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# National Mental Health Conference 2005

## A Framework for CMHC: An Approach to Enhanced Mental Health Service in Primary Health Care

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# Today's Presentation

- The Canadian Collaborative Mental Health Initiative
- Collaborative Mental Health Care
  - What is it?
  - What are the fundamentals that influence its implementation?
  - What are its key elements?
  - What is the central role of the consumer?



## Where do people get help?

- In a study of Ontarians, over 60% of people who reported a psychiatric disorder indicated they had received their mental health care from their family physician, often with no involvement from other mental health care providers. (Parikh, et al., 1997)
- Other data indicate that up to 50% of all visits to primary health care providers are for problems related to mental health. (Craven et al, 1997)



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# Enhancing Primary Health Care through the Primary Health Care Transition Fund

## PHCTF Goals

- More PHC organizations providing comprehensive services to populations
- Emphasize health promotion, disease prevention
- Emphasize chronic disease management
- 24/7 access to care
- Multidisciplinary teams
- Facilitate co-ordination and integration with other health services
- Emphasis on collaboration



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# Who are the CCMHI Partner Organizations?

- Canadian Psychiatric Association
- College of Family Physicians of Canada
- Canadian Psychological Association
- Canadian Nurses Association
- Dietitians of Canada
- Canadian Association of Occupational Therapists
- Canadian Pharmacists Association
- Canadian Mental Health Association
- Canadian Alliance on Mental Illness and Mental Health
- Canadian Association of Social Workers
- Canadian Federation of Mental Health Nurses
- Registered Psychiatric Nurses of Canada



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# What is the Goal of the Canadian Collaborative Mental Health Initiative?

To improve the mental health and well-being of Canadians by **strengthening the relationships and improving collaboration** among health care providers, consumers, families and communities.



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# What is Collaborative Mental Health Care?

*Range of practice models* that:

- *Involves consumers* and their *family/caregivers, health care providers* from the mental health and primary health care sectors – each with different experience, training, knowledge and expertise;
- *Promotes* mental health and provides more coordinated and effective services for individuals with mental health needs;



# What is Collaborative Mental Health Care?

*Range of practice models* that:

- *Works in a range of settings* including community health centres, the offices of primary care providers (e.g., family physicians, nurse-practitioners), an individual's home, schools, work places, or community locations (e.g., shelters), and
- *Varies according to the needs and preferences of the individual, and the knowledge, training and skills of the providers.*





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# What is Collaborative Mental Health Care?

*Collaborative mental health care* is not a fixed model or specific approach; rather it is a concept that emphasizes the opportunities to strengthen the accessibility and delivery of mental health services in primary health care through interdisciplinary collaboration.



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# Framework for Collaborative Mental Health Care





# Benefits of Collaborative Care

## INDIVIDUALS:

- ✓ Prefer the full range of health care to be available in primary health care.
- ✓ Are more satisfied with care that is integrated.
- ✓ Find mental health care within primary health care settings is more accessible and less stigmatizing.
- ✓ With serious mental illness get better quality of medical care.
- ✓ With co-occurring physical and mental health issues get better medication regime safety.
- ✓ Adhere more to treatment.



# Benefits of Collaborative Care

## LOCAL PROVIDER:

- ✓ Increased trust, respect and support among primary health care providers.
- ✓ Increased transfer of skills and knowledge among collaborating partners.
- ✓ Increased confidence, skills and job satisfaction with regards to treating people with both common and serious mental illness.
- ✓ Reduced burden on family physicians.



# Benefits of Collaborative Care

## BROADER HEALTH SYSTEM LEVEL:

- ✓ Increased opportunities for prevention and early detection.
- ✓ Increased general efficiency of the health care system with a decrease of unnecessary referrals to higher levels of care.
- ✓ More efficient deployment of scarce human resources.
- ✓ Ideologically there is the potential to:
  - ✓ reduce stigma and achieve parity between mental disorders and other health/illness conditions.
  - ✓ break down health care silos and approaching health from holistic perspective.



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# Framework for Collaborative Mental Health Care





# Fundamentals

## *Policy:*

- Need to have policies in place to encourage and support collaborative care;

## *Funding:*

- Sustainable funding that encourages collaboration still a challenge;
- Funding can be a useful and significant incentive or lever for change in systems where roles have been entrenched, teamwork is not the standard;



# Fundamentals

## *Research:*

- Evidence-base still emerging
  - strong trend within medicine for care to be evidence-based vs. this being a field that must be understood and approached as an interdisciplinary area and from a broader holistic perspective.
  - standards by which to judge success/effectiveness of collaborative care may necessarily be different and not of the same stringency as other medical treatments.
- Issue of funding for research or evaluation of pilot projects;





# Fundamentals

## *Community:*

- speaks to local conditions and assets to be considered in implementation of collaborative care approaches – there is **no one perfect model** that can be applied across all communities – mental health and primary care resources vary **widely...need to work with and know the community**
  - Needs assessments are required, planning implementation with partners invaluable.



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# Framework for Collaborative Mental Health Care





# Accessibility

- ✓ A number of frameworks and models have been developed to review that growing literature (e.g., Framework by: Strosahl; Blount; Goets; Katon; and Paxton).
- ✓ Many of the models focus on the level of need and type of need, both physical and mental, of consumers.



# Accessibility

- ✓ The knowledge base for models of collaborative care continues to grow and models are evolving.
- ✓ Some of these models include: consultation-liaison, depression management of care.
- ✓ These frameworks and models share common goals: to increase understanding about the integration of discrete disciplinary approaches, to improve services for common mental disorders, and to produce better health outcomes.



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# Framework for Collaborative Mental Health Care





## Richness of Collaboration

- ✓ Many disciplines and allied health and social service professionals may be involved.
- ✓ There is a trend towards broader base of professionals being involved: doctors, nurses, social workers, occupational therapists, chaplains, pharmacists.
- ✓ New positions are emerging to work at the primary health care and mental health care boundaries (e.g., link workers, gateway workers, primary mental health care workers).
- ✓ Teamwork.



## Richness of Collaboration

- ✓ Successful collaboration has many challenges:
  - Different philosophies of care.
  - Ambiguity and/or role/responsibility conflicts including leadership.
  - Unclear lines of authority and accountability.
  - Lack of understanding or acceptance of the value and skills of disciplines involved.
  - Differences in remuneration.
  - Fear or resistance to change in practice.



## Richness of Collaboration

- ✓ Success results from:
  - Team having common goal and focus on consumer-centred care.
  - Respect and value for knowledge and contributions of colleagues on the team.
  - Suitable personal attributes amenable to team work.
  - Opportunities for learning through the collaborative care process.





## Richness of Collaboration

- ✓ Education/training:
  - Collaborative care needs to be discussed and taught in education programs in order to reduce disciplinary barriers to integrated care.
  - Knowledge exchange needs to occur at the team level.
- ✓ Teamwork must be supported and encouraged
  - Skills sets that make health care professionals amenable to collaboration can be taught.



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# Framework for Collaborative Mental Health Care





# Collaborative Structures

## BROADER HEALTH SYSTEM LEVEL:

- ✓ Use of information technology: electronic patient record.
- ✓ Design and implementation of evaluations.
- ✓ Continuing education in collaborative care for providers and students.
- ✓ Develop clear national policies and plans to support collaboration.
- ✓ Provide funding to promote development of collaborative care activities.



# Collaborative Structures

## PRACTICE LEVEL:

- ✓ Adequate space for mental health workers in the PHC setting.
- ✓ Common administrative procedures (e.g, appointment processing).
- ✓ Common wait room and reception services.
- ✓ Common staff room.
- ✓ Joint charting.
- ✓ Protocols for team practice.
- ✓ Formal and informal information sharing and opportunities for joint learning.



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# Framework for Collaborative Mental Health Care





## Consumer Centredness

- ✓ Consumer centredness is key to collaborative mental health care.
- ✓ A true partnership should exist between consumers and providers.
- ✓ Consumers should be recognized for their expertise and involved in negotiations about their individual care, and involved in their planning and management of services.



# Consumer Centredness

- ✓ Consumer (& families) can and should be involved in all aspects of his/her health and well-being including ACTIVE involvement in:
  - Identification of issues, problems.
  - Understanding of expert assessments and opinions.
  - Selecting treatment options.
  - Defining of population needs.
  - Design of service.
  - Delivery of service.
  - Evaluation of service.



## Consumer Centredness

- ✓ Special populations:
  - People with serious mental illness: high need for primary health care – most recent review still calling for primary health care to be introduced as part of specialty mental health programs
  - Must have cultural competence – mental health is approached differently and understanding this at a fundamental level is crucial to collaborative care being effective for different groups of people (e.g., aboriginal groups, immigrants)



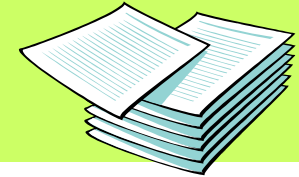


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# Research Papers



## **Collaborative Mental Health Care Framework**

Key components of collaborative mental health care initiatives and the contexts influencing their implementation.

## **Advancing the Agenda**

Key barriers to collaborative mental health care and potential strategies to address these barriers.

## **Policy Review**

Primary health and mental health care reform in Canada in relation to the promotion of collaborative mental health care.

## **Review of Selected International Initiatives**

Mental health policy in relation to collaborative mental health care and examples of collaborative initiatives in selected countries.

## **Review of Canadian Initiatives**

Description and analysis of collaborative mental health care initiatives in Canada.

## **Interprofessional Education**

Emphasis on collaborative mental health care approaches and skills in pre- and post-licensure programs and in consumer and family organizations.

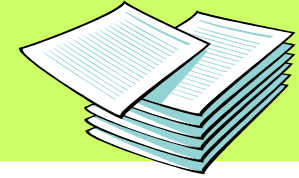


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# Research Papers



## **Aboriginal Populations**

The adaptability of collaborative mental health care to the needs of aboriginal peoples in Canada.

## **Health Human Resources**

Challenges facing health human resources in collaborative mental health care.

## **Annotated Bibliography**

The extensive and growing literature on collaborative mental health care.

## **Current State of Collaborative Mental Health Care**

Overview of the research collected by the Canadian Collaborative Mental Health Initiative.

## **Identifying Best Practices**

Key components of successful collaborative mental health care initiatives based on evidence research.

## **Review of Mental Health Service Utilization**

A review of mental health services utilization, by profession, across Canada, using CCHS data.



## Toolkits

- ✓ Implementation Toolkits for Providers
  - Eight special population toolkits, for example: seniors; children and adolescents; aboriginal; urban and marginalized;
- ✓ Toolkit for consumers, families and caregivers
- ✓ Education Toolkit



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