



Developing an innovative crisis service model

for people experiencing crises
related to substance use:
a collaborative approach

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This Presentation:

1. Overview of Toronto Drug Strategy
2. About the Crisis Model Working Group
3. Summary of research findings
4. Draft crisis service model
5. Contact info



Toronto Drug Strategy (TDS)

- City Council adopted strategy, Dec. 05
 - 68 recommendations for action
 - ⇒ Based in consultation, research → evidence
 - ⇒ Balance public health/ public order concerns
 - ⇒ Comprehensive approach, ‘4 pillars’
 - ⇒ Sets priorities, guides actions, promotes collaboration
 - Collaborative implementation
 - TDS Implementation Panel, Working Groups



Crisis Model Working Group (CMWG)

- Mandate - Implement TDS Rec. 27:
 - ➔ Develop 24-hour service model for people experiencing crises related to substance use
- Terms of Reference
- Chaired by community member
- Staff acted as resource, facilitator
- Met regularly over two years



CMWG Challenges

- CMWG group membership fluctuated over two years
 - Some sectors difficulty participating, e.g. emergency ambulance services (EMS)
- No funding
 - Research project
 - Cost analysis
 - Crisis service



Defining 'Crisis'

- 'Crisis' may include distress (mental and/or physical), paranoia, aggressive and/or violent behaviour, self-harm, suicidal thoughts, etc.



CMWG Activities

- Targeted specific info for discussion, e.g. crisis services in other cities
 - Subcommittees plus external meetings
- Major research: Needs Assessment developed, directed, conducted by CMWG:
 - Surveys of regular alcohol/drug users (140)
 - Surveys of service providers (334)
 - Current service ‘inventory’
 - Literature review



Research Findings: Crisis Model

- 24-hour place for people to stabilize, with assessment and monitoring
 - Crisis phone line
 - Beds available
- Non-medical model with health supports (medical and mental health)
- Staff attitude, knowledge, approach are vital
 - Non-judgmental, calm approach; ‘like a drop-in’
 - Staff includes people with lived experience



Research Findings: Crisis Model

- Staff provide guidance, referrals & service access, help with 'path' through systems
- Formal service links and partnerships, including:
 - Withdrawal management services at time of crisis
 - Aftercare options



Research Findings: Systems

- Current system limitations when people are high/ intoxicated include:
 - Crisis services, shelters, withdrawal management
- Need to improve knowledge across all sectors about how to work with people
 - Withdrawal management helpful/expertise
- Crisis service would benefit clients and service providers
 - Appropriate interventions can reduce burden on other services, reduce system costs



Draft Model: Mandate

- Research findings informed draft service model
- Stabilization and monitoring for people who are:
 - Actively intoxicated/ high and in crisis, or
 - Active alcohol or other drug users in crisis
- Priority: People who may have difficulty using services because of substance use and/or mental health problems, behaviour or communication issues



Draft Model: Outline

- Lead agency is service manager
- Service partnerships – onsite, discharge
- Non-judgmental approach to service
- Expertise re: crisis intervention and de-escalation, substance use & mental health...
- High staff-client ratio, two roles:
 - Health services (medical, mental health)
 - Intake/support staff: multiple roles from initial call to discharge

Draft Crisis Service Model

1) Call from service provider or person in crisis

2a) Resolve crisis on phone



2b) If eligible, admit to program for stabilization:

- Counselling, stabilization
- Case coordination if appropriate

- Counselling
- Rest/ 'chill out' area
- Bed
- Medical/ mental health assistance
- Basic needs – Food, shower

3) Discharge: referrals, follow-up?

- Case Coordination



Next Steps

- Form new Crisis Service Steering Committee to direct and oversee implementation
- Research: Cost analysis
- Full report on Needs Assessment
- Introduce model, receive input:
 - Community members
 - Various sectors, e.g. medical services
- Seek funding and resources
- Build partnerships

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