



# Creating CONNECTIONS

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Alberta's Addiction and Mental Health  
Strategy Implementation

Interim Report  
2011–2014

Alberta 

Introduction

# TO THE STRATEGY

Alberta Health and Alberta Health Services (AHS) jointly sponsored development of *Creating Connections: Alberta's Addiction and Mental Health Strategy* enabled by *Creating Connections: Alberta's Addiction and Mental Health Action Plan 2011-2016*.

The purpose of the *Creating Connections* strategy is to transform the addiction and mental health system in Alberta. The ultimate goal is to reduce the prevalence of addiction, mental health problems and mental illness in Alberta through health promotion and prevention activities, and to provide quality assessment, treatment and support services to Albertans when they need them. The strategy is based on the current understanding that addiction, mental health problems and mental illness are caused by a complex interplay of genetic, biological, personality and environmental factors.

**There are five strategic directions guiding the strategy:**

## **1. BUILD HEALTHY AND RESILIENT COMMUNITIES**

Healthy and resilient families and communities are fundamental building blocks to promoting mental well-being and mitigating the negative effects of addiction, mental health problems and mental illness. Promotion and prevention include interventions that are directed at the population at large, focused on sub-groups of the population with significantly above-average risks, and focused on high risk individuals. This priority also recognizes that cultural and ethnic differences may require different delivery methods, including tailored promotion and prevention initiatives to meet the unique needs of First Nations, Métis and Inuit communities. Primary health care is included in this strategic direction because of its needed interdependence with schools, child care centres, housing and community supports.

## **2. FOSTER THE DEVELOPMENT OF HEALTHY CHILDREN, YOUTH AND FAMILIES (INCLUDES SENIORS)**

Fostering the development of healthy children, youth and families can help support good mental health in the first place. It means responding appropriately to shore up the foundation for people when they need it. This strategic direction focuses on all children, youth and families, including seniors, and recognizes the need to increase capacity and support across the service continuum. Risk will be reduced by creating environments that build individual and family resiliency, and provide access to the services and supports children, youth and families may need.

## **3. ENHANCE COMMUNITY-BASED SERVICES, CAPACITY AND SUPPORTS**

This strategic direction focuses on the community-based programs, services and supports required to ensure those with addiction, mental health problems and mental illness are able to live and thrive within the community. The strategic direction and related priorities span all five tiers of the service continuum, and include inpatient services. Three priorities are addressed under this strategic direction: Community-based Services, Rural Capacity and Access, and Housing and Community Supports.

## **4. ADDRESS COMPLEX NEEDS**

People with complex needs require extraordinary services from more than one ministry, and in many cases, from various service sectors and stakeholders. Those who require such services include individuals with complex mental health

### **About the Interim Report**

This interim report is intended to provide a snapshot of activities related to implementing Alberta's *Creating Connections Strategy* from 2011 to 2013. Under each strategic direction, a high-level progress update is provided, along with comments related to the important work completed to date. Key achievements and upcoming milestones are identified.



# Introduction

# TO THE STRATEGY

and health problems or severe behavioural problems related to addiction, mental health and mental illness. For these clients, all currently available resources have often been used with limited success; and the supports they require strain the capacity of any one ministry to deliver the required services.

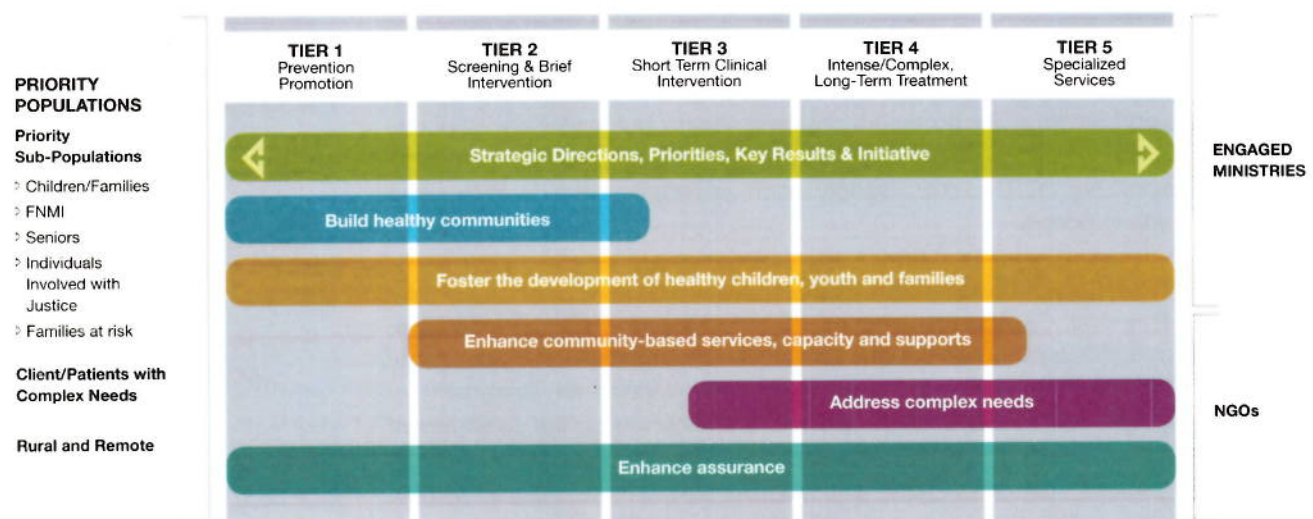
These service issues may be framed from two very different perspectives. First, the needs of the individual are complex because of the specific nature of their illness(es) or circumstance. Second, the needs and/or service issues are made complex due to challenges in the system to respond effectively. This strategic direction attempts to address both perspectives.

## 5. ENHANCE ASSURANCE

Quality and client/patient safety are fundamental building blocks of the overall strategy. This strategic direction has five key components:

- workforce development, monitoring and deployment;
- system performance framework;
- policy, regulatory and legislative framework;
- public confidence and awareness; and
- financial reporting.

For each strategic direction, major priorities and key results are identified, and recommended initiatives are developed. Taken together, the strategic directions address five tiers of services developed by the Canadian Center for Substance Abuse and adopted by Alberta Health and AHS. Lower tier services are broadly available and generally offered at the community level (e.g., health promotion and prevention initiatives or brief interventions). Higher tier services are resource-intensive and fall primarily within the specialized treatment sector (e.g., day-treatment or residential facilities).



Significant provincewide progress has been made on the strategic direction of building healthy, resilient communities. Highlights include the dissemination of low-risk drinking guidelines and the roll out of *Creating Tobacco-free Futures: Alberta's Strategy to Prevent and Reduce Tobacco Use (2012 – 2022)*, which is supported by recently released provincial tobacco control legislation.

**Alberta's Tobacco-free Futures Strategy** takes steps to help people quit using tobacco, reduce harmful second-hand smoke exposure and make tobacco products less enticing for youth. The strategy calls for action by government, health care providers, non-government organizations, educators and communities to work towards creating a tobacco-free future.

The Tobacco-free Futures Strategy focuses on:

- increasing social marketing about the harms associated with tobacco use;
- expanding school-based programs to reduce tobacco use;
- considering the development of legislation and policy interventions to decrease tobacco, tobacco-like products and smokeless tobacco use and further protect Albertans from second-hand smoke;
- enhancing tobacco cessation training for health professionals;
- expanding workplace, school-based and community tobacco-cessation programs; and
- developing a comprehensive research and evaluation framework.

**The passage of Alberta's new tobacco control legislation:** On November 13, 2014, the Government of Alberta announced several new legislative measures through the *Tobacco and Smoking Reduction Act* to prevent and reduce tobacco use and to protect Albertans from the harms of tobacco and second-hand smoke. The *Tobacco and Smoking Reduction Act* positions Alberta as a leader in the country and is aligned with *Creating Tobacco-free Futures: Alberta's Strategy to Prevent and Reduce Tobacco Use, 2012 – 2022*. The legislation will help ensure a healthier future for Alberta's young people.

### LOW-RISK DRINKING GUIDELINES

For the first time ever, Canada has one national set of low-risk drinking guidelines, with the support of federal, provincial and territorial health ministers, as well as many respected Canadian organizations. These guidelines, intended for Canadians of legal drinking age who choose to drink alcohol, are informed by the most recent and best available scientific research and evidence. They are intended to provide consistent information across the country to help Canadians moderate their alcohol consumption and reduce immediate and long-term alcohol-related harm.



Tobacco dependence is the most widespread and deadly form of substance abuse in Alberta. Tobacco claims the lives of 3,000 Albertans each year and harms many more. The Alberta Tobacco Reduction Strategy is a public health success story that has helped bring tobacco use down to an all-time low. Less than one in five adults are now regular smokers in Alberta. However, more work is needed to produce further reductions, particularly among youth.

Les Hagen,  
Executive Director at Action on  
Smoking and Health



# Building Healthy & Resilient COMMUNITIES

## CANADA'S LOW RISK DRINKING GUIDELINES

Safer Drinking Tips:	Reduce your long-term health risks by drinking no more than:	
<ul style="list-style-type: none"> <li>• Set limits for yourself and stick to them.</li> <li>• Drink slowly. Have no more than 2 drinks in any 3 hours.</li> <li>• For every drink of alcohol, have one non-alcoholic drink.</li> <li>• Eat before and while you are drinking.</li> <li>• Do not start to drink or increase your drinking, for health benefits.</li> </ul>	<p><b>Men:</b></p> <p>15 drinks a week, with no more than 3 drinks a day</p>	<p><b>Women:</b></p> <p>10 drinks a week, with no more than 2 drinks a day</p>

### ALBERTA HEALTHY SCHOOL COMMUNITY WELLNESS FUND

Alberta Health provides grant funding to the Alberta Healthy School Community Wellness Fund to support healthy school communities. The Wellness Fund enables school communities to use a comprehensive school health approach to focus on healthy eating, physical activity, healthy relationships and positive mental health, as research has shown that healthy students are better learners. To date, 239 projects have been funded in 54 out of 61 Alberta school jurisdictions. The Wellness Fund uses data on the strengths and needs of Alberta students in diverse communities to inform improvements in health and learning outcomes in Alberta school communities.

### HEALTH PROMOTION COORDINATORS IN SCHOOLS

Alberta Health Services' staff, including Health Promotion Coordinators and School Health Facilitators, partner with 56 of 61 school jurisdictions in Alberta to promote improved student health, including mental health. These AHS staff members use the Comprehensive School Health approach to improve mental health within whole school communities. Key strategies include the following:

- facilitating assessments to identify strengths and needs;
- providing professional development and training to build capacity among teachers and other school/ school jurisdiction staff for improving student mental health;
- encouraging and supporting schools and school districts to build policies and plans that incorporate mental health promotion (e.g., healthy relationships, safe and caring environments, social and emotional learning, inclusion); and
- assisting schools and school jurisdictions with developing, implementing and monitoring action plans to improve mental health among their students based on available evidence in this area.





# 02 STRATEGIC DIRECTION

## Foster the Development of Healthy CHILDREN, YOUTH, FAMILIES, AND SENIORS

Initiatives under this strategic direction support improved access to services and supports for children, youth and families, including seniors, to ensure they have the greatest opportunity for positive development and growth. Fostering the development of healthy children, youth and families, including seniors, has increased awareness and understanding of the needs of children and youth. Early childhood development sets the foundation for health throughout a person's life.

The **Mental Health Capacity Building in Schools** Initiative (MHCB) is led by AHS in collaboration with Alberta Education and grant funding from Alberta Health. The initiative provides staffing and support to increase prevention, mental health promotion and early intervention in the community. The projects are locally planned, coordinated and implemented through partnerships with AHS, school jurisdictions, parents, community agencies and other regional service providers.

The MHCB initiative began in 2006 with five pilot project sites across the province. As funding has increased, the initiative has grown to include 37 projects in 64 communities and 168 schools.

**The SNUG Program** is administered by Métis Child and Family Services. This program provides outreach support and referral services for street-involved women, men and transgendered persons, who often have addiction, mental health or concurrent issues. Most of their approximately 700 clients are aboriginal women. Working in collaboration with Edmonton Police Services, SNUG gives people the opportunity to have their charges withdrawn by the Crown – if they agree to participate in the program. SNUG offers resources and ongoing guidance to assist their clients in getting away from high-risk lifestyles. SNUG also connects clients with addiction treatment, mental health, primary care services and housing supports.

### **Expanded mental health supports for children and families**

Mental health problems are often a root cause that brings children and families to the attention of child intervention services. In February 2014, following a two-day roundtable to discuss best practices in the child intervention system, the Alberta government announced \$5 million for expanded mental health supports for vulnerable children and families. This investment will:

- introduce best practice sites in Calgary, Edmonton and Red Deer to provide increased mental health services to children and youth;
- provide children and youth in care who have experienced physical abuse, sexual abuse and/or neglect with better access to mental health specialists;
- provide child intervention staff with immediate access to expert clinical and medical consultation to help them better understand psychiatric treatment plans and appropriate medications;
- provide crisis mental health supports for high-needs children and offer effective strategies to help foster parents and other caregivers; and
- develop a cross-ministry mental health action plan that will enhance and sustain a high-level of supports for children involved with child intervention and ultimately support all children and families in Alberta.

# Foster the Development of Healthy Children, Youth, FAMILIES, AND SENIORS



## GRANT FUNDING HIGHLIGHTS

### **Mental Health Consultation to Edmonton Head Start and Home Visitation Programs**

Working with Head Start, Early Head Start and Home Visitation program staff and parents, practitioners provide on-site mental health consultation and support to improve access to mental health services for economically disadvantaged families and support better service coordination.

### **Adolescent Concurrent Treatment Program**

This program offers comprehensive assessment, treatment, transition support and follow-up care for children aged 10 to 18 and families who are concerned about a youth's substance use or process addiction (e.g., online gambling or computer games). Treatment is based on the youth's need, readiness for treatment and future aspirations.

### **Family Therapy Team Enhancement**

The Family Therapy program provides intervention services to families who are receiving children's mental health services and require additional support to resolve complex family issues. The family therapy program has also developed a process for measuring and tracking outcomes to improve program services.

### **School-Aged Services Enhancement**

A resource for children with a suspected or diagnosed learning problem (e.g., learning disability, borderline intelligence or mild-to-moderate developmental disability) and their families. These services help parents, teachers, therapists and children learn to overcome roadblocks to success.

### **Supporting At-Risk Transitional Pregnant Youth**

The Lakeland Fetal Alcohol Spectrum Disorder Society has opened the 2nd Floor Women's Recovery Centre, serving women (15-24) who are pregnant and using substances. Programs are designed to provide women with life skills and to expose them to healthier lifestyle options.

### **At-Risk Youth with Complex Needs in Northwest Alberta**

In collaboration with communities, the At-Risk Youth program provides programming for youth between the ages of 14-17 in six First Nations communities in northwest Alberta. This programming may include summer camp, connections to established youth programs and life-transition skills.

### **Helping Those Born with Alcohol-related Brain Injury**

Fetal Alcohol Spectrum Disorder (FASD) is one of the leading causes of preventable birth defects in Alberta and may occur if the mother drinks alcohol during pregnancy. To help Albertans receive the proper supports, the Government of Alberta has increased FASD assessment and diagnostic capacity in all 12 FASD Service Networks in the province.



# 03 STRATEGIC DIRECTION

Enhance Community-based Services,

## CAPACITY AND SUPPORTS

Improving the quality of life for clients/patients and families by enhancing the capacity of community-based addiction and mental health services is a priority. By ensuring timely access to services, the Alberta government and our partners can help to foster a better quality of life and overall well-being for Albertans.

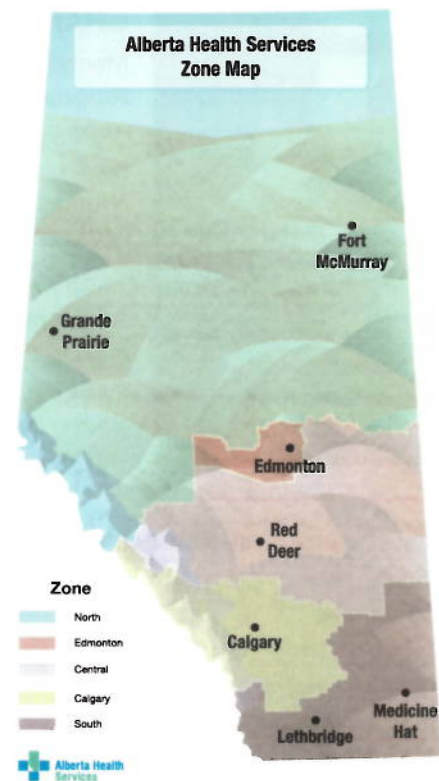
The strategic priority of increasing access to services has recently been reinforced by findings from the University of Alberta's **Gap Analysis of Publicly Funded Mental Health and Addiction Programs (GAP-MAP)**. Published in February 2014, the GAP-MAP provides an overview of addiction and mental health care in the province, identifying gaps and imbalances in services relative to Albertans' needs. The GAP-MAP's findings will help guide the Alberta government and our partners to better meet Albertans' needs.

The GAP-MAP was the first report in Alberta's history to provide a detailed overview of provincially funded addiction and mental health services in relation to population need. The GAP-MAP also provided the first comprehensive database of publicly funded addiction and mental health programs, services and initiatives.

As outlined below, the GAP-MAP draws nine general conclusions about addiction and mental health services in Alberta. Many of the conclusions are consistent with observations made over the years by stakeholders.

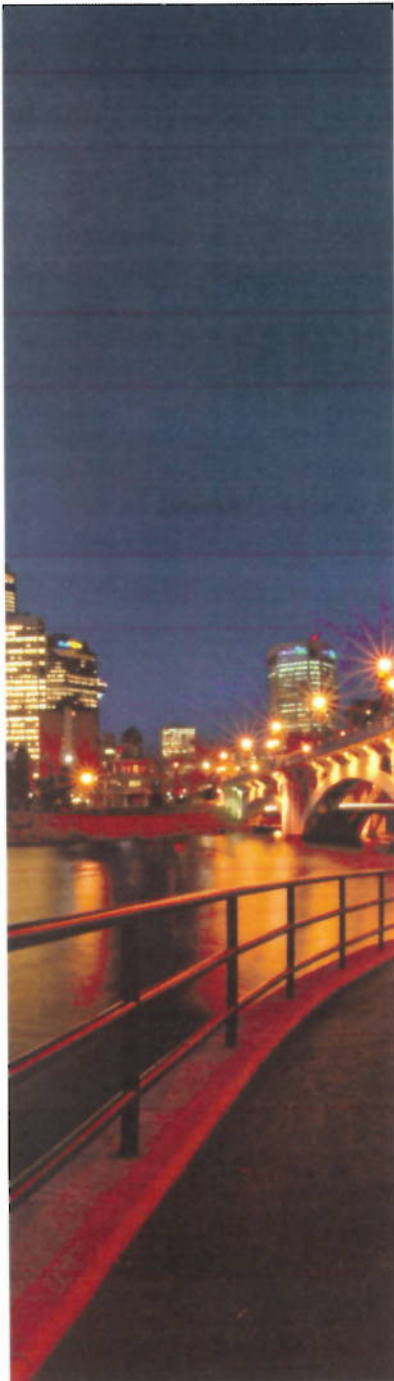
### Findings include:

1. Existing services do not provide sufficient care to meet the needs of Alberta adults.
2. Services are mainly operated on a reactive, acute-care model that requires Albertans to seek care at physician offices and specialty clinic.
3. System resources are heavily invested in providing inpatient, residential and crisis services.
4. There is wide variation in the costs of providing acute inpatient care for different conditions.
5. System resources are heavily invested in providing care for adults.
6. Programs and services require assistance for continuous improvement.
7. System resources are heavily invested in providing care for mental health problems and may be under-invested in addiction services.
8. Supportive services for people with addiction and mental health problems are not well-integrated into addiction and mental health care.
9. Neither AHS nor the GoA uses standardized nomenclature to define specialty addiction and mental health programs and services.





# Enhance Community-based Services, CAPACITY AND SUPPORTS



As part of the response to the GAP-MAP findings and Albertans' preference for self-managed care, Alberta Health has added lists of addiction and mental health services to its website ([health.alberta.ca](http://health.alberta.ca)). The department's addiction and mental health information and services webpage also links to information from AHS, MyHealth.Alberta.ca and other trusted national and provincial organizations.

## **ID FOR THE HOMELESS PROGRAM**

In 2012, Alberta Health and its partners identified 150 high needs, vulnerable Albertans to determine their needs for housing and integrated supports (the project was called P150). One of the issues faced by vulnerable populations is the lack of government-issued personal identification required to access services such as bank accounts, rental accommodations and medical treatment.

In response, Human Services, Service Alberta, Alberta Health and the Solicitor General's office supported AHS to develop and implement the **ID for the Homeless Program**. This program assists homeless/at-risk clients – whether in hospital, in the community or recently released from a correctional facility – in getting government-issued photo identification and personal health care cards. These pieces of identification allow clients to access Government of Alberta assistance programs and services, and make it easier for people to open a bank account and find permanent housing. The address authorization process allows a homeless person to use a shelter or drop-in facility's address in applying for an Alberta Identification Card.

**“I can't begin to say how happy I am for this.  
I needed this help for so long.”**

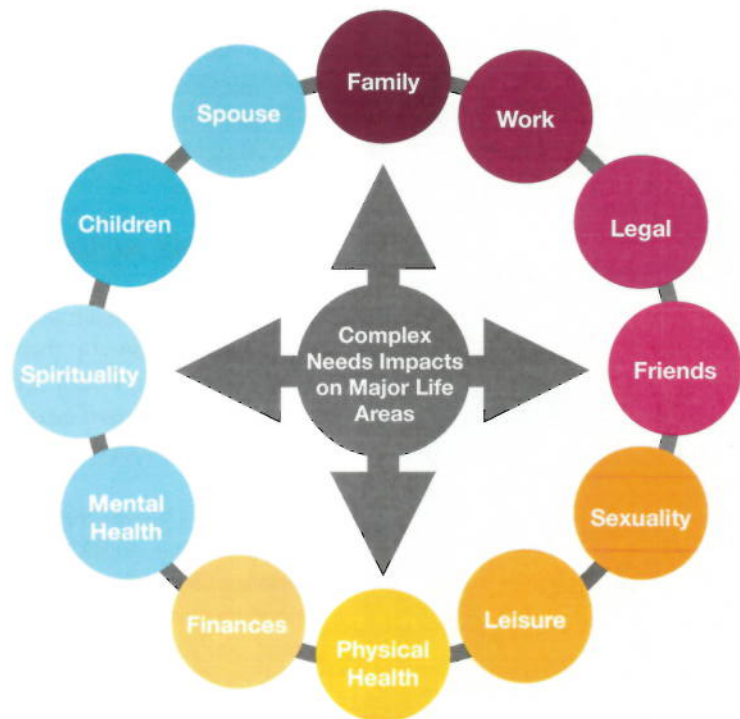
~ First ID Repository Client

**“Really, it's that easy?”**

~ Comment from client who lost his ID in the Calgary flood

People with addiction and mental health concerns may have additional needs or severe behavioural challenges that require intensive services from more than one ministry, and in many cases, from various service sectors and stakeholders. To provide better care and service access for people with complex needs, the initiatives under this strategic direction focus on multi-disciplinary collaboration and enhanced coordination between services.

**The Complex Service Needs** provincial initiative is a partnership between AHS and Alberta Human Services' Persons with Developmental Disabilities program. The goal is to ensure that adults with developmental disabilities and mental health issues receive the support they need.



**The Complex Service Needs initiative supports people under five policy directions:**

- integrated case management;
- continuum of services;
- training and education;
- effective and efficient systems; and
- shared accountability across ministries.

Integrated case management is achieved through **Community Support Teams** in Peace River, St. Paul, Edmonton, Calgary and Lethbridge, with a focus on supporting adults with developmental disabilities who exhibit complex service needs. These teams enhance community capacity to provide effective supports to individuals with developmental disabilities. Areas targeted include providing increased supports to service providers during times of crisis; developing preventative strategies to avoid the need for service providers to initiate a critical response; and empowering service providers to advance high-quality services. The teams are multidisciplinary and include behaviour specialists, occupational therapists, a social worker, psychologist, nurse, therapy assistant and an independent living support worker. A consulting community psychiatrist is expected to be added to the team in the future.

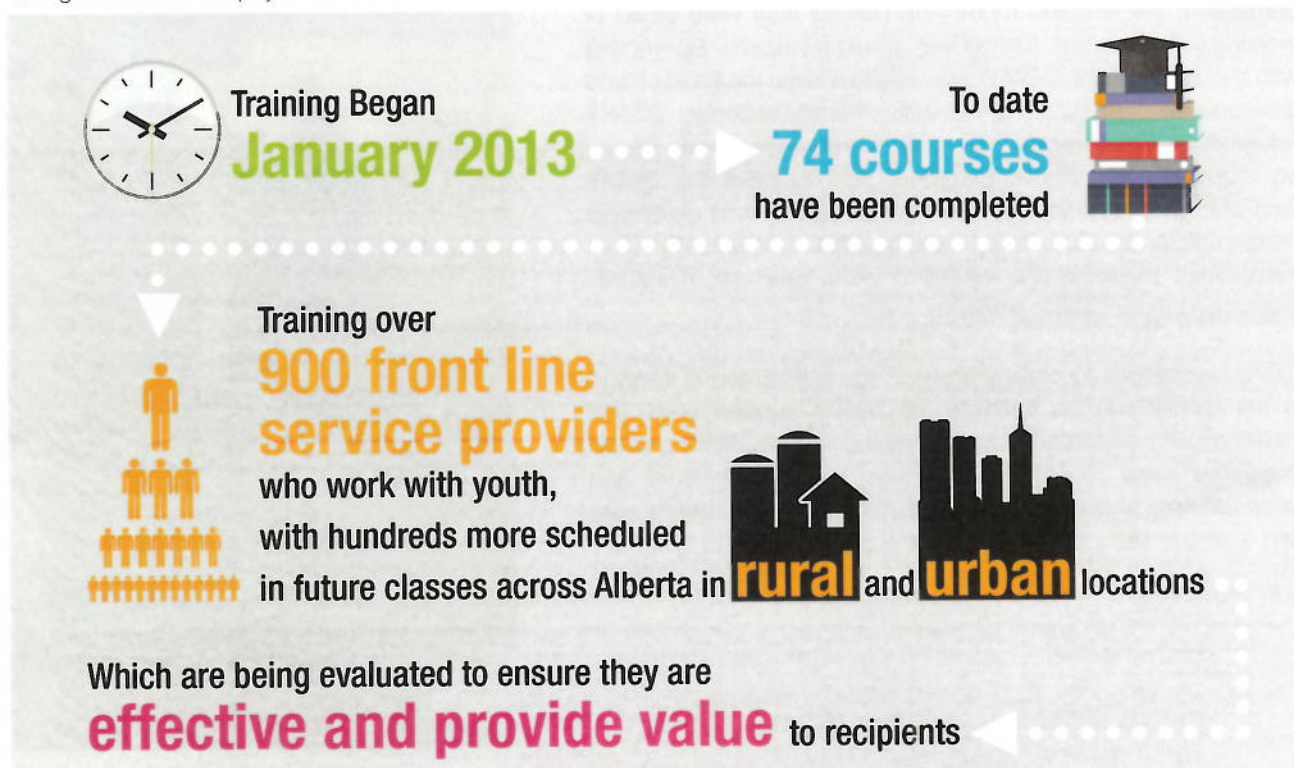


# Address COMPLEX NEEDS

## CONSENSUS DEVELOPMENT CONFERENCE ON IMPROVING MENTAL HEALTH TRANSITIONS

Over the past 50 years many western nations have closed mental hospitals and shifted care to community and general hospital settings. While this has also been a period of rapid pharmacological developments, questions remain about how best to serve both patients and society. Deinstitutionalization (or as some refer to it, trans-institutionalization) has proven to be a mixed blessing. While most people appreciate the freedom of being able to live in the community, the anticipated improvement in outcomes for people with severe mental health problems is not being achieved. Increasing numbers of mentally ill people are found in prisons and among the homeless population. The Consensus Development Conference (November 4 – 6, 2014) brought international experts and lay people together to develop recommendations and strategies to support the ongoing transition to community-based care for people with severe and persistent mental illness.

**Mental Health First Aid Training for Adults Who Interact with Youth** helps to provide more support for young people who may be developing a mental health problem or experiencing a mental health crisis. Like physical first aid training, mental health first aid helps Albertans who are most often in contact with young people to identify emerging mental health problems and respond effectively to crises. Topics covered in mental health first aid training include: understanding mental health, substance-related disorders, mood disorders, deliberate self-injury, anxiety disorders, eating disorders and psychotic disorders.





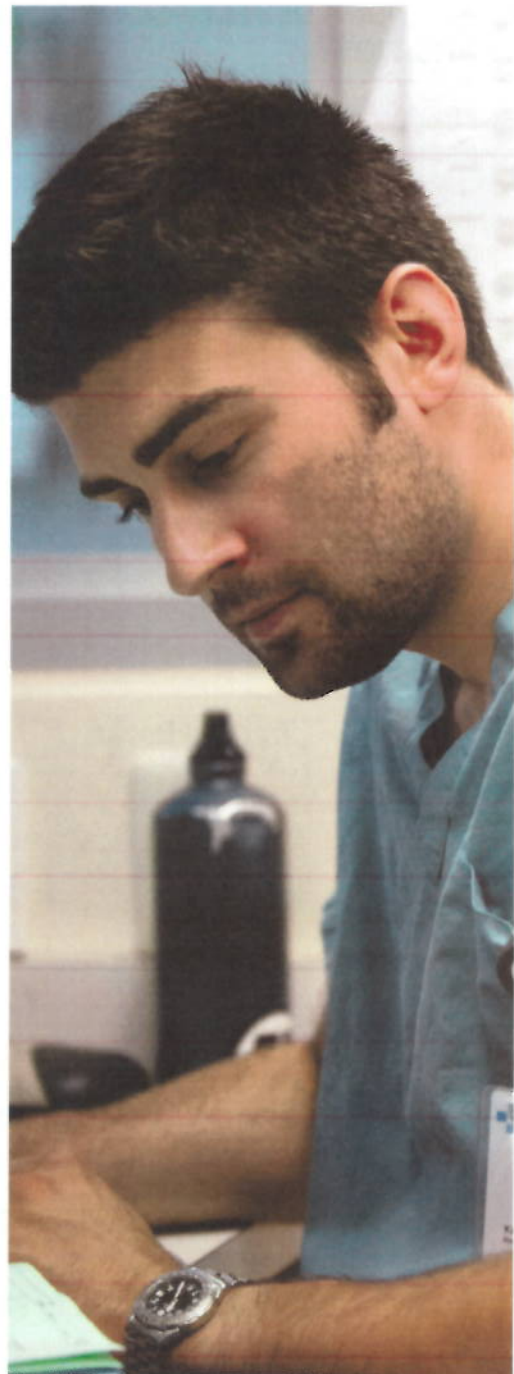
# Address COMPLEX NEEDS

## A STORY OF COMMUNITY OUTREACH IN ACTION

Edmonton's **Community Outreach Assessment & Support Team (COAST)** received an urgent referral for a client in northern Alberta. The client had a developmental disability and was also coping with mental illness. He did not speak much, but would occasionally communicate using an iPhone app or one-word responses. At the time of the referral, he was admitted to an acute care psychiatric unit due to an episode of aggressive behaviour in the community. This particular unit was not familiar with Persons with Developmental Disabilities clients and had difficulty supporting the client in the inpatient setting. Feeling that they were not able to support the client with their available resources, the site considered transitioning the client to Alberta Hospital Edmonton. Staff concern increased when the client's behaviour escalated to the point that he was confined in an isolation room and monitored through a window.

When COAST became involved, the client had caused significant damage to the isolation room. The nursing staff were afraid of working with the client, fearing they would be injured. By working with the hospital staff, COAST was able to assess the situation and develop interventions. Using Telehealth videoconferencing, COAST followed up regularly with the staff to make recommendations on managing the client's behaviour and increase the client's time outside of isolation. Over time, the hospital staff developed more confidence and comfort working with the client. The client transitioned to home and weekend visits, and was eventually discharged to the referring agency.

COAST continues to collaborate with the organizations involved in the client's care to optimize the client's support plan. This multidisciplinary approach has improved communication, fostered integrated case management across different systems and organizations, and most importantly, improved the client's care and quality of life.







This strategic direction focuses on building Albertans' confidence in and awareness of addiction and mental health services. In particular, enhanced assurance is being achieved through initiatives to identify and address gaps in the current health system, and to ensure policy, regulations and legislation reflect the most current research and best practices in addiction and mental health. As a result of these efforts, mental health and addiction programs and initiatives will more consistently incorporate mechanisms for quality improvement, monitoring, evaluation and overall performance management.

**The Alberta Addiction and Mental Health Research Partnership Program** is committed to improving addiction and mental health outcomes for Albertans. The program's "Bridging the Gap" e-newsletter for addiction and mental health practitioners provides summaries of the latest research and publications in the field of addiction and mental health, highlighting their implications for practice. Each edition of the newsletter focuses on one of the following research themes:

- improving the mental health of all Albertans, and getting care to those who need it;
- ensuring the mental health of the next generation;
- addressing mental health issues in the workplace; and
- addressing concurrent addiction and mental health problems.


#### **Children, Youth and Families Addiction and Mental Health Sessions**

Children, youth and families may face a number of challenges accessing the services they need. Children, Youth and Families Addiction and Mental Health Sessions held in May and September 2013 marked the first stage in developing projects and services to improve the accessibility of services for Albertans. The sessions were attended by partner ministries and community-based service providers, who together identified the following priority initiatives:

- acute care transition protocols;
- children's mental health portal;
- children's waitlist management;
- collaborative local governance;
- improved access website; and
- transition across programs

The Alberta government continues to work with partners to advance these and other initiatives, to achieve the vision and goals of the addiction and mental health strategy.

# VISION AND GOALS



**Becoming the best:  
Healthy communities promoting mental  
well-being, enabled by a comprehensive, coordinated and  
compassionate addiction and mental health system.**

Improve the health and mental well-being of Albertans  
in all areas of the province.

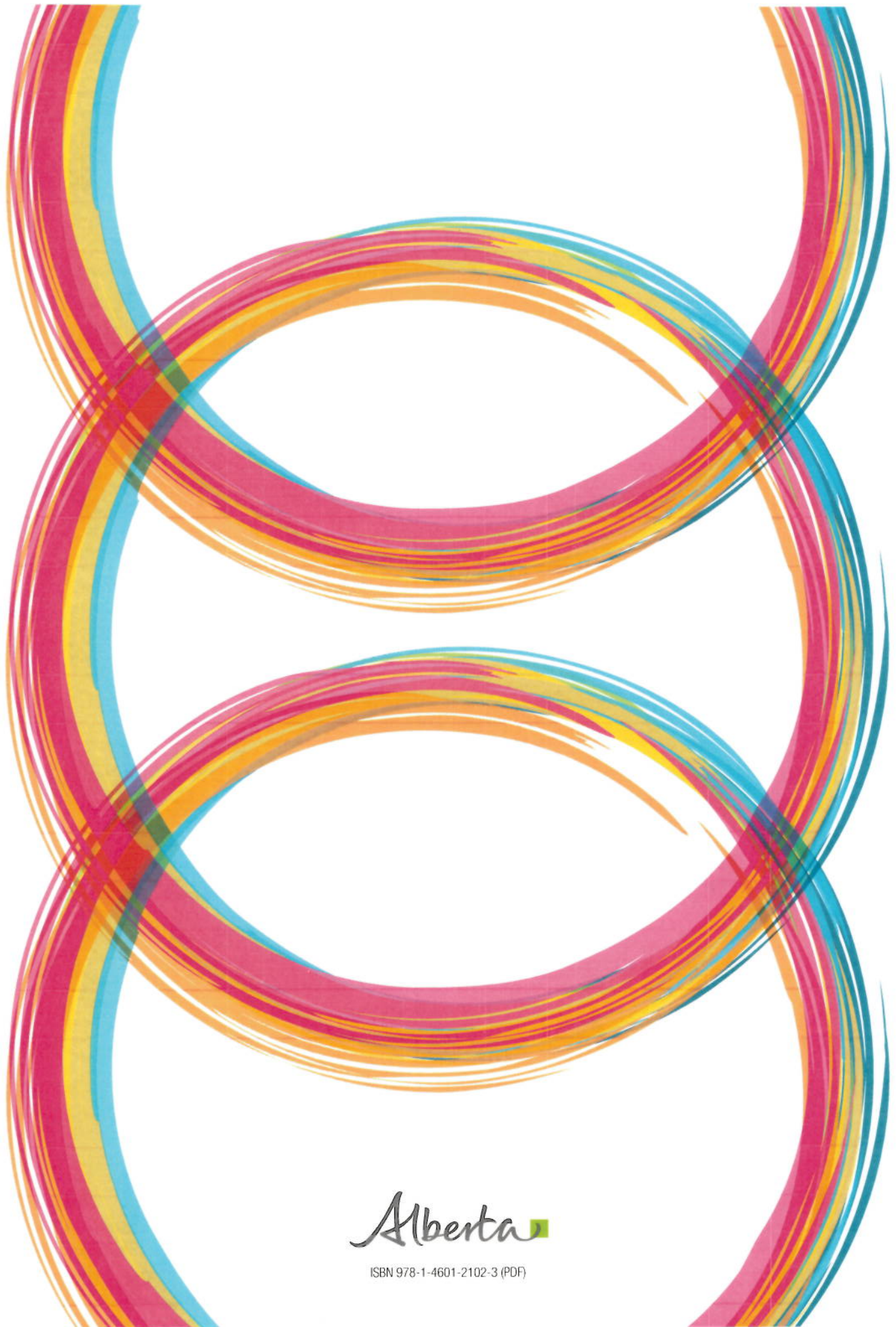
Position individuals and families at the centre of high-quality, effective  
and integrated addiction and mental health services and supports, so their needs  
are met and problems related to addiction and mental health decrease in  
the province.

Improve the capacity of the workforce to effectively address addiction, mental  
health problems and mental illness.

Increase public awareness and understanding of addiction, mental health  
problems and mental illness, thereby reducing stigmatization  
and barriers to access.

Apply informed practice(s) and continually evaluate all policy and  
service delivery approaches to ensure and demonstrate value.  
The addiction and mental health system must be  
accessible, responsive and accountable.





*Alberta* 

ISBN 978-1-4601-2102-3 (PDF)

