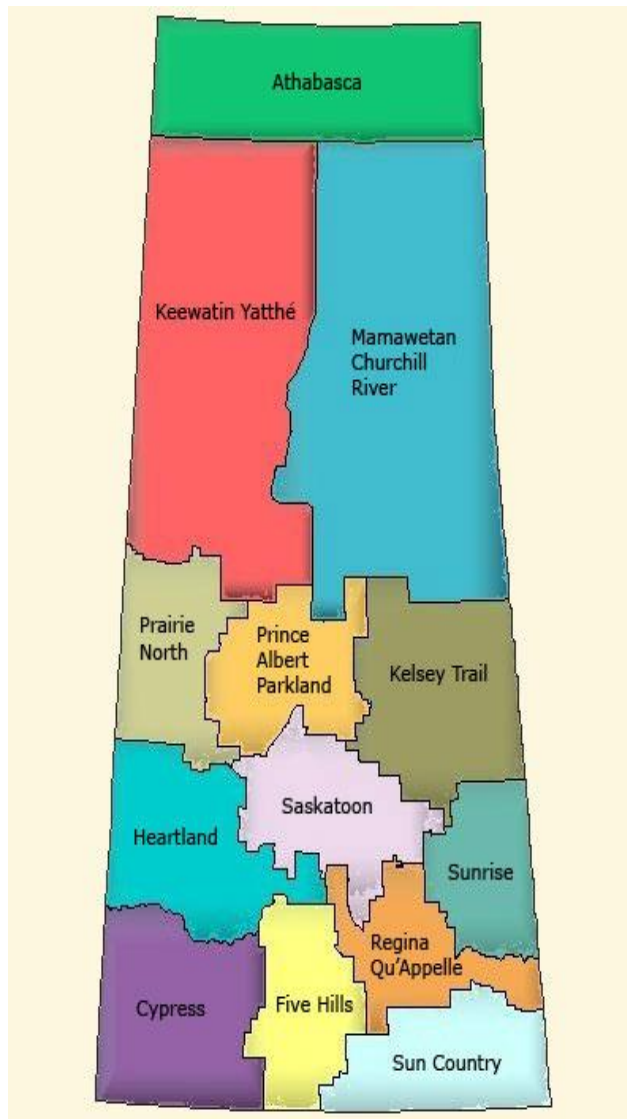


# **Regina Qu'Appelle Health Region's Mental Health & Addiction Strategy**

Issues of Substance Conference  
Halifax, Nova Scotia  
November 2009

Lorri Carlson  
Executive Director  
Mental Health & Addiction Services





- diverse geographic area 26,663 sq.m.
- 245,000 residents
- 17 First Nation communities
- 10,000 employees
- annual operating budget is roughly \$800 M

- Administratively integrated since 1998  
(provincially all MH & A services have been integrated for a number of years)
- Budget \$34.75 M (4.3 % of the regional budget)
- 292 staff
- several outpatient sites
- 50 bed adult psych. unit /10 bed adol. psych unit
- 45 bed brief/ social detox opening 2010
- 6 bed secure youth detox (2006)
- 23 bed inpatient addiction treatment center (operated by a community based organization)

***Adult Out-Patient services include:***

***Rural Community Health Services***

***Health Promotion and Education***

***Mental Health Clinic/ Adult Outpatient Program***

*Intake( screening) Team*  
*Transition Team Crisis Response Team*  
*Adult Community Program*  
*Abuse Interventions Services*  
*Rehabilitation & Vocational Services*  
*Approved Home Program*  
*Financial Assistance*  
*Psychiatry services*

***Addiction Services***

*Substance Abuse Day Program*  
*Problem Gambling Day Program*  
*SIG Safe Driving Program*  
*Harm Reduction Methadone Program*  
*Hospital Liaison – Mother Baby &*  
*Psychiatric Units*  
*Addiction Education & Promotion*

***Community contracted agencies***

*Canadian Mental Health Association, Regina Inc.*  
*Mobile Crisis Services*  
*Phoenix Residential Society*  
*Salvation Army Waterston Centre*  
*Regina Recovery Homes*

## **Youth Out-Patient services include:**

*Children's Services team*

*Youth Services team*

*Young Offender Service team*

*Child and Adolescent Psychiatry*

*Alliance for Suicide Awareness and Prevention:*

*Randall Kinship Centre*

*Early Psychosis Intervention Program*

*Cognitive Disabilities Program:*

*Kids First Mental Health (includes collaborative of 6 community agencies)*

*Intake Program*

*Community contracted agencies*

*Autism Resource Centre*

*Rainbow Youth Centre*

*Youth addiction services*

*Youth Community Outreach*

*High Risk Youth Outreach*

## **National & Provincial Context:**

- National Mental Health Commission's Strategy
- National Addiction Treatment Strategy
- Movement to Integrate Mental Health & Addiction Services in many jurisdictions

## **Provincial initiatives:**

- Patients First Review
- Drug strategies
- Mental Health Strategy
- Independent addiction agency

## **Local Initiatives:**

- Regina Regional Intersectoral Committee
- Regina & Area Drug Strategy

**1995 ADM's Human Services Integration Forum formed  
9 Regional Intersectoral Committees (RICs)**

**RIC Members:**

- o City of Regina
- o Ministry of Corrections, Public Safety & Policing
- o Ministry of Education
- o Ministry of Health
- o Ministry of Justice
- o Ministry of Social Services
- o Prairie Valley School Division
- o Public Health Agency of Canada
- o Regina Catholic Schools
- o Regina Police Service
- o Regina Public Library
- o Regina Public Schools
- o Regina Qu'Appelle Health Region
- o Sask. Housing Corporation
- o Service Canada
- o SIAST
- o United Way of Regina
- o University of Regina
- o Urban Aboriginal Strategy

## **Principles:**

- o Integration
- o Evidence – Based Change
- o Citizen Voice
- o Ownership and Leadership
- o Innovation
- o Communication
- o Inclusive
- o Determinants of Health
- o Bias for Action

## **Collaborative Projects:**

- o Auto Theft Strategy
- o Youth Justice Forum
- o Fire Reduction Strategies
- o North Central Shared Facility
- o KidsFirst
- o Regina & Area Drug Strategy
- o Cognitive Disability Strategy

## **Regina & Area Drug Strategy**

- 2001 Regina Crime Prevention Commission identifies addiction as priority
- Community Stakeholder forum was held resulting in a commitment to a local Drug strategy
- 2003 Regina & Area Drug Strategy Report

## **Provincial Premier's Project Hope – 2005**

- 60% increase in funding for addiction services

## **Resulting Jointly Run Services:**

- 6 bed Secure Youth Detox (Ministry of Corrections, Public Safety & Policing)
- Regina Drug Treatment Court (Ministry of Justice & Court Services)
- High School Addiction Counseling Services (Public Board of Education)
- 10 bed Dedicated Substance Abuse Unit at the Regina Provincial Correctional Center

- July 2009      **Project plan**
- Sept 2009      **Best practice review** and an environmental scan
- Sept 2009      **Internal consultations** to engage the managers & staff in the planning & to invite them to envision service delivery for the future.
- Sept 2009      **RQHR Board re-affirms** Mental Health & addiction issues as important health issues.
- Oct 2009      **Provincial Patients First Review** released. MH& A issues were included but not profiled as key priorities.

The following principles were derived from the work of the National Treatment Strategy & Services integration strategies in other jurisdictions.

The Managers and staff were introduced to the tiered/stepped care model of Service delivery and the following principles were adopted.

- 1) A coordinated **multi-sectoral** approach is required.
- 2) Residents of the RQHR should have access to effective mental health/addictions care. (Principle of **universal access** to basic healthcare which includes mental health).
- 3) Practice must be **informed by the evidence** found in the research literature.
- 4) Services should be responsive to the needs of consumers, families and communities and **informed by gender and diversity** based analysis.

- 5) Mental health/addictions requires a **population health approach**.
- 6) Systems are **accountable** for providing effective and safe services and supports.
- 7) The **level of resources** committed to mental health/addictions will **determine outcomes**.
- 8) Services will be **responsive to local circumstances and needs**.

***Tier 1: Prevention and health promotion initiatives targeted to the general population or at risk populations, after care for people who have accessed services at higher tiers, and Community Support Groups.***

***Recommendation: EXPANSION OF KIDS FIRST SERVICES (Rural and Urban)***

- KidsFirst supports families with young children who are at risk*
- delivered by community based organizations*
- includes a home visitors program, subsidized daycare placements and a range of supportive programming*

**Tier 2:** *Early identification and intervention, Screening, brief intervention and referral, Services and supports shared with providers across sectors.*

**Tier 3:** *Identification, engagement, and active outreach, risk management and referral, Low intensity monitoring and treatment.*

**Recommendation: INTERGRATED INTAKE & BRIEF INTERVENTION TEAM**

- *target clients with mild to moderate symptoms who currently do not receive care*
- *capacity to respond quickly to service requests (eliminate wait lists)*
- *system responsible to ensure clients are matched to appropriate service*
- *Program components will include:*
  - *Assessment, screening & referral for all individuals*
  - *Brief intervention for mild clinical presentations*
  - *Low intensity treatment (4 to 6 sessions) for moderate to severe symptoms.*
  - *Telephone based support, active outreach and crisis intervention*

**Tier 4:** *Comprehensive & specialized services, Assessment, intensive counseling, assertive community treatment, Often multiple problems.*

**Recommendation: DEVELOP ASSERTIVE COMMUNITY TREATMENT TEAMS**

- youth & adults with complex and challenging cognitive, behavioral, addiction and mental health issues.

**Tier 5:** *Intensive treatment for highly acute, chronic and complex persons, Residential or hospital based programs.*

**Recommendation: STRATEGY, PARTNERSHIP, POLICY & FUNDING PRIORITIES REGARDING SPECIALIZED HOUSING**

- *RQHR along with other Regional Health Authorities provide leadership in the development of a strategy to leverage the accountable provincial ministries to respond to the specialized housing needs of youth and adults with significant mental health, addictions, cognitive and behavioral challenges.*
- *The Saskatchewan Government with its historic commitment to de-institutionalization and community based care has not prioritized the development of effective policies and programs to respond to this marginalized population.*

## **Community Stakeholder Consultation (Jan- Feb 2010)**

### **Intent of engagement is to**

- o Introduce a different service delivery approach (tiered model)
- o Ask for advice on process and service delivery approach
- o Invite support to shift resources

## **Public Consultation & Focus Groups (Jan –Feb 2010)**

- o Special interest groups
- o First Nation and Métis
- o Rural
- o Business
- o Clients
- o Other

## **Identify the Strategic Framework for the Future (March – June 2010)**

- o Define strategic themes, key Success Measures and Goals
- o Test & revise strategic themes, key Success Measures and Goals
- o Affirm Strategic Framework with Executive & RQHR Board

## **Current State Assessment and Strategy Development (June–Aug 2010)**

- o Establish priority areas of focus for years 1-2
- o Establish Working Groups
- o Identify action plans for 2011
- o Identify budget requirements for 2011

## **Strategy Implementation (April 2011)**

## Contact Information

Lorri Carlson

Executive Director

Mental Health & Addiction Services

4<sup>th</sup> Floor – 2110 Hamilton Street

Regina, Saskatchewan S4P 2E3

306.766.6112

[Lorri.Carlson@rqhealth.ca](mailto:Lorri.Carlson@rqhealth.ca)