COLLABORATIVE MENTAL HEALTH

Towards an integrated care system at the primary care level



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camh Transformative Global Health

OVERVIEW OF PRESENTATION

1. What is collaborative mental health?
2. What does it look like?
3. Why primary care settings?
4. Example of a collaborative mental health project
5. Useful tools for practice
6. Components of successful collaborations

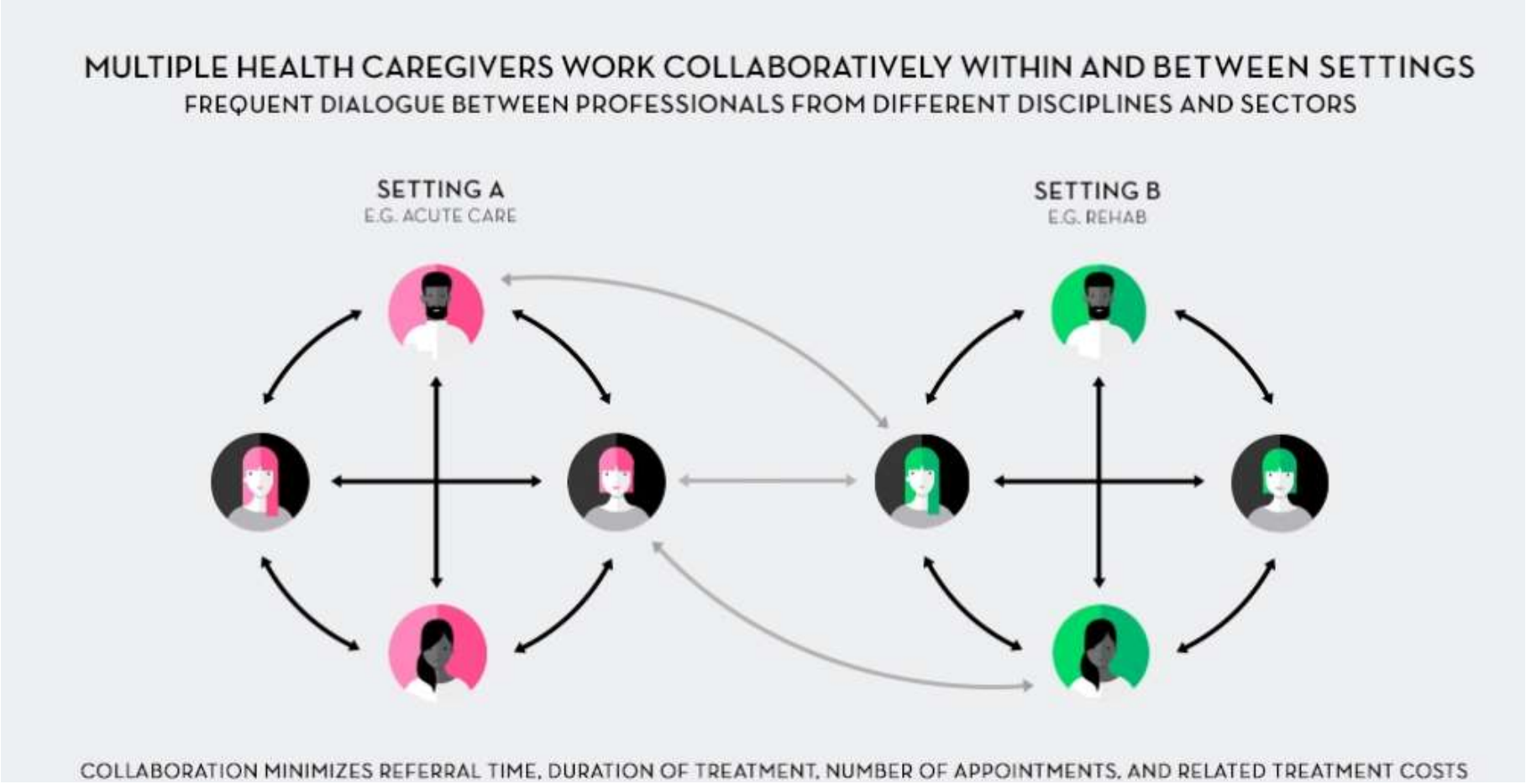
1. WHAT IS COLLABORATIVE MENTAL HEALTH?

Collaborative mental health care involves **professionals from different disciplines, specialties or sectors working together** within a common framework to offer complementary services and mutual support.

These professionals work to ensure that clients receive the most appropriate, cost-effective and high-quality mental health services in primary care settings (Gagné, 2005).

Services may range from health promotion and early detection to diagnosis, treatment and recovery support.

1. WHAT IS COLLABORATIVE MENTAL HEALTH?



2. WHAT DOES COLLABORATIVE MENTAL HEALTH LOOK LIKE?

CLIENT FILE

NAME: MARY
AGE: 27
OCCUPATION: UNEMPLOYED
DIAGNOSIS: MAJOR DEPRESSION



MENTAL HEALTH:
- FEELINGS: DEPRESSED, SADNESS, LOW MOTIVATION, FAILURE
- BEHAVIOURS: NEGLECTING HYGIENE AND APPEARANCE, WITHDRAWAL

PHYSICAL HEALTH:
- DISABLED SINCE BIRTH DUE TO SPINA BIFIDA
- RECURRENT URINARY TRACT INFECTIONS
- CURRENT SYMPTOMS: POOR ENERGY, FEVER, DYSURIA, HEMATURIA

HEALTH TEAM:
- PRIMARY CARE PHYSICIAN
- SOCIAL WORKER
- NURSE
- PSYCHIATRIST

CARE PLAN:
- WEEKLY COUNSELLING SESSIONS WITH SOCIAL WORKER
- HOMECARE TO ASSIST WITH COMMUNITY REINTEGRATION
- WEEKLY URINARY TRACT INFECTION SCREENINGS WITH NURSE
- PSYCHIATRIST'S SECOND OPINION IF DEPRESSION DOES NOT IMPROVE

3. MAKING THE CASE FOR MENTAL HEALTH AND PRIMARY CARE

What is primary health care?

"essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-determination". *(Alma Ata 1978)*

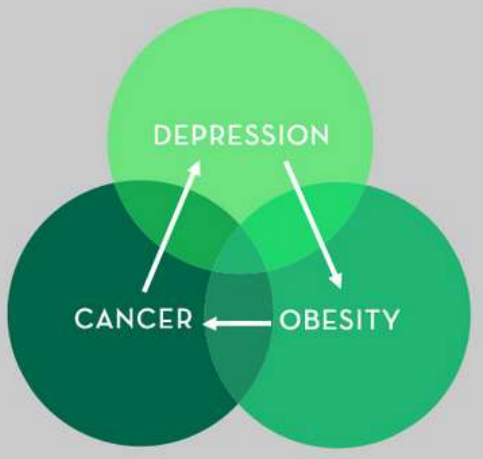
3. MAKING THE CASE FOR MENTAL HEALTH AND PRIMARY CARE

1 IN 5 CLIENTS IN PRIMARY CARE HAS A MENTAL HEALTH PROBLEM
BUT MOST ARE NEVER DIAGNOSED OR TREATED EFFECTIVELY



COMORBIDITY: PHYSICAL AND MENTAL ILLNESS

MENTAL HEALTH PROBLEMS OFTEN CO-OCCUR WITH INFECTIOUS DISEASE (E.G. TB), CHRONIC DISEASE (E.G. PARKINSON'S) AND CANCER



STIGMA AND DISCRIMINATION ARE CRITICAL FACTORS THAT PREVENT PEOPLE FROM SEEKING OUT AND RECEIVING CARE

THERE IS RAMPANT STIGMA SURROUNDING MENTAL ILLNESS

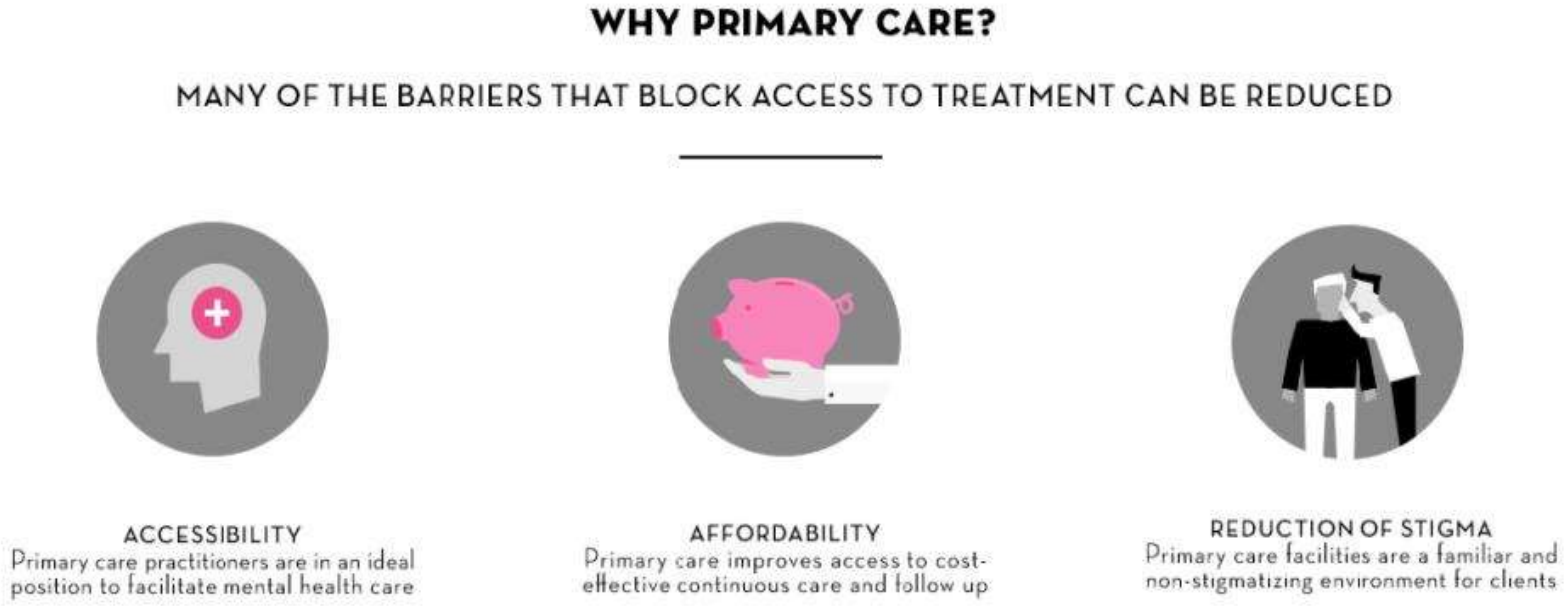
Consequences of stigma: discrimination, shame, guilt, anger, frustration, low self-esteem, and exclusion from public life

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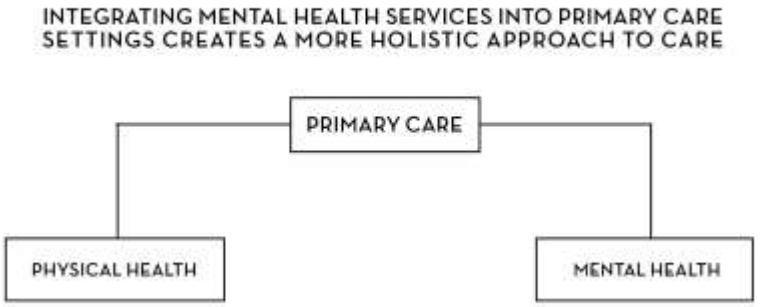
REDUCED DESIRE FOR TREATMENT

People conceal their mental health issues and avoid seeking care from institutions or specialists that may label them as mentally ill

3. MAKING THE CASE FOR MENTAL HEALTH AND PRIMARY CARE



Integrating mental health services into primary care settings is the most **viable**, **effective** and **affordable** way to improve access for those with treatable mental illness in the community (WHO 2010)



3. MAKING THE CASE FOR MENTAL HEALTH AND PRIMARY CARE

Despite this, key health resources are significantly underutilized for mental health and substance use care.

Some of the reasons effecting health care professionals:

- Little infrastructure support
- Reluctance to add responsibilities to strained workloads
- Lack of information on mental health and substance use problems
- Lack of training in how to address these problems

Health professionals require greater support in order to improve care for clients in primary care settings.

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

The Office of Transformative Global Health at CAMH has been working towards building an integrated mental health system for many years.

Most significantly, 2009-2011: *The mental health and addiction capacity building program for community health centres (CHCs) in Ontario*

Purpose? To enhance the competencies of primary health care organizations/teams/professionals to effectively address the population's demands of mental health and addictions and to foster the needed health manager support for health system improvement

Objective? To adapt and scale-up a pilot collaborative and innovative competency-based capacity building program in mental health and addictions for CHCs in Ontario

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

What was involved? Training program based on adult education model with 10 participating CHCs



Special features?

- Needs-based curriculum
  - Core topics:
    - Mental health disorders
    - Screening and assessment
    - Inter-professional collaboration
    - Health promotion
    - Family/community involvement
    - Self-care for professionals
- Organizational and systems approach
- Culturally competent care for vulnerable populations
- Evaluation

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

Results?

Overall, the workshop had high satisfaction ratings in all the sessions

- The overall satisfaction mean score (scale 1 to 5) of all workshop sessions was 4.18.

When results from the baseline and final evaluation are compared, there was an overall increase in knowledge among the participants in all 15 competencies measured.

Results show a significant increase self reported progress in knowledge, and skill as result of the training in the 15 assessed competencies. In 9 out 15 core competencies, all the participants stated a meaningful progress.

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

What did they learn?

Participants reported gaining skills and knowledge in the following areas:

- Assessment and screening tools
- Inter-professional skills
- Cognitive behavioural therapy
- Anxiety and mood disorders
- Schizophrenia
- Medications used to treat mental health disorders
- Motivational interviewing
- Concurrent disorders
- Referrals
- Stigma related to mental health and addictions
- Trauma/PTSD in refugee populations
- Cultural competency

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

How would they apply skills?

Participants reported how (they think) they would apply what they learnt in their workplace participants indicated they would:

- Implement screening tools
- Bring the information back to their CHC teams
- Pursue training in CBT therapy
- Use resources highlighted in workshop to make referrals
- Consider prescribing different medications for personality disorders
- Incorporate motivational interviewing skills
- Incorporate mental health and addictions into health promotion programs
- Participating CHC expressed a strong interest in continuing cooperation with CAMH into the next phase of the project.

4. EXAMPLE OF COLLABORATIVE MENTAL HEALTH PROJECT

Outcomes?

1. Action plan to lay the foundation to ensure ongoing capacity building process
2. Advanced workshops to promote competency building
    a) I.E: 2-day workshop on immigrant and newcomer mental health and addiction
3. Primary health care manual
4. Community of Practice website

5. USEFUL TOOLS FOR INTEGRATED CARE SYSTEMS

An upshot of this project:

Collaborative Mental Health: An advanced manual for primary care professionals



This manual provides comprehensive guidance on mental health and addiction treatment for professionals working in primary health care. It assists them in strengthening their competencies for daily work in collaborative mental health care.

The information contained in this book is essential reading for anyone wanting guidance in delivering quality mental health and addictions care within the context of primary care.

5. USEFUL TOOLS FOR INTEGRATED CARE SYSTEMS

Online Community of Practice for Collaborative Mental Health:
https://www.porticonetwork.ca/web/collaborative-mental-health/home





5. USEFUL TOOLS FOR INTEGRATED CARE SYSTEMS

Other tools:



6. COMPONENTS OF SUCCESSFUL COLLABORATIONS



THANK YOU

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FOR ADDITIONAL INFORMATION AND TO ORDER A COPY OF THE MANUAL VISIT WWW.PORTICONETWORK.CA/WEB/COLLABORATIVE-MENTAL-HEALTH /HOME