

## **Executive Director's Report**

**November 2017**

### **Ministry of Health and Long-Term Care (MOHLTC): Structured Psychotherapy**

The MOHLTC is moving into the second phase of a strategy to design and implement a provincial structured psychotherapy program. In the first phase, the ministry funded structured psychotherapy (CBT) at four psychiatric hospitals and an online support community called the Big White Wall. The second phase includes the design and implementation of the program for structured psychotherapy services (CBT).

*What will the system look like?*

The Big Tent Advisory Panel composed of primary care, community mental health and hospitals will meet three times in October and November to think about the design for a provincial structured psychotherapy program that can be implemented by the Local Health Integration Networks (LHINs). The panel is chaired by Dr. Ian Manion and Jessica Hill. The Panel will address big picture questions including:

- What should the program objectives be?
- How to deliver evidence-based, high quality services from clinical and operational perspectives?
- What are the health and human resources issues of providing a provincial service?
- What are the program evaluation priorities?

The Panel will submit its recommendations to the MOHLTC this fall. Downstream, the ministry will engage stakeholders for feedback and comment on the panel's recommendations and work with the LHINs to conduct a series of tests related to implementation of the program. Family Service Ontario will be in close touch with the MOHLTC as they move forward. Carol Lee Thompson from Thunder Bay Counselling is a member of the panel.

### **Family Service Ontario Proposal for Psychotherapy:**

The Family Service Ontario proposal to "Expand Storefront Access to Structured Psychotherapy through Family Service Ontario Agencies" fits into the second phase of the MOHLTC plan to develop a provincial program for structured psychotherapy. The ministry received the proposal on July 10. Leslie Josling, Sharon Mayne Devine, Alan McQuarrie and Susan MacIsaac met with Patrick Mitchell, the Director of the Mental Health Branch of the MOHLTC on September 6. The purpose of the meeting was to hear from Patrick about his plans for a provincial structured psychotherapy program, his challenges/concerns and what the 120 storefront FS agencies can bring to the 'table.' The Family Service Ontario proposal forms the backdrop of the meeting and was used to demonstrate how the FS network can help Patrick implement the provincial structured psychotherapy program that he is responsible for. Senior policy staff have also been briefed on the Family Service Ontario proposal.

Family Service Ontario has begun coordinating meetings with each of the LHIN's (following up on the Associate Deputy Minister's contact with each LHIN Chief Executive Officer), to ensure that the LHINs are aware of the role that Family Service agencies play in the delivery of community-based mental health, trauma and addiction services, the need for Family Service agencies to be included in local planning tables and to make the LHINs aware of the FSO "Proposal to Expand Storefront Access to Structured Psychotherapy Through Family Service Ontario Agencies." The meeting with the NWLHIN is scheduled for November 30th and will include Susan MacIsaac, CEO of FSO along with FSO members Thunder Bay Counselling, Catholic Family Development Centre and North of Superior Counselling Programs.

### **Health Professions Regulatory Advisory Council (HPRAC): Controlled Act of Psychotherapy**

In its 2006 report, *Regulation of Health Professions in Ontario: New Directions*, the Health Professions Regulatory Advisory Council (HPRAC), recommended that a number of professions, including psychotherapy, be regulated under the *Regulated Health Professions Act, 1991* (RHPA). In response, the *Health System Improvements Act, 2007*, regulated the profession of psychotherapy and added a new controlled act of psychotherapy under the RHPA, among other things.

On August 4, 2017, the Minister of Health and Long-Term Care requested HPRAC to:

1. Provide advice on how to make clear the meaning of the controlled act so that it is understood by members of the professions who may be granted the controlled act, prospective applicants to the professions and, most importantly, to the public.
2. Recommend criteria for determining whether there are certain providers, who are not members of a regulated health profession, who may require an exemption from the performance of the controlled act so that they are not unduly prevented from providing services to their respective client population.

The Minister requested that HPRAC provide its advice no later than November 1, 2017.

Thunder Bay Counselling submitted a written response to the *draft Clarifying Document on the Psychotherapy Controlled Act*. We have also participated in a number of webinars in anticipation of the Act being proclaimed by December 31, 2017.

### **Youth Hubs**

On February 2017, Dr. Eric Hoskins, Minister of Health and Long-Term Care, announced funding support for up to nine integrated service hubs to address access issues and other gaps in the province's youth service system, including improving the service experience of transition-aged youth (age 18-25). At these hubs, young people between the ages of 12 and 25 will be able to receive walk-in mental health and substance use services, as well as other health, social, and employment supports all under one roof.

Youth Wellness Hubs Ontario (YWHO) is a new program entity that has been put in place to make this happen. YWHO builds on similar initiatives already underway in Canada, such as ACCESS Open Minds (Pan-Canadian) and Foundry (British Columbia), as well as previous international initiatives in Ireland (Jigsaw) and Australia (Headspace).

There are also four existing research-funded hubs in Scarborough, Toronto East, Central Toronto (YouthCan IMPACT), and Chatham-Kent (ACCESS Open Minds) and many communities across the province are beginning to deliver hub-like services.

The YWHO initiative will serve as a critical step toward improving Ontario's mental health and addiction services for youth and young adults by:

- Providing rapid access to easily identifiable mental health and substance use services with walk-in, low-barrier services and clear service pathways
- Providing evidence-based interventions matched to individuals' level of need, and supported transitions to specialized care services when the severity of need is evident
- Integrating mental health, substance use, primary care, vocational, housing and other support services into a one-stop-shop model of care offered in a youth-friendly space
- Reducing transitions between services through co-location and shared services in a single place
- Establishing common evaluation across sites
- Co-creating services with youth & families

Thunder Bay Counselling is part of a writing committee developing a proposal for a Youth Wellness Hub in Thunder Bay that is due December 15, 2017.

### **Conjoint Counselling**

The pilot sites and Family Service Ontario met with Anne Bergen from Knowledge to Action to begin developing an evaluation framework for the second phase of the pilot project. The project wraps up on March 31, 2018. The evaluation will build on what we found in the first phase which is couple's satisfaction increased from the beginning to end of Emotionally Focused Therapy (EFT), while risk of domestic violence decreased. With a sample size (both phases of the project) of more than 160 couples, we will be able to build a strong case for a provincial roll-out of conjoint counseling for couples experiencing adult conflict. Other evaluation considerations include but are not limited to, the professional development needs of staff and clarification of the resources that are needed to provide the service while maintaining program integrity.

### **Ministry of the Attorney General: Cannabis Legalization Plan for Ontario**

Alan McQuarrie (FSO Board Chair) and Aimee Jaun (Thunder Bay Counselling) represented Family Service Ontario at the government's consultation to develop Ontario's response to the federal legalization of cannabis. The government met with stakeholders to talk about a responsible approach that is focused on protecting youth, strengthening public health and road safety, and promoting

prevention and harm reduction. The meeting addressed issues related to the legalization of cannabis in Ontario.

Attorney General and the Ministers of Finance and Health and Long-Term Care made an announcement concerning Ontario's regulatory framework for legalized cannabis, including:

- Minimum age;
- where and how people will be able to purchase cannabis;
- rules around possession and sharing;
- how the province intends to protect youth, ensure public health, promote prevention and harm reduction and eliminate the illegal market.

### **Legalization of Cannabis Consultation: An Ontario Response**

The discussion, held on August 3, was facilitated by Deloitte and included a broad cross section of stakeholders - parents, the Advisory Group for Youth with Addictions, psychiatrists concerned with early episodic psychosis, Smoke-free Ontario, CMHA, hospitals and the Family Service sector among others. Government had met earlier with producers and retailers.

Some highlights of the discussions include:

- limiting and controlling access (government distribution, not online, no marketing, etc.) but not making it inaccessible to perpetuate the black market and potentially further marginalize certain populations
- need to harmonize with other provinces. For example, the legal age for marijuana is 18 in Quebec and 25 in Ontario.
- education at all access points and from multiple sectors (trained staff selling who provide education related to risks, etc.
- restricted marketing and risk information and dosage information on packaging taking this opportunity to learn from our experience with alcohol

The Cannabis Secretariat will review and consider the issues identified by the stakeholders and make recommendations for legislation. This meeting was an opportunity for Family Service Ontario to make another group of stakeholders aware of who we are, what we do and who we serve.

### **A New Domestic Violence Action Plan (DVAP)**

Thunder Bay Counselling was invited to participate in one of five engagement sessions regarding the new action plan. The purpose of the consultation meeting (funded by MCSS and the Ministry of the Status of Women), was for service providers to "provide input to Ontario's response to domestic violence and an overall strategy to address gender-based violence." This was an opportunity for us to highlight our walk in counselling clinic model, our conjoint counselling initiative and our capacity to provide structured psychotherapy.

## **Ministry of the Attorney General - Counselling Support for Jurors**

Alan McQuarrie and Susan MacIsaac met by phone with the Director of Operational Services and the Program Manager. The current contract, held by Morneau Shepell, ends in January 2018 with an option to extend for one year. Future procurement decisions are in the works. The ministry hopes that jurors will feel that they were supported by and able to talk about their concerns related to what was presented and discussed in open court with a trained professional for as long as they need it.

FSO ensured that the ministry understood that Family Service agencies are ideal partners for the delivery of the Jurors Support Program because:

- Family Service Ontario is a respected and valued stakeholder of the Ministry of the Attorney General. Family Service agencies receive funding through MAG to deliver the Partner Assault Response, Support Services for Male Survivors of Sexual Abuse, Victim Quick Response, Child Witness and Family Court Worker programs.
- There are 120 Family Service storefronts across the province of Ontario.
- Family Service agencies comply with best practices such as French language services, cultural competence and the Accessibility for Ontarians with Disabilities Act. Their clinicians are registered with regulatory colleges.
- FS agency therapists are experts in VAW, sexual assault and trauma and are connected to the cultural and language realities in communities including Indigenous populations.
- FS agencies offer a short term, solution-focused model that helps people move back to a position of strength as they return to their communities and their lives.

Ministry staff acknowledged what Family Service agencies offer especially their ties to communities, cultural and language competency and experience in supporting all types of trauma. They are committed to an ongoing dialogue with Family Service Ontario and have asked to meet again in the late fall.

## **NWLHIN Sub Region Planning**

The North West LHIN is seeking health system leaders to advance population health planning within each of the five sub-regions. Sub-region planning tables are being established in each of our five sub-regions to population-based planning, performance/quality improvement, service alignment and integration and implementation of LHIN-wide priorities. These tables are very much in the early stages of development and we will be looking to our partners to help guide the development of these tables.

Planning tables will include patients, families, caregivers, Indigenous representatives, Francophone representatives, Primary Care (Physicians, Nurse Practitioners), Specialist Physicians, Hospitals, Public Health Unit, Municipal Services, Home and Community Care, Community Support Services, Long-Term Care Homes and Mental Health and Addictions. These stakeholders are best positioned to identify and act on the needs of their population. North West LHIN resources will also be aligned to each sub-region to provide support and a mechanism to bring local priorities and feedback back to the LHIN for planning priorities – a sub-region Director, Clinical Lead, Performance Lead and Home and Community Care Lead will support each sub-region.

## Opioid Strategy Funding

On October 12, 2016, Dr. Eric Hoskins, Minister of Health and Long-Term Care announced the government's plan to address the rise in opioid addiction and overdose. On August 29th, the government announced an additional \$222M over three years to ensure a coordinated and holistic approach to addressing the opioid crisis, including:

- Expanding Rapid Access Addiction Medicine Clinics across Ontario, which provide people with immediate and ongoing addiction treatment, counselling and other mental health supports.
- Boosting access to community-based withdrawal management services and addictions programs across the province to ensure people with opioid addictions have access to holistic supports that address the underlying factors leading to addiction.
- Expanding proven harm reduction services, such as needle exchange programs, as well as hiring more harm reduction outreach workers.
- Partnering with the Centre for Addiction and Mental Health to expand addictions treatment and care provided in family health teams across the province.

Thunder Bay Counselling was invited to partner in a submission to the Ministry for a Rapid Access Addiction Medicine Clinic. Project Partners include:

- **Alpha Court** – Case Management and supported housing – **In kind contribution**
- **Crossroads Centre Inc.** – Pre and post treatment residential supports – **In kind contribution**
- **Dilico Anishinabek Family Care** – culturally safe care providers; social work, traditional healer
- **Medical Resources: Dr. Greg Carfagnini , Dr. Ikenna Okorafor** – addiction medicine specialists and **Dr. J. Haggarty** – Senior Medical Director, St. Joseph's Care Group
- **NorWest Community Health Centres** – Thunder Bay site primary care services, physician oversight, medical supports and administrative supports
- **PACE** – Peer outreach support/facilitated referrals
- **St. Joseph's Care Group** – Balmoral Centre medically supported withdrawal management services, physician oversight, medical supports, and trauma informed clinical counselling and system navigation; GAPPs identification of clients and facilitating access to services
- **Thunder Bay Counselling Centre** – trauma informed clinical counselling and comprehensive substance use assessments
- **Thunder Bay Regional Health Sciences Centre** – Emergency Department to initiate protocols, redirect clients to RAAM clinics or facilitate direct transfer protocol to Balmoral Centre

Secondary partners such as the Thunder Bay District Health Unit, Elevate as well as clients and family members who are critical to the success of this initiative, will be actively engaged through the development of a Community Advisory

## **Release from Custody Worker Funding**

The Mental Health and Addictions Branch of the MOHLTC has been working on a number of funding initiatives in mental health and corrections, based on direction from central government (Treasury Board/Management Board of Cabinet) from late 2016. We have been advised that our agency has been selected to receive new, annualized funding starting in 2017-18 to enhance our Release from Custody Worker (RFCW) program. The teleconference has been scheduled to discuss the implementation plan and accountability requirements for these funds and outline the role of the RFCW.

## **Technology**

The agency is making an investment in upgrading its Office suite. We are currently using Office 2010 and are beginning to experience issues with compatibility. Rather than purchasing Office 2016, which is the latest version available, after some research and investigation, it was decided it is more efficient to invest in Office 365. The Office 365 platform operates on annual licenses for which we receive a significant discount as a registered charity. Purchasing these annual licenses not only provides each user with Office 2016, it will ensure that all programs remain up to date moving forward. In addition, it allows us to begin using cloud technology for storing email and moving documents, decreasing the load on our internal file servers, decreasing costs paid for anti-virus software for email and allowing better flexibility in interfacing with products such as smart phones and tablets.

We have also recently needed to address a ransomware virus that attacked our system, particularly our documents. Our IT support is continuing to investigate how the virus entered our system; however, it has required a restore of some of our data on two occasions. It is believed that the method in which the virus entered our system has been identified and corrected to avoid any future problems. We were fortunate in that the virus was not able to infect operating systems on workstations or file servers due to a quick response time.