



Together We Can Progress Update

January 2016



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Together We Can, government's five-year mental health and addictions strategy, has made significant progress since it was released in May 2012. We are improving Nova Scotians' access to assessment, treatment, care and support in communities around the province.

In any given year, one in five Canadians will face a mental health or addiction problem. They have families, friends and communities who want to help. This work is important, and we know there is more to do.

Our goal is to change the way people receive mental health and addictions treatment. Our emphasis is on early intervention, support in the community, help for families, and people leading their own care. We will always offer treatment for those experiencing a mental health or addictions crisis and that may sometimes require inpatient care. By intervening early, and providing services and supports in the community, we hope to improve people's lives and decrease the number of times they may find themselves in crisis.

The Together We Can strategy represents only part of the work involved in mental health and addictions in Nova Scotia. Every day, Nova Scotians receive mental health and addictions prevention and treatment across the province that allows them and their families to lead healthy and productive lives. The province invests \$270 million a year in mental health and addictions, prevention and treatment, and supports, including the actions listed here.

Progress Highlights:

Intervening and treating early for better results

We know that the earlier we can recognize developmental issues in children, including autism, the better our chances of success with intervention and treatment.

Over the past two years, seven primary care practices, including one in a First Nations community, are giving us their feedback on how they conduct the 18-month well baby visit and how they believe it can be improved.

The Strongest Families program provides telephone-based coaching for families with children between the ages of four and 12 who are experiencing anxiety and behavioural problems. This service has been expanded province-wide; it now serves up to 900 families from 320 prior to 2012. Families who took part in 2014-15 reported a satisfaction rate of 81 per cent. According to a standardized rating scale, 94 per cent of the pre-existing problems were resolved.

"Sophia now has the tools she needs to help manage everyday situations, better communicate her feelings with her family, and feel comfortable participating in after school activities. Most of all, Sophia's confidence has improved by leaps and bounds and she's very proud of all her progress."

Lisa Bezanson, parent, Strongest Families Institute's Chase Worries Away Anxiety Program

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Placing mental health clinicians in schools through SchoolsPlus allows children and youth with mental health problems to be identified, treated and if necessary, referred to the mental health and addictions system earlier. The program has been expanded; there are now 20 mental health clinicians serving 40,000 students in grades primary to 12 in all school boards across the province, and another five will be hired in the coming months.

Primary care providers are being trained to help their patients manage mild to moderate mental health problems and illness. Next, we will work to ensure smooth transitions into and out of the mental health and addictions system when patients are in crisis or when their illnesses are acute.

A group of paramedics has been trained in how to understand mental illness. We are now working to expand that enhanced training.

Shorter waits, better care

Before 2012, people would go on a wait list for the services a mental health professional decided could be offered. Today, people and families get to identify what is most important to them, and working with their mental health professional, choose the services they need to reach their goals. Under the Choice and Partnership Approach (CAPA), people and families receive an appointment with a mental health clinician to discuss their own goals and develop a plan to achieve them. People are seen more quickly, and are more involved in their own care.

The results were dramatic. For example, in Cumberland County, most children and youth were waiting 421 days for community mental health services. By the end of 2015, the wait dropped to 88 days. Overall, in Nova Scotia, children and youth waits have dropped from 501 to 118 days.

We continue to work to help people access community-based treatment as quickly as possible.



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The Mental Health Crisis Line has been expanded and is now accessible across the province. This service is available to anyone, any age, anywhere, at any time. Clinicians answering calls can access local mental health programs, EHS, police and emergency departments as needed to support callers.

"We were contacted by one family who was very worried about their family member's mental health. The family lived out of province, had spoken to their relative on the phone and they felt there was a deterioration in their mental health and some bizarre thought content. The crisis intervenor determined that local law enforcement should be called in...and law enforcement determined the individual should be brought to the hospital for further assessment.

This family was grateful that their relative was treated with respect and dignity and that they received the care that was required in a timely manner. They appreciated the interface with law enforcement that supported a skilled mental health approach."

Mary Pyche, Program Leader Acute Care and Crisis Emergency Services, Nova Scotia Health Authority

We also recognize people need support not just from clinicians, but from people in their community who are living with mental illness. Nine peer support specialists have been introduced in four areas of the province. They are Nova Scotians who have experienced their own mental illness and are now in recovery. They have been trained to support others who are returning to the community from hospital or are being followed in a community mental health clinic.

"When I explain that I, myself, suffer from a mental illness, people think 'OK, this isn't someone who's going to tell me what I should be doing. They've been there, done that.' Sometimes the very best people in understanding are the ones who have also been diagnosed."

Carrie Lee, peer support worker, Cumberland County

Families, too, are crucial in helping people who are living with mental illness. Through the Family Work program, mental health clinicians work with families directly as well as in a group format. As of May 2015, 60 families have been seen one on one, while about 200 people have taken part in group sessions, which are often done in partnership with the Schizophrenia Society. Families report great success. In the next 18 months, we will be working toward implementing a program for families of those living with addictions.

The number of opioid dependence treatment spots has nearly doubled, increasing from 75 to 145 in the Nova Scotia Health Authority's Central Zone.

Greater collaboration is happening between mental health staff when working with people living with concurrent disorders, which can be both a mental illness and an addiction. We are offering online training in treating these concurrent disorders. Nearly 250 professionals – social workers, psychologists, nurses, and others – have finished this training, and hundreds more have started it.

The new Gambling Support Network was launched in March 2015, along with an awareness campaign to promote it. The network offers a variety of options for support. Counsellors are available by phone 24 hours a day, seven days a week; people can also chat online with a counsellor, or receive text messages encouraging them in their efforts to quit.

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Aboriginal and diverse communities

Treatment for mental health and addictions isn't a one-size-fits-all approach. We know there is a lot more to learn about how we can best work with First Nations, African Nova Scotians and other individuals whose cultural experience plays a role in both their illness and their recovery.

We have worked with these communities to develop training and awareness to help clinicians work more effectively with First Nations people, African Nova Scotians, and with immigrants.

Mental health clinicians are being placed in First Nations communities across the province to provide more equitable, culturally safe and easily accessible services.

We have worked with the Health Association of African Canadians (HAAC) to better train clinicians about the needs of African Nova Scotians. The HAAC has also organized two conferences in the past two years on the mental health and addictions needs of African Nova Scotians.

Réseau Santé has produced the Guide santé mentale et dépendances Nouvelle-Écosse, which describes, in French, mental health, mental illness and addictions and outlines the services available throughout the province.

There are now 104 Gender and Sexuality Alliance (GSAs) in Nova Scotia schools, an increase of 34 over the past two years, including four in the Conseil scolaire acadien provincial. A partnership with the Youth Project, funded by the strategy, greatly enhanced the schools' ability to develop these new GSAs.

Nova Scotia's population of seniors is growing. Seniors have particular mental health and addictions needs in their homes, communities and long-term care facilities. We will provide more training to care providers to help them support seniors with mental illness and addictions.

Working together differently

People experiencing mental health and addictions issues often find themselves at greater risk of homelessness. Housing Nova Scotia has hired housing support workers to help people find safe and affordable housing, many of whom are living in shelters with a mental illness, an addiction, or both across Halifax.

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Over the past three years, government has provided \$2.6 million to 37 community-based organizations to improve the quality of life for Nova Scotians living with mental illness and/or addiction, and their families. Some examples include:

- Three more trainers can now train others to provide 'Safe Talk' (suicide intervention) and Mental Health First Aid training in French.
- 'Be, Think, Feel' helps Aboriginal youth in Halifax with mental health and addictions issues, including suicide prevention and living a healthy lifestyle.
- The Park Bench Players, an acting troupe of people who are living with mental illness, wrote a manual for other provinces interested in developing a similar troupe.
- Five recreation projects were designed for youth and people with mental illness. A recreation program at St. Mary's University helps international students deal with stress.
- Mental Health and Wellness Fairs were held two years in a row to improve understanding of mental health and mental illness at Auburn Drive High School in Cole Harbour.
- Youth Rock the Highlands is a music program in Cape Breton that helps 12 to 18 year-olds learn leadership skills, gain confidence and role models. All of this leads to positive mental health.

Through the Municipal Alcohol Policy Project, several projects have been funded throughout the province to assist municipalities in addressing these harms. As a result, municipalities have gained a better understanding of how they can work to address the harms of alcohol. For example, in one rural community if someone has been banned from one drinking establishment for unacceptable behaviour, they are banned from all such establishments in the community.

Reducing stigma

More than 50 family doctors have been trained in a B.C. - developed adult mental health module, which helps them treat people with mild to moderate mental health problems and mental illnesses. In addition to helping family doctors treat their patients, the program is also designed to reduce stigma in primary care – the first point of contact for most people experiencing mental illness.

A training session for media will provide an opportunity to review the media guidelines from the Canadian Psychiatric Association, the Canadian Journalism Forum on Violence and Trauma, the Mental Health Commission of Canada and the World Health Organization. It will help media better understand the impact of their reporting practices on Nova Scotians with mental illness, and how media can contribute to safety and improved understanding of mental health and addictions in Nova Scotia communities.

Nova Scotia is the first province to adopt the Psychological Health and Safety in the Workplace Standard. As part of this work, the Public Service Commission has added The Working Mind Program and Mental Health First Aid to its professional development programming. The Working Mind program is also available to employees of the Nova Scotia Health Authority and the Nova Scotia Community College. Mental Health First Aid has also been offered broadly throughout the province.

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Together We Can, government's five-year mental health and addictions strategy, has made significant progress in its first three years to improve Nova Scotians' access to assessment, treatment, care and support in communities around the province.

Here are some of the highlights of progress we have made on the strategy's five key priorities.

✓ indicates that work has begun or is completed.

Intervening and treating early for better results	
<p>18 month developmental screening for all children We are working to ensure that every 18-month-old gets screened and mental or physical health issues are identified as early as possible. Currently, seven primary care practices, including one in a First Nations community, are giving us their feedback on how they connect with families and conduct the 18-month well-baby visits, and how they believe they can be improved.</p>	✓
<p>Province-wide telephone coaching for families The Strongest Families program provides telephone-based coaching for families with children between the ages of four and 12 who are experiencing anxiety and behavioural problems. This service has been expanded province-wide, up from 320 to up to 900 spots, and now serves twice as many families.</p>	✓
<p>Mental health clinicians in schools Placing mental health clinicians in schools allows children and youth with mental health problems to be identified, treated and if necessary, referred to the mental health system earlier. We have added about 50 new schools to the SchoolsPlus program in the past two years. Over 40,000 students in grades primary to 12 have access to this service, in all school boards across the province.</p>	✓
<p>School policies related to mental health, substance use, and gambling</p>	✓
<p>Collaborative care among primary health, mental health and addictions providers Through the Bloom Program, community pharmacists help improve the health and quality of life of people with mental health and addictions problems. They provide eligible mental health patients with enhanced monitoring and consulting services, including in-depth medication therapy management and support for navigation of the system.</p>	✓
<p>Enhanced education for EHS paramedics</p>	✓
Shorter waits, better care	
<p>Reduced mental health wait times to meet standards through new approaches Under the Choice and Partnership Approach (CAPA), people and families make an appointment with a mental health clinician to discuss their goals and develop a plan, rather than going on a wait list for a particular service. This approach means people are being seen in a more timely way and are involved in their own care. For adults who have a mental health problem but are not in a crisis, wait times have decreased from 442 days to 273 days.</p>	✓
<p>Expanded peer support for mentally ill Nine peer support specialists have been introduced in four areas of the province. They are Nova Scotians who have experienced their own mental health issues and have been trained to support others who are being discharged from the hospital and returning to the community.</p>	✓
<p>Skills training and support for families Through the Family Work program, mental health clinicians work with families directly as well as in a group format. Sixty families have been seen one on one, while about 200 people have taken part in group sessions, which are often done in partnership with the Schizophrenia Society. Families report great success.</p>	✓
<p>Expanded opioid replacement treatment</p>	✓
<p>Province-wide toll-free crisis line The Mental Health Crisis Line has been expanded and is now accessible across the province. This service is available to anyone, any age, anywhere, at any time. Clinicians answering calls can access local mental health programs, EHS, police and emergency departments as needed to support callers.</p>	✓

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Review location of mental health and addictions beds	✓
More specialty care networks	✓
Concurrent disorder training for care providers	✓
Awareness of Problem Gambling Helpline, NSHA/IWK gambling services The new Gambling Support Network was launched in March 2015, along with an awareness campaign to promote it. The network offers a variety of online and mobile options for support.	✓
Better information system for mental health and addictions	✓
Information-sharing guidelines	✓
Aboriginal and diverse communities	
Diversity group(s) for mental health and addictions Government has worked with the Health Association of African Canadians (HAAC) to develop training for clinicians about the mental health and addictions needs of African Nova Scotians. The HAAC has also held its second annual conference on the unique needs of African Nova Scotians. This is just one example of the work that's been done in the area of diversity.	✓
More collaborative treatment services for First Nations, cultural safety training for care providers	✓
Gender sexuality alliance for students There are now 104 gender sexuality alliances in Nova Scotia schools, including four in the Conseil scolaire acadien provincial. This is an increase of 34 over the past two years.	✓
Sex, gender and diversity review of services	✓
Undertake work to increase diversity in addictions, mental health workforce	
Recruit French speaking professionals	✓
Education on seniors' mental health, addictions needs for care providers	
Working together differently	
Safe, affordable housing options Housing Nova Scotia has hired housing support workers to help people with mental health and addictions issues who are living in shelters and on the street.	✓
Funding process for community agencies, projects Over the past three years, government has provided \$2.6 million to 37 community-based organizations to improve the quality of life for Nova Scotians living with mental health and addictions, and their families.	✓
Support municipalities to reduce alcohol harms	✓
Collect and monitor alcohol, drug, gambling data	
Mental health, addictions care for incarcerated adults	
Reducing stigma	
Anti-stigma initiatives More than 50 family doctors have been and will be (2015-2016) trained in a B.C.- developed adult mental health module, which helps them treat people with mild to moderate mental health problems and mental illnesses in a primary care setting.	✓
Share reporting guidelines with media	
Awareness of healthy, safe workplaces	✓
Employer awareness of workplace programs Nova Scotia is the first province to adopt the Psychological Health and Safety in the Workplace Standard. As part of this work, the Public Service Commission has added The Working Mind Program and Mental Health First Aid to its professional development programming.	✓