

Minister's Advisory Panel On

# INNOVATION IN MENTAL HEALTH AND ADDICTIONS

Recommendations and Responses  
March 2017

## MESSAGE FROM THE MINISTER

The ongoing improvement of Nova Scotia's mental health system is a priority of the Department of Health and Wellness.

We have made substantial progress over the years, to support Nova Scotians who live with mental health and addictions needs.

In April 2015, we changed the way health care delivery in the province was managed. This included mental health and addictions care. We began by consolidating the nine District Health Authorities into a single health authority, with stronger ties to the IWK. Consolidation saw the delivery of mental health and addictions supports and services in our province shift to the Nova Scotia Health Authority and the IWK.

A year later, we changed how the Department of Health and Wellness does business, by focusing on advancing public health policy using best evidence.

We know that to continue moving forward, we must look at new and innovative approaches to help Nova Scotians receive the support they need, when and where they need it most.

To support this, in June 2016, I announced the Minister's Panel on Innovation in Mental Health and Addictions. The eight-member, expert panel, includes:

- Starr Dobson, President and CEO, Mental Health Foundation of Nova Scotia
- Dr. Stan Kutcher, Sun Life Financial Chair in Adolescent Mental Health
- Dr. Allan Abbass, Psychiatrist and Founding Director of the Centre for Emotions and Health, Dalhousie University
- Nancy Beck, Masters of Social Work; senior advisor mental health, Sambandh Health Foundation, India; former director, Connections Halifax
- Joe Bishara, Registered Counselling Therapist and School Counsellor, Tri-County Regional School Board
- Sharyn Chapman, Registered Nurse and former Community Mental Health Nurse
- Sara Ramsay, Mental Health blogger and advocate
- Todd Leader, Psychology Department, Saint Mary's University and Consultant in Mental Health and Addictions

I want to thank the panel members for their time and dedication. They bring a wealth of experience from across the mental health and addictions field. Their recommendations will help to further strengthen and improve mental health and addictions for all Nova Scotians.

Thank you,



Leo Glavine  
Minister of Health and Wellness

Before presenting recommendations, the Panel recognizes the following enabling conditions. These conditions not only lay the groundwork for government, but also for the Panel moving forward.

*The facilitation of a cross-government alignment and commitment that ensures Mental Health and Addictions remains an ongoing agenda item at the Social Ministers/Deputy Ministers Table.*

**Response:** Mental Health and Addictions has been added to the agenda of the Social Ministers/Deputy Ministers Table. The Department of Health and Wellness will bring forward all recommendations of the Minister's Advisory Panel on Innovation in Mental Health and Addictions to the Social Ministers/Deputy Ministers Table.

*The establishment of a review group of experts to evaluate and provide advice on any Mental Health and Addictions programs or services to ensure they are safe, effective and evidence-based.*

**Response:** We agree that a review of programs and services is required before implementation, and are committed to ensuring all programs and services are evidence-based. As a result, a new robust evaluation framework has been implemented at both the Nova Scotia Health Authority and IWK, which includes the input of highly skilled clinicians prior to implementation.

*The implementation of a province-wide Mental Health and Addictions Information System to facilitate improved health planning and service delivery decisions.*

**Response:** The province is currently advancing a plan to modernize Nova Scotia's health information systems through the One Person One Record (OPOR) project. We currently have hundreds of technology systems used by our clinicians and support staff to provide patient care across the province. Many of these systems are unable to share information between each other, which leads to inefficiencies and frustration for both patients and care providers. We want to change that. We want to move to a health information system that ensures the right information, is available at the right time, to the right individual.

Given the priority of mental health and addictions, as identified by the Panel, preparations are underway to incorporate mental health information into the first phase of OPOR work, and to centralize mental health patient registration information for the province. These efforts will provide a solid foundation for enhanced province-wide information to support mental health and addictions planning and services. Government is currently evaluating submissions from the Request for Supplier Qualifications (RFSQ) process.

## **Innovation to Implementation**

### **RECOMMENDATION 1:**

*Create a single web and mobile-based platform and 24/7 live answer toll-free phone line to provide consistent access to Mental Health and Addictions information, support and services province-wide. Ensure access to live counselling for youth.*

#### **Response:**

We agree this is an important recommendation. The following three initiatives will be implemented:

The Department of Health and Wellness will work with its partners to identify and promote a single, 24/7 toll-free number, people can call to access mental health and addictions information, supports and services province-wide.

The Department will work with its partners to develop a public awareness campaign. This campaign will help Nova Scotians know which telephone number to call and website to visit, to access mental health and addiction programs and services in the province. Planning for the public awareness campaign will begin once updates on the websites are complete and the identification of the 24/7 number is determined.

The Department of Health and Wellness will work with the Nova Scotia Health Authority to develop a single website where Nova Scotians can access detailed information on mental health programs and services in the province.

In addition to the above, Nova Scotians have access to:

- A toll-free, 24/7, Mental Health Crisis Line that covers the entire province;
- Trained professionals (Mobile Mental Health Crisis Team in Halifax Regional Municipality; or paramedic and police co-visits for outside Halifax Regional Municipality) who can provide home visits which can be accessed through the 24/7 Mental Health Crisis Line.
- The provincial 811 service that is staffed by registered nurses who can assess the urgency of a caller's symptoms and assist them to access appropriate care. These nurses have direct access to 911 and the Mental Health Crisis Line if a caller needs immediate mental health support. Both 811 and 911 operate 24/7 and are interconnected with each other as well as the Mental Health Crisis Line.

- The provincial 211 resource that is available by phone or online, that provides information about mental health programs and services offered in the community by local groups, non-profit organizations and government, including services specific to children, youth and family.
- The Kids Help Phone that provides a Live Chat Counselling Service in Nova Scotia. In 2016, the Department of Health and Wellness provided a \$150,000 grant to support this service.
- The Strongest Families Institute that provides evidence-based mental health services for children, youth and families over the phone and internet. In January 2017, the province through the NSHA and IWK, matched a \$350,000 contribution from Bell Let's Talk for an additional \$700,000 to the Strongest Family Institute.

## RECOMMENDATION 2:

*Ensure developmentally-appropriate, evidence-based, consistent Mental Health and Addictions curriculum at the primary to six level, as well as for students in grade nine and grade twelve.*

### Response:

The Department of Education and Early Childhood Development agrees that evidence-based mental health and addictions curriculum can play an important role in our students' development. As such, the Health Education curriculum in grades 4 to 9 will be updated to focus more on Mental Health and Addictions in an age-appropriate manner as part of the Action Plan for Education. Development of education programs and resources will be directed so as to ensure that best available evidence is used to support mental health related interventions.

The primary to grade six curriculums were recently updated, and if needed, will be further adjusted when the curriculum for grades seven to nine is renewed. To support this, we will review existing evidence based programs that have demonstrated positive health outcomes. Work will also continue to support teachers to build their skills and competencies in delivering the prescription drug misuse lesson plans, and other related outcomes in junior high. We will also ensure that currently available, evidence-based mental health curriculum is fully utilized.

The Public School Program (PSP) guides curriculum implementation and supports in our schools. As we review the PSP and components of health education are updated in senior high school, we will look for ways to better incorporate evidence-based mental health and addictions education options.

To supplement the desired curriculum and program implementation outcomes, we will continue to support schools to ensure they create comprehensive school health environments, including wider accessibility to healthy eating and increasing physical activity.

## RECOMMENDATION 3:

*Develop a standard model for mental health/health care delivery by integrating the supports and services offered by Youth Health Centres, SchoolsPlus and Early Years Centres. The services provided must be evidence and needs based, client focused and youth friendly, providing a full scope of needed supports and interventions.*

### Response:

School facilities provide ideal locations in which to deliver appropriate mental health care to young people. Indeed, that is why programs like SchoolsPlus have been created. This recommendation importantly points out that we can build on the success we have had with Youth Health Centres and SchoolsPlus to provide more focused and/or individualized supports and services in our schools.

Government will engage with independent experts and its health and education partners to develop a standard model of service for integrated mental health and health care delivery for the youth population. SchoolsPlus and Youth Health Centres will be aligned with the goal of functioning as one unit and co-located where possible. Once the model is developed, it will be piloted in several sites and health service providers will be engaged and actively involved in the training, delivery, supervision and evaluation of services. The timeline established for the development of and consultation on the model is fall 2017.

The Departments of Health and Wellness and Education and Early Childhood Development, in collaboration with the NSHA and IWK, will immediately develop terms of reference, which will address joint responsibilities, accountabilities and guidelines for the development of the standard model of care.

By 2019-20, an additional \$4.4 million will be added as a permanent investment in SchoolsPlus to extend it to support all schools in the province. This will result in a combination of approximately 51 new mental health clinicians, SchoolsPlus facilitators and Community Outreach Workers.

## RECOMMENDATION 4:

*All mental health service providers must receive evidence-based suicide risk assessment and suicide risk management training.*

### Response:

The Department of Health and Wellness agrees mental health service providers must have evidence-based suicide risk assessment and management training. Prior to the formation of the Nova Scotia Health Authority, each of the District Health Authorities had different ways of assessing suicide risk and management training.

The Nova Scotia Health Authority has gathered best practices from each of the former District Health Authorities, as well as external sources, including the IWK, and developed a standardized evidence-based policy on suicide risk assessment and intervention. Once approved, the policy will require training be provided to all mental health and addictions staff and physicians. Approval and training is anticipated to be completed by early summer.

The IWK has an assessment and management training tool in place. It has implemented the Assessment of Suicide Risk Inventory tool within its Suicide Risk Assessment, Management and Monitoring policy. It is also included as part of the staff orientation package. Staff within mental health and addictions teams and programs, including the emergency mental health and addictions service with IWK Emergency are trained in suicide risk assessment and management.

The Department of Health and Wellness, based on this recommendation, will work with its partners to identify opportunities to enhance access to evidence-based training for other providers that may care for persons with mental health needs.

The impact of the above interventions to determine their effect on suicide rate reduction in Nova Scotia shall be evaluated regularly and interventions changed, modified, added or discarded depending on demonstrated results.