

Mental Health Program

NIAGARA REGION PUBLIC HEALTH AND
EMERGENCY SERVICES

Overview of Niagara Region Mental Health Services

NRMH within the Mental Health Sector

- One piece of the continuum of core services that serves 35,000 individuals in Niagara
 - (Not unique individuals as many people will access more than one service)
- NRMH serves approximately 1,500 clients annually

Core Services in the Mental Health Sector

- Emergency and crisis response
- Hospital Inpatient (acute and specialized)
- Community Treatment and Support:
 - **Comprehensive services and supports**
 - Intensive services and supports
 - Bed-based recovery supports
 - Collaborating Partners (e.g. primary care, social services, schools, justice related services and family and youth services)

Mental Health and Addictions Working Group

- The Mental Health and Addictions Working Group is part of the Niagara Ontario Health Team
- All of the Mental Health and Addiction services in Niagara, along with several community partners and individuals with lived experience are members of this Working Group
- The two areas of focus are
 - **Coordinated Access** – help people to connect with the services they need and to help them navigate the system
 - **Case Management services** – ensure that we have a fulsome continuum of Case Management services that meet the needs of adults in Niagara

Niagara Region Mental Health (NRMH)

- NRMH falls under the core service category of Community Treatment and Support – comprehensive and intensive services
- 100% funded by Ontario Health (Provincial health “super-agency”)
 - Total annual budget = \$6.25 million
- NRMH serves over 1500 individuals annually:
 - Adults experiencing severe and persistent mental illness
 - Youth/emerging adults experiencing their first episode of mental health issues

What we do...

- Community-based treatment, case management and counseling for individuals with serious mental illness
- Provide services in the home, community and office setting

Team-based, interdisciplinary approach

- Mental Health Case Workers
- Social Workers (SWs)
- Registered Nurses (RNs)
- Health Promoter
- Occupational Therapists (OTs)
- Psychiatrists
- Program Assistants

NRMH Services

Youth Services

1. Early Psychosis Intervention (ages 14-35)
2. Youth Mental Health and Addiction Service (ages 17-25)

Adult Services

1. Assertive Community Treatment Team (ages 16+)
2. Case Management (ages 16+)
3. Geriatric Case Management (ages 60+)
4. Supporting Independent Living (ages 60+)

Youth Services:

Early Psychosis Intervention (Ages 14-35)

- Provides assessment, counselling and treatment for those experiencing a first episode of psychosis
- Family support and education

Hypothetical Client: Taylor (19 year old who identifies as male)

- Heavy early use of cannabis (started at age 14)
- Tried college but in first year developed symptoms of psychosis leading to hospitalization
- Paranoid of roommates and starts to distance himself from his peers
- Hearing whispers at first then develop into voices
- Believes there is a conspiracy against him by his teachers
- Making connections to songs on the radio that are put there just for him
- Hospitalized for a week after his roommates called police when he won't come out of his room

Taylor - Interventions

- Hospital started him on antipsychotic medication, discharged home, referred to EPI
- First phone contact within 72 hours
- Within two weeks, two EPI team members go to Taylor's home for a thorough assessment and to provide support to the family
- One week later, Taylor is seen by the psychiatrist who changes his medication to a long-acting injection to ensure adherence
- Talked with him about cannabis and the link to psychosis (non-judgmental)
- Provided counselling for anxiety and how to manage his mood without cannabis and his family attended groups for education and support
- Supported to return to school
- Ongoing administration of antipsychotic medication; the team monitored his symptoms and any side effects of medication

Campaign:

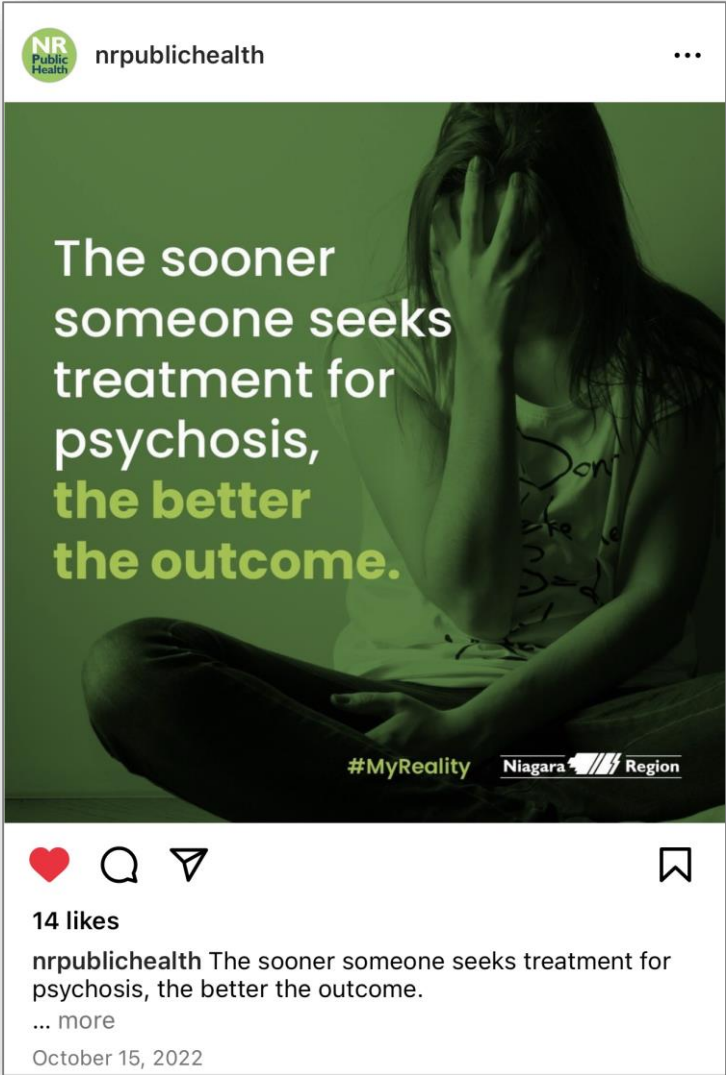
#MyReality Understanding Psychosis

Target audience: Youth ages 15 – 30 years; parents/caregivers; professionals working with youth & health care providers/clinicians

Objectives:

1. To educate youth, parents/caregivers and professionals who work with youth about
 - a) The risk factors & symptoms associated with psychosis
 - b) When and where to seek treatment for psychosis
2. To educate health care providers/clinicians on how to assess for psychosis and **where to refer** patients

Website: Features three videos (caregiver, client, professional)
myreality-Understanding Psychosis – Niagara Region, Ontario



Youth Services:

Youth Mental Health & Addiction Service (Ages 17-25)

- For young people experiencing emerging mental health or addiction concerns and who have had no previous intervention
- The service provides assessment, treatment plan and counselling

ACTT: Assertive Community Treatment Team

- Ages 16+ (typically 18-65)
- A service for people with
 - Severe and persistent mental illness
 - Psychotic disorder & multiple hospital admissions
- No success with less intensive services
- Frequency of visits is adjusted to meet needs and can be daily
- Most referrals for ACTT come from hospital
- People served often have issues with
 - Homelessness
 - Substance abuse
 - Justice system
 - Managing relationships

Hypothetical Client: Fatima (40 year old who identifies as female)

- Diagnosed with schizophrenia at age 18 with several long periods of hospitalization
- Chronic symptoms
- Single
- Receives ODSP
- Frequent homelessness
- Substance use
- Depression
- No stable employment
- Strained family connections
- History of trauma

Fatima – Intervention

- Met with Fatima in hospital prior to her discharge to learn more out about her history, current situation and goals
- Developed a treatment plan based on her goals and once discharged, the team began seeing her daily as her needs were initially high
- Provided group programming to decrease social isolation
- Provided Cognitive Behavioural Therapy for Psychosis to help her understand her psychosis, how to see the psychosis as separate from herself and to improve how she copes with symptoms
- Determined housing needs to establish level of support required in the community and assisted in placement
- Connected with family and offered Family Group for education and support

Fatima – Intervention Continued

- Assessed her readiness to change her substance use; she was not willing to quit but we continued to provide support and education, harm reduction strategies
- Administered medication, including long-acting injections in the community to reduce her barriers of access and to monitor side effects of medication.
- Psychiatrist continues to work with Fatima, adjusting medication and assessing her needs when her symptoms increase
- Peer Specialist visits Fatima regularly as a support, providing education about her illness and recovery in a hopeful context
- As her symptoms improved, helped her to explore options for volunteer work

Case Management

- Ages 16+
- Also have a specialized team for older clients ages 60+
- Ongoing and serious mental illness
- Service provides:
 - Education/counselling
 - Medication management
 - Service coordination
 - Life skills
 - Activities of daily living

Supporting Independent Living (SIL)

- Ages 60+
- Short term services for older adults who are at imminent risk of harm or loss due to complex medical, mental health, financial or cognitive issues
- Collaborative program between NRMH, Niagara Region Seniors Community Programs and the Alzheimer's Society of Niagara
- Team-based approach includes a Mental Health Case Worker and a Mental Health Nurse

NRMH Funding

- Average annual budget increase over past 7 years has been 0.7% (exclusive of funding enhancements for new positions and initiatives)
- As a result, the program's projected deficit for fiscal 2022/2023 is \$663,000
- Projected deficit does not include "indirect allocations" which total \$485,000 (Ontario Health allows us to submit only \$39,500)
- Total gap in funding for 2022/2023 is therefore \$1.15 million
- A budget submission has been made to Ontario Health, requesting an increase of 20% (\$1.26 million) for the 2023/2024 fiscal year
 - A meeting to discuss has been requested