to develop a coordinated service plan.

In 2017, Community and Health Services successfully piloted common consent. This is a form and a process which allows an individual to authorize different program areas supporting them to share their personal information for the purposes of staff providing streamlined, wrap-around service. Common consent allows clients to access multiple services without having to retell their stories multiple times and for staff to make appropriate referrals for services in a timely manner. The pilot includes the following program areas: Homelessness Community Program, Community Partnerships and Support Programs, Community Paramedicine, and Integrated Psychogeriatric Outreach Program.

The client has full control over which programs would be authorized to share their personal information. In addition, the client may retract all or part of their consent at any time.

In total, 294 clients from four Community and Health Services programs enrolled in this pilot from June to December 2017. As the pilot has demonstrated positive results, the above programs are making this option permanently available to their clients after the pilot ends. In 2018, staff will be identifying areas for improvement to the consent tools and process based on the pilot results, and will develop a plan to onboard additional department programs.

An Integrated Case Management System is under development to provide effective, coordinated, wrap around services to clients

Once a client has given consent to share information between program areas, there needs to be a digital tool to effectively coordinate and manage the provision of all the needed services to the client. Currently, staff manage client services with a combination of manual/paper files through numerous software that are independent of each other. With growing and increasingly complex caseloads, these manual and isolated approaches to case management are unsustainable and ineffective.

An integrated case management system is being developed to enable clients to enter all community and health services programs through one point of access. This would allow staff to manage and coordinate multiple services a client requires and share appropriate information across programs. Streamlining administrative tasks will allow staff who support clients directly to focus on their needs, making it easier to access services.

A multi-disciplinary case management model will be piloted in 2018

The common consent and integrated case management systems are enablers for service coordination. To provide a truly seamless approach to service delivery requires a different way of providing services - collaborative case management of all programs. A collaborative case management approach involves assessing needs, developing a service plan that considers all applicable services we have available to address the specific needs of the client, and then implementing that plan.

Most of these services are mandated by the province. Historically, the way programs are funded, delivered and reported on is often compartmentalized. Since many of Community and Health Services programs are bound by legislative requirements, they are often focused on meeting individual mandated program outcomes which, though important, may not necessarily reflect best outcomes for people facing mental health barriers.

Over the past year, Mental Health Matters has been examining the extent and nature of silos and developing a pilot to provide coordinated care by bringing in a multi-disciplinary approach to service planning. What this means is that staff who are knowledgeable and skilled in mental health issues from program areas such as homelessness, housing, social assistance, children's services, and public health are working together to deliver coordinated services in a manner that is sensitive to the mental health needs of the client. This coordinated care is enhanced by the use of a common consent form and a planned integrated case management tool to be developed in 2018. A pilot to test a multi-disciplinary approach will be launched in 2018.

Action Area 3: Responsive crisis intervention through a rapid response approach is yielding positive results

A Rapid Response Table was established in March 2016 to provide support to residents who are at increased risk of crisis, primarily because of a mental health and/or addictions crisis. The Rapid Response Table is comprised of staff from multiple community agencies such as the Canadian Mental Health Association, York Support Services Network, Children's Aid Society, Home Community Care, Streamline Access, Southlake Health Centre, LOFT and Addiction Services of York Region, York Region Paramedic Services and Social Services, and York Regional Police.

This table reviews cases of individuals brought forward by York Regional Police, York Region Paramedic Services and participating community agencies who are deemed at imminent risk of inflicting harm to themselves or others (referred to as acutely elevated risk).

The Rapid Response Table follows the Four Filtered Approach developed by the Ministry of Community Safety and Correctional Services. This approach was created to allow multi-sectoral risk intervention models like the Rapid Response to come together for the purpose of harm reduction without necessarily obtaining express consent from the individual to share their information. While it is preferred that the referring party seek consent, if there is imminent risk to self or others, the Rapid Response Table has permission to discuss the case limiting personal and identifiable information. The appropriate partners at the table will immediately intervene with a coordinated response to ensure that the person in acute risk is connected to appropriate, timely, and effective supports.

There are many examples of successes achieved through the Rapid Response Table

Paramedics Services presented a case of a single woman new to York Region who was estranged from her family. She had a long history of abuse with no actual mental health diagnosis. She had been abusing alcohol for several years, and was removed from rehabilitation because of non-compliance with program requirements. Community Paramedics assessed her at a local emergency housing service. They found that she had no social support, lacked English language skills, had a history of public intoxication resulting in arrests, and had several emergency department visits. Paramedics presented the case at the Rapid Response Table. As a result, York Region Support Services Network, Addiction Services York Region and Canadian Mental Health Association connected with her. As an outcome of that joint intervention, she has been stably housed in the community with active participation in programs such as addictions recovery and English classes. Paramedics have conducted follow-up assessments and found her to be actively involved with her case worker and moving forward in a positive direction.

A proposal for a Mental Health and Addictions Hub is under development by community partners, including York Region and York Regional Police

Thousands of residents call 911 each year for mental health and/or addictions issues and are transported by police or paramedics to one of three York Region hospital emergency departments. In 2012, there were 5,869 calls related to mental health and addiction for paramedics and 3,429 calls for police; by 2016 this increased to 7,291 calls for paramedics and 4,334 calls for police. York Region currently does not have a dedicated emergency mental health facility.

Often these residents are discharged from emergency departments without a coordinated care treatment plan that connects them to suitable mental health and/or addictions supports. This has negative impacts on clients as it is a lost opportunity to coordinate with the wide range of services available that may help

reduce or eliminate the need to access crisis support in the future. In addition, chronic use of the emergency health system for mental health and addictions issues is costly for paramedics, police and hospitals.

Community partners such as York Region hospitals, police, paramedics, community agencies, and local politicians have worked together over the past year to consider ways to better address mental health/addiction emergencies in York Region. At the time of writing this report, the group had recently completed a proposal for a Mental Health and Addictions Hub model, to be submitted to Central Local Integration Health Network for funding.

The Mental Health and Addictions Hub is proposed to serve as an alternative to hospital emergency departments for people in mental health and/or addictions crisis by providing:

- Crisis and Stabilization Beds
- Rapid Access to Psychiatry
- Rapid Addictions Management
- Withdrawal Management Beds
- Physical Health Supports
- Connections to community mental health and/or addictions supports

If approved and funded by the Central Local Health Integration Network, people will be able to access the Mental Health and Addictions Hub through referrals from primary care physicians, by being brought to the site by police or paramedics, or by self-referral (e.g. walk-in). This hub is intended to divert people from emergency departments and instead provide them with accessible, appropriate mental health and/or addictions health care.

Action Area 4: York Region is committed to supporting employees' psychological health and safety in the workplace

The Regional Municipality of York is committed to supporting the health and well-being of its employees. Psychological health and safety in the workplace is both a key component of an employee's overall health, and a vital part of the health of our organization as a whole.

A psychologically healthy and safe workplace:

- Promotes positive culture through leadership and staff well-being
- Prevents stigma and discrimination
- Contributes to a productive and positive working environment

With that in mind, York Region is implementing the National Standard for Psychological Healthy and Safety – a voluntary set of guidelines, tools and resources focused on promoting employees' psychological health and preventing psychological harm due to workplace factors. To best implement the Standard, staff worked with the Mental Health Commission of Canada and 42 other organizations across the country through a three-year case study to learn best practices for implementing the Standard.

Based on findings from the study, our strategy for implementation is built on solid programs, policies, benefits, training and assessment and focuses on the 13 Factors for Psychological Health and Safety in the Workplace. These factors include the way our work is carried out – or deadlines, workload, work methods – and the context in which our work occurs, including relationships and interactions with management, colleagues and coworkers, and clients or customers.

A number of other items have been implemented as a result of the study, including:

- Updating the Occupational Health and Safety Policy to include psychological health and safety
- Implementing mandatory mental health training for supervisors, managers and directors
- Expanding the Employee and Family Assistance Program
- Increasing psychological support through our benefits plan
- Expanding course offerings to develop resilience skills
- Introducing a number of anti-stigma campaigns
- Embedding psychological health and safety in our leadership development program

York Region's commitment to psychological health and safety in the workplace is consistent with our vision to create strong, caring and safe communities.

Mental Health Matters supports the Region's priority area of Support Community Health and Well-being in the 2015 to 2019 Strategic Plan

The work underway in Mental Health Matters supports the 2015 to 2019 Corporate Strategic Plan's priority area of Support Community Health and Well-Being by better integrating and enhancing supports and adding capacity in our system to meet the growing demands for programs and services that assist clients with complex mental health needs.

5. Financial Considerations

In 2017, Council approved \$631,958 net for staffing to enhance capacity and assist clients that require counselling and specialized case management to overcome complex barriers. In 2018, the Departmental budget request for mental health initiatives was \$847,815 net to add staffing capacity to meet the increasing needs across program areas. The focus of the additional funding in 2018 is on early identification and intervention of mental health needs of young vulnerable parents as well as children and youth.

With a continued strong provincial mandate and direction to improve the mental health system in Ontario, the Region must continue to engage in Mental Health Matters to best position York Region for any possible future funding which may become available at any level of government.

6. Local Municipal Impact

Mental health and mental illness impact residents across all nine local municipalities. As York Region and York Regional Police continue to collaborate, expanding on service integration, Mental Health Matters will further benefit residents across the Region.

7. Conclusion

Mental Health Matters is an overarching initiative aimed at helping York Region and York Regional Police to improve programs and services for clients with mental health issues. In 2017, gains have been made in improving the capacity of management and frontline staff, initiating new activities to improve service coordination, addressing the complexities of crisis, and developing a proposal for a Mental Health and Addictions Hub.

Update on the Mental Health Matters Initiative

For more information on this report, please contact Sutha Balasingham, Head, Departmental Strategic Initiatives at 1-877-464-9675 ext. 72094.

The Senior Management Group has reviewed this report.

December 7, 2017

Attachment (1)

#8121357

Accessible formats or communication supports are available upon request



Mental Health Matters Training Course Descriptions

Course	Description
Mental Health First Aid – Basic or Seniors	Provides staff with greater understanding of the Mental Health Continuum to recognize common mental health illnesses and related issues such as substance abuse; provides strategies to respond and support people in distress or recovering from a crisis; and increases their knowledge of referrals to appropriate supports. The training specific to seniors is targeted to staff that work with seniors and includes modules on delirium and dementia.
The Working Mind – (primary)	Examines effects of mental health and illness in the workplace; identifies indicators of declining and poor mental health in themselves and others; raises awareness about stigma and barriers to treatment; introduces the Mental Health Continuum model and self-assessment; reviews strategies to maintain good mental health.
safeTALK	Prepares staff to identify people at risk; confidently talk about suicide; connect people to resources to help keep them safe
ASIST (Applied Suicide Intervention Skills)	Teaches staff to intervene with someone at risk; help them feel less overwhelmed and suicidal; create a safety plan to avoid danger or suicide in future.
Non-Violent Crisis Intervention	Offers strategies and techniques to manage aggressive situations safely. The emphasis is on early intervention and nonphysical methods for preventing or managing disruptive behavior. It provides both nonverbal and verbal techniques to help to defuse and de-escalate hostile behaviors and resolve a crisis.
Refugee Mental Health for Settlement and Social Service Providers	Provides the fundamental concepts of refugee mental health, with a focus on determinants of mental health, common mental disorders and best practices for support. It is designed to provide workers with the necessary information, skills and tools required to identify and support refugee clients with mental health problems.
Workplace Mental Health for Leadership Certificate Program	Supports the development of empathetic and solution focused skills among managers. Participants will get a broader understanding of mentally healthy workplace, their role in early intervention as well as healthy workplace behaviours, norms and practices as it relates to the National Standard for Psychological Health and Safety.




Update on the Mental Health Matters Initiative

Presentation to
Committee of the Whole

Katherine Chislett

January 18, 2018

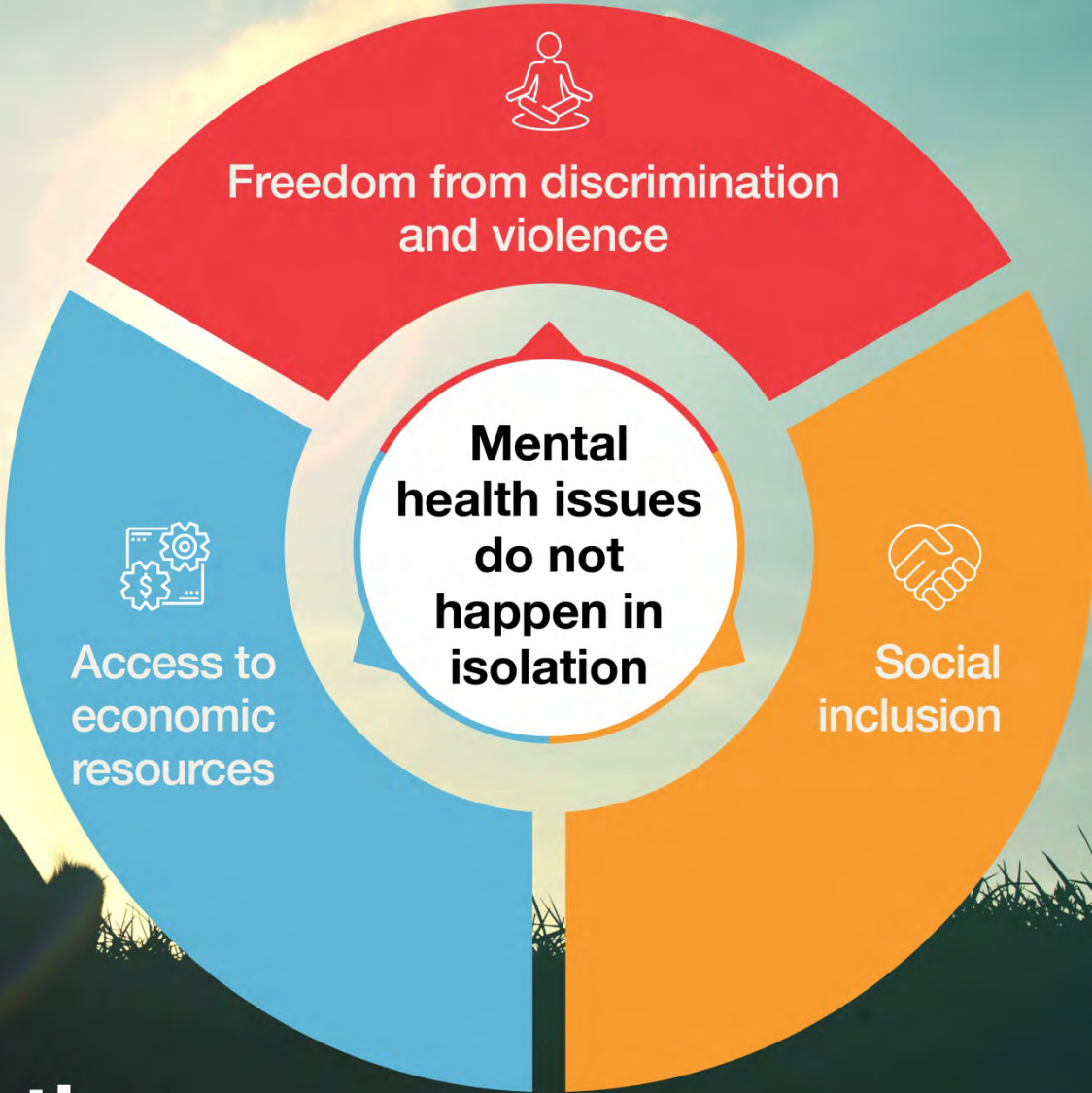
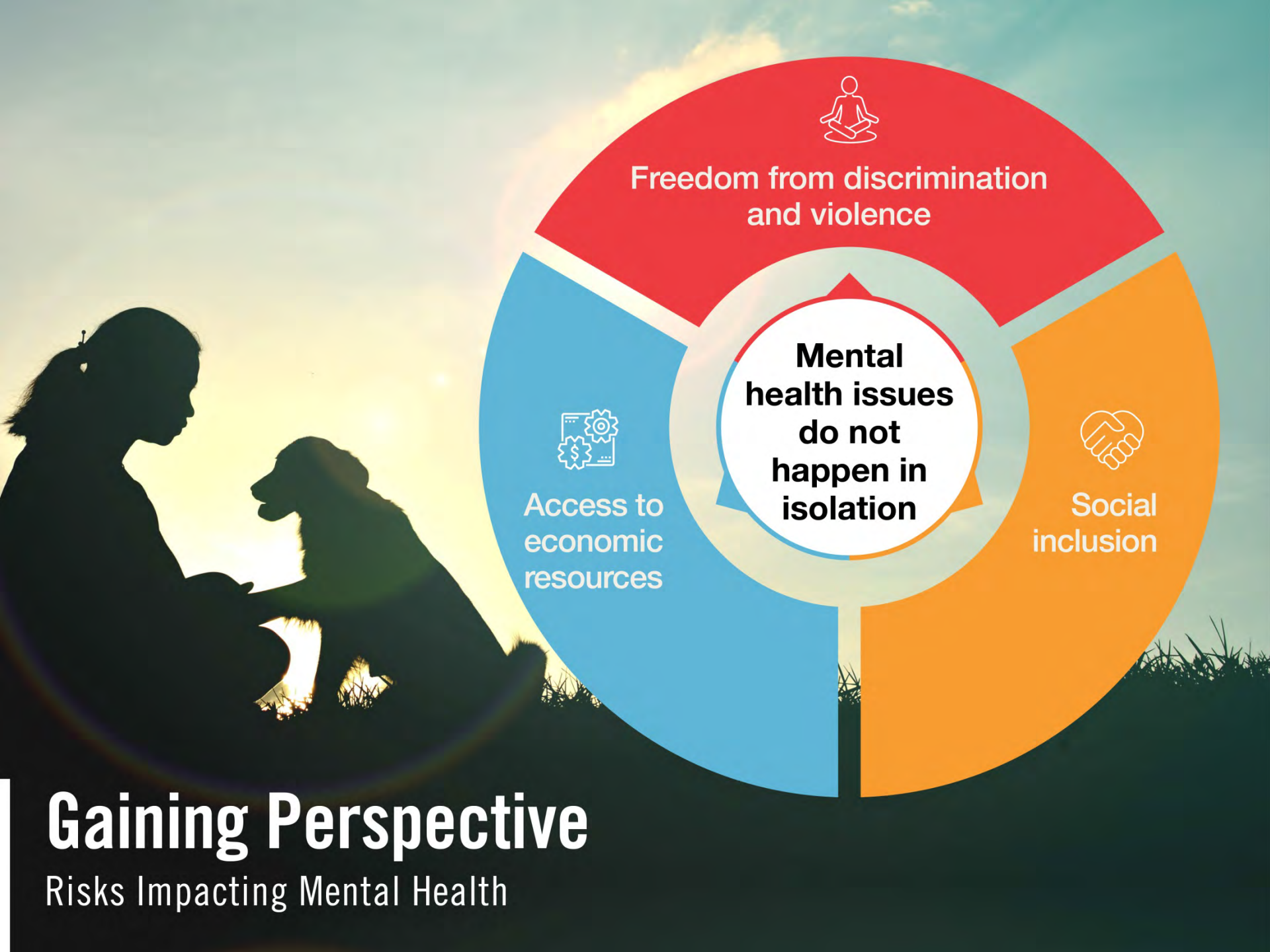


A growing number of residents face multiple and complex barriers related to mental health

- **Mental health calls to police and paramedics** increased more than 40% in five years
- **Parents struggling** to care for their new babies
- **Ontario Works clients struggling** to move through the application process
- **Tenants having difficulty** being successful tenants

Mental Health Matters

Building Capacity and Providing Supports



Gaining Perspective

Risks Impacting Mental Health

mental health matters



Value, support and advocate for positive mental health

Action Plan priority areas:

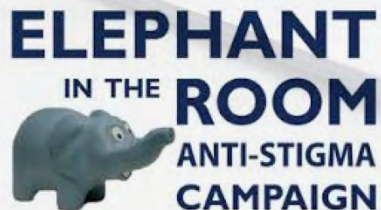
- Training and Resiliency
- Coordination of Services
- Crisis Intervention
- Psychological Health and Safety

Building Capacity


Developing an Action Plan



1,282 managers and staff are trained in mental health




Training and Resiliency



“It’s having to tell our story **multiple times**
to multiple workers to receive services”


Common Consent
Service Coordination

A photograph of two women in a professional setting. The woman on the right, with dark hair and wearing a pink shirt, is looking towards the woman on the left. The woman on the left has blonde hair and is wearing a blue and red plaid shirt. She is holding a clipboard and a pen, appearing to be writing or reviewing a document. The background is slightly blurred, showing what appears to be an office or service center environment.

Implementation of a **case management system** will enable clients to enter all community and health service programs through one point of access

Integrated Case Management System


Service Coordination



This approach will enable a **more coordinated process** for easier access to services

Multi-Disciplinary Approach

Service Coordination

A man with brown hair, wearing a grey hoodie, is shown from the chest up. He has his right hand pressed against his forehead and is looking down with a distressed expression. The background is a light, neutral color.

A proposed Mental Health Crisis Hub could provide:

- Crisis and stabilization beds
- Rapid access to psychiatry
- Rapid addictions management
- Withdrawal management beds
- Physical health supports; and
- Connections to community mental health and/or addictions supports

Finding Solutions

Crisis Intervention

THE 13 FACTORS

of a Psychologically Healthy
and Safe Workplace



A Deeper Dive

Corporate Response to Mental Health



Moving Forward