Session ID: A1

Towards Standardization of Stepped Care Models in Mental Health Care: Implementation Examples from 2 Distinct Settings Across Canada & Current Research to Develop Pan-Canadian Standards

Panelists: Sarah Mughal, Jai Shah , Elise Durante, Bryan Young & Alexia Jaouich
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Affiliations: *1McGill University, 2Foundry, 3Stepped Care Solutions*

ABSTRACT

Our fragmented mental health system involves complex and traumatic pathways to care, poorly coordinated transitions, and unacceptably long waitlists. This creates a massive treatment gap for those in need, and is a crucial challenge to delivering mental health care in Canada.Stepped Care (SC) involves integrating a range of interventions, including the provision of low-intensity treatments alongside more intensive ones, purposefully arranged as part of a continuum such that interventions can be "stepped" up or down as needed. By integrating multiple services, creating smooth transitions between them, and connecting clients to services that match their needs, SC has the potential to become a best-practice delivery model and help resolve pressing system challenges. Despite promise and high uptake, there is no current agreement regarding what defines SC implementation. This ultimately limits its replicability and utility, preventing SC from being fully realized to guide evidence-based decision making in mental health care delivery. To generate alignment in SC research and practice, this panel will first showcase the following examples of SC implementation in varying Canadian settings:1. Foundry: an evolving Integrated Stepped Care Model across a BC network of Integrated Youth Services.2. Stepped Care Solutions: how Stepped Care 2.0 is being applied to support system transformation in Canadian provinces.We will then describe an active research project to derive pan-Canadian Standards for SC implementation. Participants will hear early results from our national Delphi study and will participate in discussions related to building Standards, deriving national consensus, and strengthening diverse mental health systems.

Session ID: B1

Through multiple lenses: Understanding the impact of walk-in counselling at Foundry

Panelists: Darlene Seto, Elise Durante, Jodh Ghuman & Lara Wease
Submission Authors: *Elise Durante1, George Warr2, Josh Ghuman3, Darlene Seto4*
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ABSTRACT

Foundry's walk-in counselling approach combines a 'walk-in' delivery service format and a single session or 'one-at-a-time' method with solution-focused brief therapy (SFBT) as the therapeutic modality. Studies have found that walk-in counselling is acceptable and beneficial for youth and adults, leading to quicker improvements in psychosocial symptoms as well as higher rates of client satisfaction compared to traditional counselling models. The initial selection and continuing implementation of this service is supported by peer-reviewed literature, evaluations from other organizations, internal program review, and stakeholder engagement. To date, this service has now been implemented at 16 community-based, integrated youth service centres over 7 years. It has proven a strong low-barrier intervention, with nearly 50% of youth accessing this service, accessing Foundry for the first time.The diverse perspectives on this panel will speak to the strengths, challenges, and opportunities around this care model. Key perspectives that will be represented on the panel include:· A policy lens on system impacts and opportunities of the service· An implementation perspective around supporting Centres and training service providers in this method· Clinician perspective on providing care· Young person and their experience and feedback of the service This panel will highlight core learnings from the development, implementation, delivery, and ongoing assessment of Foundry's walk-in counselling (WiC) model to help inform work in other communities.

Session ID: C1

Substance Use Health: A framework for collaboration across a spectrum of services

Panelists: Brianne Peters & Shawn Fisk
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Affiliations: *1Research Analyst, 2Training and Education Partnerships*

ABSTRACT

Collaboration requires an inclusive language that cuts across practice, policy, research, and direct experience. This language does not currently exist when it comes to substance use and health. We have a pervasive language of illness ("addiction") that both supports and "others" the 4.4% of people in Canada who have disorders. For the rest of the 96.6% of people who use substances, there is relatively little information or services. This binary understanding of illness and presumed health has dangerous consequences on the health of people and the economy. It increases barriers to care, perpetuates systemic stigma, and stymies our ability to collaborate and integrate services.On this panel, presenters will share the results of a 2023 national survey about what "average" people in Canada know about substance use and health; and where they turn if they have questions. The results reinforce the need to move beyond a discourse of disorder ("addiction") to include services that support people who use substances across a spectrum (non-use, beneficial, low to high risk and disorder). Panelists will present examples of solutions to fractured services by introducing a Substance Use Healthframework. The framework offers practical and systems-level pathways for more collaboration and coordination across a spectrum of use. They will use the survey questions to engage the audience and conclude with a Q&A. Both presenters have more than two decades of experience as a researcher and service provider; and both have experienced the healthcare system as people living well with substance use disorder.

Session ID: E1

Matching mental health and substance use health care to the needs and goals of children, young people, and their families through a new quality standard

Panelists: Alexandra Tucci, Kai Flicker, Louise Murray-Leung & Amy Porath
Submission Authors: Poppy DesClouds1, Gabrielle Lucente1, Alexandra Tucci1, Mandana Nezhad Bagheri1, Kai Flicker1, Louise Murray-Leung1, Amy Porath1
Affiliations: 1Knowledge Institute on Child and Youth Mental Health and Addictions

ABSTRACT

IntroductionLevels of care models (LoC) organize care from the least to the most intensive and match clients to the most appropriate level of care based on their needs. Though gaining popularity, LoC models are defined and implemented inconsistently. A quality standard on LoC is needed to ensure consistent, evidence-based practice across the child and youth mental health and substance use health sector.ObjectivesWe developed a new quality standard on LoC that is youth-centred, individualized, holistic, and culturally responsive to ensure timely access and increase the quality of care for children, youth, and families.MethodsThe standard was developed in collaboration with service providers, system leaders, young people, and family members using the Knowledge Institute's Standard Development Process. The standard, core principles, indicators, and implementation supports were developed based on literature reviews, expert consultations, and lived expertise.ResultsThe standard is guided by ten core principles: Youth-centred, family involvement, equitable and affirming, complete continuum of care, comprehensive screening and assessment, timely and accessible, flexible and seamless, co-developed with young people and family members, rooted in community and collaboration, and continuously improving.DiscussionThis new standard provides a roadmap for creating consistency in care and will help foster improved collaboration and access to care, while supporting continuous improvement across the sector. In an engaging panel discussion with a youth and family advisor, attendees will explore innovative strategies to foster meaningful partnerships for sustainable change, generate feedback on the quality standard, and develop strategies for scaling up collaborative, high-quality care.

Session ID: F1

Data and measurement in youth mental health services: What is the current state of affairs?

Panelists: Alyssa Frampton, Carolyn Melro, Jai Shah, Manuela Ferrari & Skye Barbic
Submission Authors: Alyssa Frampton1, 2, Carolyn Melro1, 3, Ama Wiredu 1, Jai Shah1, 2, Manuela Ferrari1, 2, Skye Barbic4, 5, Gina Dimitropoulos6, Srividya Iyer1, 2
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ABSTRACT

The CIHR-funded Network Catalyst Grant on Youth Mental Health (YMH) is a pan-Canadian knowledge translation network which aims to provide opportunities for the youth mental health community across Canada and globally to engage, network, share developments, and build collaborations around data and measurement. This panel will reflect and discuss current efforts underway through the network, and how these illustrate and contribute to the broader landscape of youth mental health data and measurement in contextually and culturally diverse communities in Canada.Projects and issues to be highlighted include: Indigenous data governance, data and measurement in post-secondary educational institutions, how data both reflects and shapes identities for patients, and the use of data in both specialist and integrated youth mental healthcare settings.The presenters are both service leaders as well as representatives of the network grant with varied expertise, ranging from measurement to health systems, integration of technology, and involvement of those with lived experience. Presentations will be interactive and conversational, allowing the panelist to highlight the value of collaboration and partnership around such questions.