The Case for Change:
Children and Youth with Complex Needs & Access to the Mental Health System

Mental Health Symposium: February 19, 2014

Summary Report
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Introduction

In Alberta, similar to other provincial health systems, there is a challenge for children and youth with complex needs to access the mental health system. Often this unique group may require services from multiple providers spanning different Ministries and sectors. It is a case of complex needs in a complex system.

On February 19, 2014 the Office of the Child and Youth Advocate and the Alberta Mental Health Patient Advocate hosted A Policy-Practice Conversation Focusing on Children and Youth with Complex Needs and Access to the Mental Health System in collaboration with The Alberta Centre for Child, Family and Community Research. More than 100 provincial leaders from different sectors and disciplines in Alberta accepted the invitation to discuss and recommend actions to improve mental health outcomes for vulnerable children and youth with complex needs who may need services from multiple providers across Ministries and sectors.

The following is a description of what we heard at the symposium. It includes a summary of themes, recommendations, and suggested actions.

Context: Why the urgency?

More than any other mental health population group, access to the right services and care is most critical for our children and youth. Timely access to services can often increase the likelihood of positive outcomes in terms of managing mental health issues, as well as living a fulfilling and productive life.

The needs of children and youth with mental health issues are complex because of the specific nature of their circumstances. The needs and/or service issues are made complex due to challenges in the system to respond effectively. (Creating Connections: Alberta’s Addiction and Mental Health Strategy (2011), p. 27).

A 2012 study (Alberta Centre for Child, Family and Community Research) of more than 66,000 Alberta youth found children and youth apprehended after abuse or maltreatment are four times more likely to need mental health services than those who were not. Youth with untreated mental health disorders require higher rates of services such as health care, justice and corrections, special education programs, foster care, and income support. This is in contrast to children who are resilient with good mental health. Children with increased resiliency often have strong learning abilities, good social skills, long-term support from one or more adults, feelings of competency, positive beliefs about their purpose in the world, and cohesive families and communities.
Background to the Symposium

During a 2013 meeting, convened by former Minister of Human Services Dave Hancock regarding the province’s Children First legislation, the issue of trauma was raised. It led to a discussion about the challenges vulnerable children and youth experience in accessing mental health services. The Office of the Child and Youth Advocate (OCYA) and the Mental Health Patient Advocate Office (MHPA) made a commitment to explore the issue further.

The Alberta Centre for Child, Family and Community Research (The Centre) was invited to take part in the discussion and presented relevant history and evidence for consideration. From these discussions and studying available information, both Advocates concluded that although significant provincial and national efforts have focused on improving the mental health system, children and youth with complex needs continue to have difficulty accessing and navigating mental health services. Unfortunately, this is despite significant provincial and national strategies, frameworks, plans and reports focused on improving the mental health system.

In response a committee of stakeholders was convened to plan the symposium. The purpose was to bring together the most influential and knowledgeable individuals working at various levels of Alberta’s mental health system, ask them how to change the status quo, and ultimately transform the province’s health system. There is cause to believe that the time is right for major progressive changes in how children and youth with mental health issues access services in the health system.

The collaboration on issues of access, navigation and quality between the OCYA, the MHPA and The Centre is one of many developments that show the increased awareness and importance of child and youth mental health in Alberta.

Engaging with Alberta’s Leaders

More than one hundred provincial leaders from different sectors and disciplines accepted the invitation to discuss and recommend actions to improve outcomes for children and youth with complex mental health needs on February 19, 2014. A list of those invited can be found on page 12.

Elder Gilman Cardinal started the day by providing a blessing and acknowledging the symposium was hosted on Treaty 6 land. The symposium included presentations from experts on mental health along with advocates for children and youth. The purpose was to engage participants in a discussion about improving accessibility and navigation to quality mental health services for vulnerable children and youth with complex needs.

A deliberate decision was made to involve youth who have experienced the mental health system in the day’s events. In the presentations the perspectives of youth were
incorporated through videos and performances. As well, Master of Ceremonies for the day was a young person who had expressed an interest in this role.

Presentations *(in order of appearance)* included:

- **Del Graff, Alberta’s Child and Youth Advocate**: Introduced the purpose and objectives for the day.

- **Carol Robertson Baker, Alberta Mental Health Patient Advocate**: Provided a snapshot of the current mental health landscape, particularly for children and youth, her role, and the need to advocate.

- **Mary Marshall, Alberta Health Advocate**: Informed attendees of the Health Charter and her new role providing advocacy support and assistance for patients, seniors and families who are trying to navigate the health system and resolve complaints and concerns with health services.

- **Dr. Michael Trew, Chief Addiction and Mental Health Officer, Alberta Health**: The establishment of a provincial Chief Addiction & Mental Health Officer in Alberta Health demonstrates the high importance the Government and Alberta Health Services places on addressing mental health issues. Focused on the importance of having a strengths-based perspective and fostering the development of healthy children, youth and families to best support optimal mental health.

- **The Honourable Fred Horne, Minister of Health**: Encouraged participants to keep assessing the system, closing the gaps in access, services and quality—especially where children are concerned.

- **Karen Ferguson, Assistant Deputy Minister, Human Services**: Described many new and existing initiatives, prevention and early intervention efforts aimed to support children, youth, and caregivers, including the Alberta Government’s recent $5 million funding announcement for children and youth mental health.

- **Dr. Gary Hnatko, Medical Director of Child Adolescent and Family Mental Health (CASA)**: Highlighted the complexity of the mental health system and described ways that this complexity can be reduced.

- **Tara Hanson, Director of Knowledge and Partnership Development, Alberta Centre for Child, Family and Community Research**: Described the Centre’s Child and Youth Data Laboratory which analyses data linked from multiple ministries to enable better decisions related to services, design of programs, allocation of resources and policy development.
- **Youth from iHuman**: Delivered a performance based on lived experiences with the mental health system, providing a demonstration of the barriers associated with accessing services and reinforced the importance of relationships, collaboration and culture.

- **Dr. John McLennan, Assistant Professor at the University of Calgary**: Emphasized there may be significant potential to improve the system if we start to seriously incorporate outcomes as a central organizing element of our service system.

These presentations provided context for two conversations held at the different tables. Each table was asked to develop a set of recommendations to improve outcomes for children and youth with complex mental health needs. Recommendations were based on discussing the following questions:

- How can access to and navigation within the mental health system be improved for children and youth with complex needs?

- What needs to happen to ensure children and youth with complex needs receive quality mental health services?

**Recommendations**

The following recommendations emerged from the discussions.

**Recommendation 1: Build A System that Helps Navigate**

It can be a daunting prospect for children and youth with mental health issues and their families to access the health system. Each young person's condition and circumstances are unique; there is no single, *one size fits all*, path that young people can follow in accessing the necessary services.

Symposium participants believe that Navigators are essential to guide/connect children, youth and families to mental health services as their needs change over time. The Navigator becomes one point of contact – a familiar face – who continues with them through their mental health journey. Navigators should be "assigned" to children and families for consistency of relationship. These people have a unique role and need to be adept in understanding the needs of children, youth and families, as well as their stories, circumstances, communities, and cultures. Professionals and paraprofessionals also need assistance to navigate the system and know what services are available.

**Recommendation 2: Provide Services that Put Children and Youth First**

Mental health issues in children and youth are often first observed in the community as young people interact and engage with their peers and family members. There is an
urgent need to offer more services in the community where children, youth and their families live.

Schools can be an opportune place for service provision because they are a natural gathering point in the community for children and their families. These potential hubs of service delivery could increase the partnerships that exist in communities to better support children, youth and families.

For mental health services to meet the needs of children and youth, they need to be:

- Integrated and coordinated with other health services.
- Wrap around and tailored to unique needs, allowing for children or youth to remain at home in their community.
- Flexible, as opposed to a template approach.
- Mobile, regardless of where young people live in Alberta, services and support should be available close to home.
- Accessible from a single point of entry.
- Offered beyond 9 to 5 to meet needs.
- Available in the community where people live, work, go to school and play.
- Developed with the input of youth.
- Culturally appropriate and relationship based.

**Recommendation 3: Increase Focus and Support for People who Care for Children, Youth and Families**

There is a need to re-examine the scope of work, clarify roles and create linkages among paraprofessionals, professionals and people who care: nurse practitioners, school liaisons, counselors, teachers, mentors, Elders, home visitors, therapists, psychiatrists, child intervention and case workers. The services and care offered need to be inclusive and holistic. Quality support needs to be provided for the family not just the child. Service providers must be well trained, mentored and supported within healthy work environments.

**Recommendation 4: Establish Communication that Builds Bridges and Creates a Community**

A major gap in the mental health community overall is the lack of clear, cohesive communication at many different levels.

Participants agreed there is strong need to develop a shared vision of quality mental health services with clear definitions and common language about what we are trying to improve. Legislation needs to enable sharing relevant data and information between government and agencies to increase partnerships and collaboration. Education and awareness must increase at all levels, in all sectors, beginning early and continuing across the lifespan.
**Recommendation 5: Allocate Resources that Better Reflect the Current Situation**

Funding cycles need to go beyond short-term commitments to sustain long-term quality and continuity of service delivery. Predictable, sustained funding allows for manageable caseloads and provides caseworkers with the opportunity to focus on relational practice; improving both service delivery and staff retention. Partnerships need to be discussed among Delegated First Nations Authorities, the Government of Alberta and First Nation and Inuit Health. Funding needs to be tied to the population and community needs. Decision-making needs to occur at a level that allows regions and communities to determine what they need and what would work for them.

**Recommendation 6: Measure Progress: Are Children and Youth Getting Better?**

All service providers must come together and agree on shared outcomes and a process to systematically measure and track progress towards those outcomes. Programs and services need to be evidence based and evaluated to ensure quality. We need to invest in proven programs and their effectiveness must be determined by including feedback from children, youth and families.

!["We have a responsibility to work together to ensure that no one is left behind." – Carol Robertson Baker](image)

**Recommendation 7: Build Leadership that Sets the Bar for Mental Health Service Delivery**

In Alberta, many sectors lead different aspects of mental health service delivery. While this makes sense in that children and youth with complex needs span a spectrum of different service areas, it does pose significant challenges.

Ministries that serve children and youth, Health, Human Services, Education, and Justice, need to be integrated, overcome barriers and communicate with each other about the children and youth they serve – especially those children and youth with complex needs. Effective governance is essential to provide leadership, management of regional differences, appropriate funding models, structures of support, and standardized definitions to achieve measureable improvements.

**Suggested Actions for Positive Change**

Participants contributed a range of ideas for taking action at the individual and system level. The following is a list of suggested actions to advance the symposium recommendations toward positive improvements:

1. **Enabling conditions for front-line success**
Suggested Actions:

- **Provide training opportunities**
  - Increase the capacity of those with the closest relationships to young people
  - Increase capacity for teachers and caregivers who are often the first people to observe mental health issues in children and youth
  - Ensure professionals have emergency mental health training to serve communities
  - Create common training across disciplines on issues such as suicide risk
  - Link frontline workers with mental health academics
  - Focus on bolstering general skills over specialization

- **Stabilize and depoliticize funding**
  - Funding should focus on providing continuity of service
  - Move away from grant funding
  - Funding should allow for relationship-based practice and reduce caseloads
  - Go beyond a four-year funding cycle

- **Create conditions for success in the workplace**
  - Put time and energy into mentorship
  - Make caseloads and stress-levels more manageable to reduce turnover

2. Accelerating integration across key ministries

Suggested Actions:

- **Prioritize a common service access portal and wraparound services**
  - Develop a single online point of entry common to all ministries, supported by a singular Information Technology system
  - Coordinate case management inclusive of family, children and youth
  - Focus on reducing duplication

- **Formalize information sharing policy, processes and practices**
  - Create criteria describing circumstances where information sharing is mandatory
  - Establish central depositories where information can be shared across ministries
  - Create a universal inventory of services
  - Address legal information sharing issues
• Clarify roles and organizational structures to allow for stronger sharing linkages

• **Encourage collaborative processes**
  • Increase natural touch points between ministries
  • Foster a true cross-ministerial culture
  • Create operating processes that engage all involved ministries
  • Emphasize the importance of using information to bolster professional relationships
  • Establish a common language around system and service delivery

3. **Enable individual connection to services and navigation supports**

*Suggested Actions:*

• **Create a key individual ‘navigator’ system**
  • Connects children, youth and families with service providers
  • Develops a navigation plan and an understanding of the resource pool available
  • Fosters a main supportive relationship for treatment journey
  • ‘Speaks the same language,’ relates to and respects client’s cultural context
    ○ Vitally important for Aboriginal children and youth

• **Leverage community organizations as a hub for service delivery**
  • Develop access points that meet people where they are
  • Use schools to bring service support to children, youth and their families
  • Identify agencies in service areas and connect them with clinical services

• **Focus on listening to those who receive service**
  • Use input from children, youth and their families to build services
  • Foster a culture of privacy so individual stories can be shared
  • Provide more flexible hours for service delivery, based on usage

4. **Reinforce evidence and outcomes-based decisions where most appropriate**

*Suggested Actions:*

• **Develop an evidence-based system evaluation model**
  • Develop a definition of system quality
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- Create a centre of excellence promoting evidence-based delivery assessment
- Promote access to evidence-based research

- **Develop an outcomes based service evaluation model**
  - Develop a definition of quality and measure outcomes
  - Track individual outcomes and give real-time feedback to service providers
  - Optimize hours of operation based on service utilization

- **Support infrastructure for evidence and outcomes-based decision making**
  - Feedback from children, youth and their families need to be incorporated
  - Ensure necessary data tools are available for cross-sectorial evaluation

**Next Steps**

The ongoing collaboration of the OCYA, MHPA and The Centre in organizing the symposium and identifying recommendations and suggested actions represent a new kind of focused conversation on mental health services and directions for children and youth. The purpose is to partner with Alberta’s mental health community to make significant improvements for children and youth with complex needs and their families in accessing timely, appropriate, and quality mental health services.

The Case for Change: Children and Youth with Complex Needs & Access to the Mental Health System will be shared with participants, as well as the Ministers of Health and Human Services.

A follow up symposium will be held in the Fall, 2014 to bring participants back together to discuss progress made toward the preferred future state of mental health services.
References


Organizations Who Registered to Attend

Following are the organizations in Alberta’s mental health community who registered to attend the February 19, 2014 symposium.

Alberta Alliance on Mental Illness and Mental Health
Alberta Centre for Child, Family and Community Research
Addiction & Mental Health – Alberta Health Services
Addiction and Mental Health Provincial Advisory Council
Addiction and Mental Health, Alberta Health
Alberta Health Services
Alberta College of Social Workers
Alberta Health
Alberta Human Services
Alberta Health Services - Population Public Health Aboriginal Health/French Health Program
Alexis Health Services
Aspen Family and Community Network Society
Bigstone Cree Nation Child and Family Services
Bigstone Health Commission
Boys and Girls Clubs of Calgary
Calgary and Area Child and Family Services
Canadian Mental Health Association, Alberta Division
CASA
Central Alberta Child and Family Services
Child and Adolescent Mental Health and Addictions Services, Calgary Zone AHS
Child and Family Services Council for Quality Assurance
Chimo Youth Retreat Centre
Community Addiction & Mental Health
Community Addiction & Mental Health, Central Zone AHS
Division of General & Community Pediatrics, University of Alberta and Alberta Health Services
Edmonton & Area Child and Family Services, Region 6
Edmonton Public Schools
Enoch Health Services
Family Support for Children with Disabilities
Glenorchy Consulting
Health Advocate Office
Hull Services
Justice and Solicitor General Calgary Young Offender Centre
MacEwan University
McMann Youth Services
Mental Health Patient Advocate Office
Metis Child and Family Services
North Central Alberta Child and Family Services
Office of the Child and Youth Advocate
Office of the Information and Privacy Commissioner of Alberta
Pathways
Psychologists Association of Alberta
Region 6 Children Services
The Case for Change:

Southern Alberta Child and Family Services
Stoney Nakoda Child and Family Services
The Alex
The Canadian Mental Health Association - Calgary Region
The Society for Safe and Caring Schools & Communities (Safe and Caring)
The Support Network
United Way Alberta Capital Region
University of Calgary
Youth Criminal Defence Office - Legal Aid Alberta