

Mental Health and Addictions Action Plan Newsletter

Winter 2017

In 2013, then Health Minister Dustin Duncan appointed Dr. Fern Stockdale Winder as Commissioner, with the task of developing an action plan to address the complex and often connected issues of mental health and addictions.

During the consultation process Dr. Stockdale Winder and her team travelled the province learning from individuals and families impacted by mental health and addictions and other stakeholders in more than 150 meetings, and heard from more than 4,000 individuals through online questionnaires, focus group sessions and interviews, and stakeholder engagement sessions.



Her final report, ***A 10-Year Mental Health and Addictions Action Plan for Saskatchewan***, highlighted 16 recommendations and 30 recommended actions to improve how the province responds to people with mental health and addictions issues.

The Ministry of Health, in partnership with the Ministries of Social Services, Education and Justice, Corrections & Policing is leading implementation of an inter-ministerial improvement plan to address these recommendations. While it will take time to address all of the recommendations found within the Mental Health and Addictions Action Plan, improvements in provincial mental health and addictions services and processes are already underway.

Inside

Page 2: Saskatchewan leads online mental health treatment

Page 3: Working with families to reach their potential

Page 4: LINK phone consultation service ready for calls

Page 5: Put a stop to bullying by being Stronger

Page 6: Improvements implemented

Page 7: Work underway for 2016-17

Saskatchewan leads online mental health treatment

In 2016-17, the Ministry of Health invested \$356,000 to support the University of Regina’s groundbreaking **Internet-delivered Cognitive Behavioural Therapy (I-CBT)** program, which provides online clinical treatment for adults suffering from anxiety and depression.

The innovative program directly supports the Mental Health and Addictions Action Plan recommendation to provide online clinical treatments for anxiety and depression to increase accessibility to treatment.

“We know that while anxiety and depression are highly prevalent, they are also often under treated,” said Dr. Heather Hadjistavropoulos, director of the University of Regina’s Online Therapy Unit. “Internet-delivered cognitive behavioural therapy provides an additional treatment option for Saskatchewan residents, increasing their access to mental health services.”

Through the I-CBT program a client is connected to a therapist, who communicates with and supports the client over an eight week period as they work through an online program that provides them the tools needed to manage their particular mental health issue.

The program’s online capability allows clients from across the province to get the help they need in a timely manner without having to commute for in-office treatment services.

“The program is convenient and flexible for those limited by location, time or mobility challenges,” says Dr. Hadjistavropoulos. “Reducing the need to travel to a clinic for treatment is especially important to some individuals in rural and remote communities.”

This new investment from the Ministry of Health ensures individuals struggling with mental health issues will continue to have access to this innovative treatment service.

Since 2010, the ICBT program has provided Internet-delivered cognitive behavioural therapy to over 1,500 clients.

The ICBT program is offered at no cost to Saskatchewan residents. Individuals interested in the program can contact the University of Regina’s Online Therapy Unit at <https://www.onlinetherapyuser.ca/>.

I-CBT by the numbers



500,000 Canadians, in any given week, are unable to work due to mental illness.

Working with families to reach their potential

With the goal of both improving the quality of life and reducing dependency on government programs and services, the **Healthy Families Initiative (HFI)** is working with vulnerable Regina families to create better outcomes for individuals and all-around healthier communities.

This program was modeled on a successful initiative out of the United Kingdom and is designed for families that currently use multiple services across government and in the community. The HFI offers each family one-on-one, in-home support guided by a single dedicated worker who will assist the family with coordination of programs and services, and support family members as they work towards a brighter future.

Once selected to participate in the HFI, families will meet with Foxvalley Counselling to discuss the family's goals and identify individual family member needs. Every family's goals will be different as each family and the members within it are unique.

The dedicated worker will also work with the family to reduce criminal offences and family violence, support parents to care for their children, increase employment opportunities, support family members with mental health and addictions issues, and ensure children are attending school.

“Foxvalley is focused on helping families within our community,” said Mark Fox, Executive Director of Foxvalley Counselling Services Inc. “The Healthy Families Initiative is exciting because it is using a multi-ministry approach to supporting families in all areas of their life, and is structured on evidence based practices.”

Launched this past June, the \$750,000 HFI pilot program will support up to 10 Regina families with complex needs over the next two years.



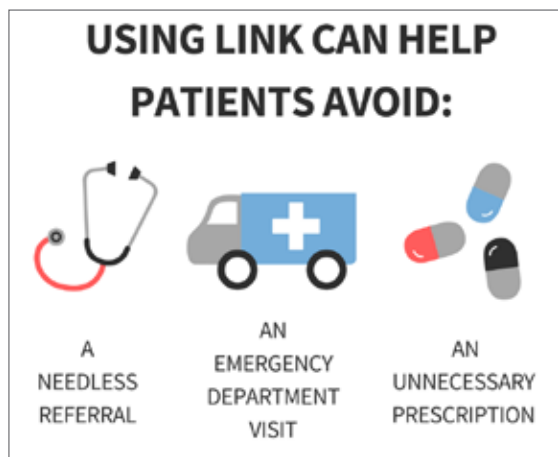
Former Minister Responsible for Corrections and Policing, Christine Tell and Mark Fox, executive director at Fox Valley Counselling Services Inc., sign the contract for the Healthy Families Initiative on June 13, 2016 in Regina. Photo credit: Mark Fox

Mental disorders account for more of the global burden of disease than all cancers combined.

LINK phone consultation service ready for calls

The **Leveraging Immediate Non-urgent Knowledge (LINK)** telephone service is providing family physicians from across the province with an instant connection to consult with a specialist regarding patient issues that are not emergent yet still important.

“LINK provided me with immediate advice that I could use to improve the care of my patient,” said Dr. Direse Coetzee, a physician at the La Ronge Medical Clinic who recently used the service. Adult Psychiatry is the first specialty currently offered by LINK, with plans to add more specialties to the service in the coming months.



Often family physicians are the first access point for people seeking help with mental health issues, but these patients may require additional support. Through LINK, a specialist’s expertise can be accessed within the convenience of a primary care visit. The over-the-phone consultation is also an opportunity to help patients get answers to their health concerns sooner.

Mickey Booth, a patient and family advisor in Saskatoon, considers the LINK service an asset for patients, “Especially if it means patients can avoid waiting for a referral or having to travel to a specialist because their issue is handled in a phone call.”

The educational value of a real-time conversation with a specialist is an added benefit for family physicians. Dr. Coetzee notes, “The LINK specialist took time to explain the rationale behind his advice and even advised on next steps to consider. I am now confident that I can apply the same advice to future patients as well.”

Family physicians can access LINK during regular office hours (weekdays from 8 a.m. to 5 p.m.) through the Acute Care Access Line (ACAL) service in Saskatoon Health Region and Bedline in Regina Qu’Appelle. Physicians simply identify they are requesting a LINK non-urgent call and they will be directed to the LINK specialist on-call.

“I will use LINK again,” Dr. Coetzee said after her first experience with the service. Similarly, patient Mickey Booth says she is “passionate about the benefits of LINK, and can’t wait until we have other services on board.”

Physicians wanting more information (or specialists interested in joining) should contact Melissa Kimens, the project manager responsible for LINK at the Ministry of Health at 306-787-7647 or melissa.kimens@health.gov.sk.ca.

Mental illness affects people of all ages, education and income levels, and cultures.

Put a stop to bullying by being Stronger

The **I Am Stronger** program is working to promote better emotional health for Saskatchewan's children and youth, particularly in schools, where they spend a significant amount of time.

I Am Stronger is a SaskTel initiative supported by the Ministry of Education that aims to put an end to bullying and cyberbullying in Saskatchewan through awareness about the effects of bullying, education around cyber safety and by supporting youth-led initiatives.

The initiative's website is a one-stop shop of resources to prevent and address bullying for students, families, educators and community members. It allows students to report bullying incidents online and offers information about how to apply for a grant to make a positive change in their community.

Through the grants, youth can receive up to \$1,000 to fund initiatives that promote community based awareness and action to promote kindness and prevent bullying behaviour.

The reporting tool, accessible by computer, mobile phone or tablet, enables children and youth to anonymously report bullying incidents online. Once an anonymous report is made, alerts are sent to those who can best resolve the situation.

The easy-to-use tool encourages those who experience or witness bullying to take action and allows them to do so in a safe and secure manner.

The development of this tool supports recommendations in **Saskatchewan's Action Plan to Address Bullying and Cyberbullying**, a three year plan designed to provide students, families and schools with the knowledge, skills, resources and supports to help Saskatchewan children and youth feel safe and accepted at school, in their community and online.

To learn more about the anti-bullying supports and resources available to you, visit iamstronger.ca.



Students in Meadow Lake, SK participating in the "Clusters of Kindness" project. The I Am Stronger grant funded initiative sees students delivering bouquets of flowers to local residents as a way to spread cheer. Photo credit: iamstronger.ca

Improvements implemented

Since the government received the Mental Health and Addictions Action Plan in December 2014, the partner ministries have been engaged in collaborative work to address the Plan's recommendations and make improvements across government and services.

These efforts have led to:

- The expansion of a Police and Crisis Team into Regina. PACT sees a police officer paired with a mental health worker to attend calls related to people experiencing mental health crises. This initiative was first implemented in Saskatoon in fall 2014.
- The piloting of the Take Home Naloxone program in Saskatoon, and expansion into three additional health regions, including Regina Qu'Appelle, Prairie North and Sunrise health regions. Naloxone is an injectable medication used to help save the lives of those experiencing an opioid overdose. Saskatchewan residents at risk of an opioid overdose are eligible to receive a Take Home Naloxone kit and education regarding prevention, recognition and response to opioid overdoses free of charge. Training is also made available to those who may witness an overdose.
- Improvements to seniors' mental health, including training within long-term care and the opening of a dedicated dementia and behavioural assessment unit in Regina in April 2016.
- Training and certification for more than 1,000 individuals in the Mental Health Commission of Canada's Mental Health First Aid Course. The course aims to provide a better understanding of mental health and addictions issues. Participants have been from a variety of sectors, and included police, educators, approved home operators, group homes, community living staff, settlement agencies, corrections, primary health care, private home care, KidsFirst staff, Aboriginal organizations and service agencies, housing agencies and Emergency Medical Technicians.
- The conversion of the Affordable Housing Rental Program to the Social Housing Rental Program by the Saskatchewan Housing Corporation. This change ensures households in greatest need, such as those impacted by disabilities, mental health or addictions issues, pay rents they can afford.
- The Office of Residential Tenancies, an agency that provides information about the rights and responsibilities of landlords and tenants in Saskatchewan, has implemented the practice of referring tenants with mental health issues to the closest Mental Health Crisis Response Team for assistance, when appropriate.

One out of every five Saskatchewan residents is directly affected by mental health or addictions issues.

Work underway in 2016-17

There is good progress being made to improve coordination and access to services for those in need. Over the course of the next year many improvement activities will be taking place across the human services sector with regard to mental health and addictions issues.

There are also two presently operating initiatives that will be expanding their programs and increasing the availability of services to new areas of the province.

- The Maternal Wellness Program, a support service for mothers at risk of developing postpartum depression or anxiety, is currently available in eight health regions and will soon be available province-wide.

- The Take Home Naloxone program will be available in at least five Regional Health Authorities across Saskatchewan by the end of this fiscal year.

In addition to these improvement activities, the Ministries of Health, Social Services, Education and Justice, Corrections & Policing are working jointly on a total of six initiatives which aim to better support clients, family members, communities and front line service providers.

These include working towards more seamless transitions, better awareness of available services, increasing capacity for recognizing and responding to a mental health and addictions crisis, and improved information sharing.

For a more information on mental health and addictions issues, including how to access supports, visit:

- saskatchewan.ca/health
- HealthLine Online at healthlineonline.ca
- Or call HealthLine 811. Specially trained staff are available 24 hours a day to provide mental health and addictions crisis support, in a safe and confidential manner.



At 24%, depression is tied with high blood pressure as the top ranked reason Canadians see a physician.