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**Subject:** Increasing Capacity for Mental Health Services using External Funding

**Report to:** Public Health & Social Services Committee

**Report date:** Tuesday, July 9, 2019

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## Recommendations

That Regional Council

1. **APPROVE** creation of two new full time permanent positions in Mental Health, funded using newly approved LHIN funding.
2. **DIRECT** staff to continue to advocate for additional funding for Mental Health, consistent with the Mental Health & Well-Being objective of Council's new Strategic Plan.

## Key Facts

- Early Psychosis Intervention (EPI) is a service operated by Niagara Region Mental Health, providing early treatment for individuals between the ages of 14 and 35 years who are experiencing their first episode of psychosis so that the condition is managed immediately, minimizing long term impact on the client
- EPI has seen a 41% increase in demand for service over the past five years
- EPI currently operates at 224% of its target capacity set by the LHIN
- Niagara Region Mental Health is 100% funded by the LHIN with no subsidy from the Regional Levy
- Public Health & Emergency Services has successfully advocated to the LHIN to increase funding for this service by \$161,240 annually in order to expand its capacity with two additional front-line positions
- The impact of the new positions will be an additional 1000 client visits, and approximately a 33% increase in capacity
- Regional Council requires staff to seek its approval before creating any new permanent positions

## Financial Considerations

The annual estimated cost of the Mental Health Nurse would be \$102,407 inclusive of all benefits, and \$58,833 inclusive of benefits for the Peer Specialist. The LHIN has approved funding equal to these costs as per the notices provided in Appendix 1 to this report. Funding will consist of \$85,339 for the Mental Health Nurse and \$49,028 for the Peer Specialist for the remainder of the 2019/2020 fiscal year, which ends March 31, 2020. The base LHIN funding will be increased to the full annual amounts of \$102,407 and \$58,833 for the 2020/2021 fiscal year.

In addition to the 100% funding of the above positions, the LHIN has also provided one-time funding of \$3,000 to support the Mental Health Nurse position and one-time funding of \$4,500 to support the Peer Specialist position to cover expenditures such as training and equipment.

Addition of these two positions in Mental Health is completely funded by the LHIN (including for space, technology, human resources, and other back-office support) with no implication on the Regional Levy, and no net impact on the Regional operating budget.

## **Analysis**

According to the Early Psychosis Intervention Ontario Network (EPION), approximately 3% of the population experiences psychosis. Each year about 12 out of every 100,000 people in Ontario will experience their first episode of psychosis and the overwhelming majority of them will be adolescents and young adults between the ages of 14 and 35 (EPI Program Standards, Ministry of Health and Long Term Care, 2011).

Psychosis is a debilitating condition that may include delusions, hallucinations, disordered thinking and bizarre behaviour. The first few years of psychosis carry the highest risk of serious physical, social and legal consequences. One in 10 people with psychosis die by suicide; two-thirds of these deaths occur within the first five years of illness (EPI Program Standards, Ministry of Health and Long Term Care, 2011).

When we are able to identify psychosis and intervene early, there is a reduction in the duration of the illness and the need for medication and hospital stays. Specialized early intervention treatment helps teenagers and young adults to recover more quickly and return to their regular lives.

Niagara Region Mental Health (NRMH) has been providing EPI services since 2005. The EPI service uses a team approach to treatment and care coordination with a team of two Mental Health Nurses, two Social Workers, one Occupational Therapist, and a consultant psychiatrist. Currently, the EPI team does not include a Peer Specialist.

The EPI team provides several clinics each month. Approximately 80% of the EPI services are provided in the community at locations that are comfortable and convenient for the individuals served.

EPI services include

- ongoing psychiatric/medical assessment and intensive treatment and rehabilitation
- client and family education support and counselling
- crisis intervention
- cognitive behaviour therapy

- supportive psychotherapy
- relapse prevention

Provincial EPI Program Standards outline the following timelines for service:

- 72 hours between referral and initial contact
- 2 weeks between referral and face-to-face clinic appointment
- 30 days between referral and assessment by the psychiatrist.

Current local demand far exceeds resources available. We have seen a steady increase in demand for service (over 40% since 2014). This has resulted in wait times that are significantly longer than the above provincial standards. Last year, the EPI team saw 168 individuals despite the performance target set by the LHIN being 75 individuals; current services is therefore 224% above the target.

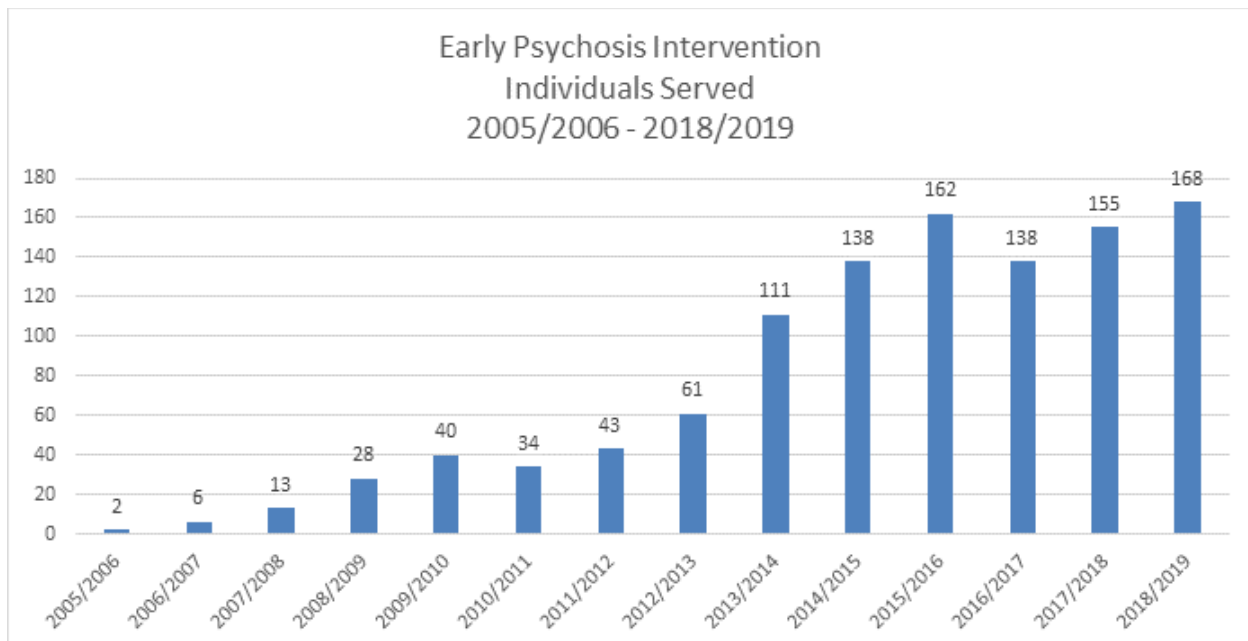


Figure 1 Individuals Served in EPI by Year

The two full time positions planned for creation are a Mental Health Nurse and a Peer Specialist. The addition of one Mental Health Nurse will facilitate the assessment and treatment of an additional 25 individuals each year. The proposed addition of one Peer Specialist will enhance the EPI team's ability to serve individuals from a lived experience perspective. The EPI Program Standards state that an EPI team should include a peer worker who provides psychosocial support and education for individuals and their families. Together, the new positions will provide an additional 1000 client visits each year.

## **Alternatives Reviewed**

If the new positions are not created, the new funding must be returned to the LHIN since the Region cannot retain unused surplus LHIN funding, nor use it for other purposes. Doing this would result in wait times continuing to increase and continuing to worsen against the EPI Program Standards. This would result in increased days of untreated illness and potentially an increase in the use of ambulance services and hospital emergency services. Without the additional of a Peer Specialist, the EPI team is unable to provide valuable lived experience in supporting individuals and their families.

## **Relationship to Council Strategic Priorities**

This recommendation supports objective 2.2 of the new Council Strategic Plan for improved Mental Health & Well-Being. This report's recommendations increase access to Mental Health treatment in Niagara for individuals experiencing their first episode of psychosis, and their families, with no net budget impact on the Region.

## **Other Pertinent Reports**

None

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### **Prepared by:**

Lisa Panetta  
Manager, Mental Health  
Clinical Services Division  
Public Health & Emergency Services

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### **Recommended by:**

M. Mustafa Hirji, MD MPH FRCPC  
Medical Officer of Health &  
Commissioner (Acting)  
Public Health & Emergency Services

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### **Submitted by:**

Ron Tripp, P.Eng.  
Acting Chief Administrative Officer

*This report was prepared in consultation with Krista Whittard, Clinical Team Manager, Mental Health and Michael Leckey, Program Financial Specialist, and reviewed by Angela Alfieri-Maiolo, Director, Clinical Services.*

## **Appendices**

PHD 13-2019 – Appendix 1  
PHD 13-2019 – Appendix 2