



Canadian
Collaborative
Mental Health
Initiative

Initiative
canadienne de
collaboration en
santé mentale

What is Collaborative Mental Health Care?

An Introduction to the Collaborative Mental Health Care Framework

2

June 2005

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What is Collaborative Mental Health Care?

An Introduction to the Collaborative Mental Health Care Framework

*A Framework for the
Canadian Collaborative Mental Health Initiative*

Prepared by:
Marie-Anik Gagné, PhD

June 2005



O U R G O A L

The Canadian Collaborative Mental Health Initiative (CCMHI) aims to improve the mental health and well-being of Canadians by enhancing the relationships and improving collaboration among health care providers, consumers, families and caregivers; and improving consumer access to prevention, health promotion, treatment/ intervention and rehabilitation services in a primary health care setting.

INTRODUCTION

The goal of the Canadian Collaborative Mental Health Initiative (CCMHI) is to enhance the capacity of primary health care providers to meet the mental health care needs of consumers through collaboration among health care partners, including: primary and mental health care providers, consumers, families and caregivers.

We believe that collaborative mental health care in primary health care settings decreases the burden of illness experienced by individuals with a mental illness by optimizing their care and increasing access to mental health services, mental health promotion and wellness.

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 settings through interdisciplinary collaboration.

Collaborative mental health care describes a range of models of practice in which consumers, their families and caregivers, together with health care providers from a variety of primary health care and mental health settings—each with different experience, training, knowledge and expertise—work together to promote mental health and provide more coordinated and effective services for individuals with mental health needs.

A conceptual Framework was developed based on previous research and an analysis of existing collaborative mental health care initiatives to:

- ∞ introduce key components of collaborative mental health care
- ∞ guide the discussion in the CCMHI research papers
- ∞ identify the need for future research.





At the centre of this Framework are the goals of the CCMHI or the consumer goals to:

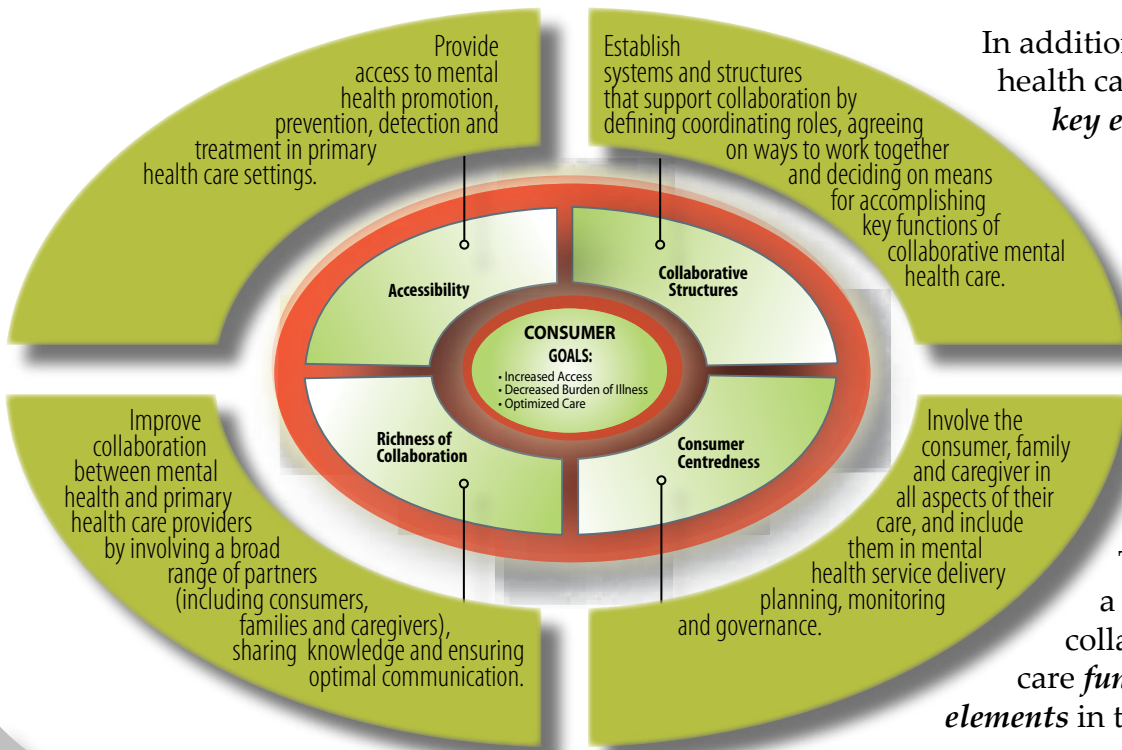
- ∞ increase access
- ∞ decrease burden of illness
- ∞ optimize care

Upon reviewing the literature and existing initiatives in Canada and abroad it became apparent that the success and ease of implementation of collaborative mental health care will be determined, in part, by *fundamentals*:

- ∞ Congruent policies, legislation and funding regulations
- ∞ Sufficient funds
- ∞ Evidence—based research
- ∞ Community needs



In addition, collaborative mental health care varies greatly on four *key elements*:



- ∞ Accessibility
- ∞ Collaborative Structures
- ∞ Richness of Collaboration
- ∞ Consumer Centredness

This document provides a brief overview of collaborative mental health care *fundamentals* and *key elements* in this Framework.

FUNDAMENTALS

Policies, Legislation, Funding Regulations and Funds

Policies, legislation and funding regulations need to be congruent with the principles of collaborative mental health care, and sufficient funds need to be made available to facilitate the implementation of collaborative initiatives.

Support for the concept of collaborative mental health care, as it is reflected in policies, legislation and funding allocations, has increased since 2000. However, there are policy—related barriers to collaborative mental health care. These barriers can be grouped into two broad categories.

The first category involves current efforts to reform the primary health and mental health care systems; challenges emerge when reform strategies are not coordinated. The second category encompasses legislation and policies as they relate to health human resources; in particular, issues related to remuneration, scope of practice and liability schemes.

Research and Community

Collaborative mental health care initiatives should also emerge from evidence-based research through the identification and implementation of best practices and should be based on the needs and resources of individual communities.

KEY ELEMENTS

There are four key elements that help define collaborative mental health care: accessibility, collaborative structures, richness of collaboration and consumer centredness.

Accessibility

The goals of collaborative mental health care are met by increasing *accessibility* to mental health services. This includes mental health promotion, illness prevention, detection, and treatment in primary health care settings, or “bringing the services closer to home”.

Collaborative mental health care takes place in a range of settings including community

health centres, the offices of health care providers, an individual’s home, schools, correctional facilities, or community locations such as shelters. Settings vary according to the needs and preferences of the individual, and the knowledge, training and skills of the providers.

Collaboration may involve joint assessment or care delivery with several providers present with the consumer, families and caregivers, when appropriate, or it may take place through telephone or written communication. In other words, effective collaboration does not require that the health care providers be situated in the same physical location.

Providing mental health services in primary health care settings can be accomplished through various means, for example:

- ∞ providing direct mental health care in primary health care settings, or
- ∞ providing indirect mental health support to primary health care providers in primary health care settings.

In the first instance, mental health care is provided by a mental health specialist;¹ in the second, mental health care is delivered by a primary health care provider who is supported by or consults with a mental health specialist.

Strategies developed by various collaborative mental health care initiatives to provide mental health services in primary health care settings include the following:

- ∞ mental health specialist offers direct mental health care in primary health care setting:
 - ∞ scheduled visits in primary health care settings
 - ∞ co-location of mental health and primary health care services
- ∞ mental health specialist offers indirect mental health care in primary health care setting by supporting primary health care provider either formally or informally.

Collaborative Structures

Successful collaborative mental health care initiatives recognize the need for *systems and structures* to support collaboration.

First, providers will either create or be part of an organizational *structure* that will define the ways in which people have agreed to work together. This structure can be:

- ∞ formal (e.g., service agreements, coordinating centres, collaborative networks)
- ∞ informal (e.g., verbal agreements between providers).

Second, providers will organize or create systems that will define how they agree to accomplish certain key functions of collaborative mental health care, for example:

- ∞ referral strategies (e.g., forms, referral networks)
- ∞ information technology (e.g., electronic client records, Web-based information exchange, teleconferencing, videoconferencing, e-mail, list serve)
- ∞ evaluations (e.g., developing evaluation instruments and agreeing to adopt certain evaluation instruments, methodologies and software in common).

Richness of Collaboration

A central feature of effective collaborative mental health care is the *richness of collaboration* among health care partners, including: primary and mental health care providers, consumers and caregivers.

Characteristics of *richness of collaboration* include:

- ∞ knowledge transfer among health care partners through various educational initiatives, for example:

1. An individual with mental health expertise, be it related to health promotion, prevention, diagnosis, treatment, self-help or peer support.

- ∞ courses, lectures, tutorials, seminars, rounds, rotations, case discussions, internships, workshops, symposia
- ∞ educational materials, such as: research papers, studies, books, guides, manuals
- ∞ the involvement of health care partners from a wider range of disciplines (e.g., nurses, social workers, dietitians, family physicians, psychologists, psychiatrists, pharmacists, occupational therapists, peer support workers)
- ∞ communication among all health care partners.

Consumer Centredness

The needs of consumers are at the core of collaborative mental health care. *Consumer centredness* calls for consumers to be involved in all aspects of their care, from treatment choices to program evaluation, and for initiatives to be

designed to address the needs of specific groups; in particular, those that are often underserved or have a great need for both primary and mental health care.

A growing number of collaborative mental health care initiatives emphasize the role of the consumer by allocating time and resources to consumer and/or caregiver:

- ∞ education (e.g., educational materials, sessions or information centres)
- ∞ peer support
- ∞ participation in the development of collaborative mental health care initiatives (e.g., focus groups, committees) and in the development and implementation of program evaluations (e.g., instrument design, roles as interviewers or respondents)
- ∞ participation in adapting mental health promotion and treatment interventions to individual needs, including cultural experience.

CONCLUSION

Collaborative mental health care is ultimately influenced by these fundamentals: *policies, legislation, funding, research, and community needs and resources*.

There are four key elements that define collaborative mental health care: *accessibility, collaborative structures, richness of collaboration and consumer centredness*.

In our upcoming series of papers on the current state of collaborative mental health care, the discussion will be framed according to these key elements and fundamentals. The series of forthcoming implementation Toolkits and the collaborative mental health care Charter will also be based on this Framework.

appendixA

GLOSSARY OF TERMS

	<p>BEST PRACTICES</p> <p>Technique or methodology that, through experience and research, has proven to reliably lead to a desired result. [Interchangeable with 'Better Practices' and 'Good Practices'].²</p>
<p>COLLABORATION IN PRIMARY HEALTH CARE</p>	<p>Two (2) or more primary health care providers working together with the consumer, family and caregiver for purposes of improving health outcomes and system capacity that involves joint information sharing, goal setting and decision making.³</p>
<p>COLLABORATIVE PARTNERSHIP</p>	<p>A mutually beneficial arrangement, agreement or understanding whereby two (2) or more parties work jointly toward a common end.⁴</p>
<p>CONSUMER</p>	<p>A recipient of health care and related support services to meet the individual's needs in any care setting.⁵ [Interchangeable terms include 'patient', 'user', and 'client']</p>
<p>INTERDISCIPLINARY</p>	<p>A range of collaborative activities undertaken by a team of two (2) or more individuals from varying disciplines applying the methods and approaches of their respective disciplines.⁶</p>
<p>PRIMARY HEALTH CARE</p>	<p>An individual's first contact with the health system characterized by a spectrum of comprehensive, coordinated and continuous health care services such as health promotion, diagnosis, treatment and chronic disease management. Primary health care is delivered in many settings such as the workplace, home, schools, health care institutions, the offices of health care providers, homes for the aged, nursing homes, day-care centers and community clinics. It is also available by telephone, health information services and the Internet.⁷</p>

2. Canadian Collaborative Mental Health Initiative, 2005, In-house definition.
3. Adapted from: Grady GF, Wojner AW. Collaborative practice teams: the infrastructure of outcomes management. AACN Clin Issues. 1996 Feb;7(1):153-8. and Bruner C. Thinking collaboratively: ten questions and answers to help policy makers improve children's services. Washington, DC: Education and Human Services Consortium; 1991.
4. Adapted from: Duffy Group Partners in Planning. Co-operation & collaboration: melding tradition with innovation. Toronto: The Change Foundation, May 2005. Available at: [http://www.changefoundation.com/tcf/tcfbul.nsf/faf9f5c4d4ab768605256b8e00037216/435cb6bd9442323d85256d82004e703d/\\$FILE/Co-operation&Collaboration.pdf](http://www.changefoundation.com/tcf/tcfbul.nsf/faf9f5c4d4ab768605256b8e00037216/435cb6bd9442323d85256d82004e703d/$FILE/Co-operation&Collaboration.pdf)
5. Adapted from: Canadian Medical Association; Canadian Nurses Association. Working together: A joint CNA/CMA collaborative practice project. HIV/AIDS example [background paper]. Ottawa: CMA; 1996. p. 24.
6. Reflects the discussions held in January 2005 between a number of national and regional initiatives funded by the Primary Health Care Transition Fund
7. Adapted from: Mable AL, Marriott J. Sharing the learning: the Health Transition Fund synthesis series: primary health care health. Ottawa: Health Canada; 2002. Available at: http://www.hc-sc.gc.ca/hcf-fass/english/primary_en.pdf and Nova Scotia Advisory Committee on Primary Health Care Renewal. Primary health care renewal: action for healthier Nova Scotians, May 2003. Halifax, NS: NS Department of Health; 2003. p. 1. Available at: <http://www.gov.ns.ca/health/primaryhealthcare/Final%20Report%20May%202003.pdf> and Klaiman D. Increasing access to occupational therapy in primary health care. Occupational Therapy Now Online. 2004 Jan-Feb;6(1). Available at: <http://www.caot.ca/default.asp?pageid=1031>

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This document is part of a twelve-document series

1. Advancing the Agenda for Collaborative Mental Health Care
2. What is Collaborative Mental Health Care? An Introduction to the Collaborative Mental Health Care Framework
3. Annotated Bibliography of Collaborative Mental Health Care
4. Better Practices in Collaborative Mental Health Care: An Analysis of the Evidence Base
5. Collaborative Mental Health Care in Primary Health Care: A Review of Canadian Initiatives Vol I: Analysis of Initiatives
Collaborative Mental Health Care in Primary Health Care: A Review of Canadian Initiatives Vol II: Resource Guide
6. Collaborative Mental Health Care in Primary Health Care Across Canada: A Policy Review
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