



Together, Best Mental Health:

Mental Health and
Substance Use
Services Strategy

2022-2025



Lakeridge
Health



Integrated Care, Delivered with Compassion



How can we work together with people to make a difference? Consider a Durham Region resident named Pat, who lived with depression, anxiety, and addiction for years.

Eventually, this cost Pat a job and a marriage. Finally, connecting with Lakeridge Health, Pat received the services and support that made a difference. Here, says Pat, “I was met with open arms, a warm heart, and all of the encouragement I needed.”

Every day at Lakeridge Health, we’re helping the people of Durham Region deal with mental health and substance use issues. Doing it in the most responsive and effective way is always our priority.

That’s why we’re excited to launch *Together, Best Mental Health*. It’s our 2022-2025 plan to deliver a more integrated system of mental health and substance use care in Durham Region.

Lakeridge Health is one of Ontario’s largest hospital systems, and operates the province’s second-largest mental health and addictions program. The needs of the people we serve are growing, and we’re evolving to meet them.

We’re committed to providing high-quality mental health and substance use care, whether in the hospital, the community, or a residential setting. *Together, Best Mental Health* envisions a system of care that’s tailored to individual needs, accessible and equitable, and easy to navigate.

It all adds up to giving people the right services, from the right people, at the right time. Lakeridge Health is already known for providing mental health and substance use services that are based on evidence, and delivered with compassion, and we remain committed to that mandate.

As we move ahead, we want to share how and why *Together, Best Mental Health* was developed and, most important, what it means to you.

With our partners, we look forward to delivering on the plan, and providing the care and support that creates better mental health outcomes for all.



Cynthia Davis
President and CEO



Dr. Tony Stone
Chief of Staff

About Us

Our programs support you and your loved ones in dealing with a range of challenges related to mental health and/or addictions.

We develop personal treatment plans, and provide support in a caring environment, whether at our Lakeridge Health Oshawa Hospital, Lakeridge Health Ajax Pickering Hospital, Pinewood Centre, or our many community treatment locations.

In 2020, Lakeridge Health and Durham Mental Health Services (DMHS) integrated our operations to better coordinate services. DMHS brought its own range of mental health services, including three crisis locations and eight group homes across Durham Region.

Who uses our services? People of all ages, and every circumstance and background.

Overall, we have more than 100,000 mental health visits a year for adults, more than 12,000 visits for children and youth, and more than 14,000 visits to our Emergency Departments (EDs) related to mental health and substance abuse.

In any given year, Canadian statistics show that one in five people will experience a mental health problem or illness.

We know that 70 per cent of mental health issues start to appear during childhood or adolescence, and that by age 40, about 50 per cent of the population will have or have had a mental illness. Mental illness affects us all, directly or indirectly.

At some point, you, someone you love, or someone you know may need help.

Substance use conditions are common too, affecting about six per cent of the population. Often, issues go hand in hand. People with a mental illness are twice as likely to have a substance use problem (it can be a way to cope), and those with substance use problems are up to three times more likely to have a mental illness.

By working together, Lakeridge Health and DMHS are facilitating smoother transitions and faster connections to appropriate services, and creating a supportive continuum of care for clients.





Why Now?

Many factors have come together to influence the creation of the *Together, Best Mental Health* plan.

- We have an opportunity to build on the integration with Durham Mental Health Services, which brought more than 225 staff and several community locations into the Lakeridge Health family.
- Needs are increasing. Over the last decade, the number of Durham residents admitted to Lakeridge Health's Oshawa Hospital for acute mental health care has gone up by 50 per cent. With the region's population set to more than double in the next 20 years, the demand for mental health services will continue to rise.
- COVID-19 has had a profound effect on mental health. Public health data has demonstrated some impacts, such as increased anxiety and depression, and increased consumption of alcohol and other drugs. The opioid crisis has continued to deepen during the pandemic.
- We want to improve access, health equity, and quality of care for vulnerable and marginalized community members, including (but not limited to) Indigenous, Black, LGBTQ2S+, youth, and those from lower socio-economic conditions.

- We need to provide more targeted and coordinated care to groups who often experience mental health and substance use issues at the same time.
- By offering service outreach models to those of highest need, we can reduce gaps and improve health outcomes.
- For our most vulnerable residents – and for all – we want to eliminate the silos between organizations that often create barriers and disjointed care.
- Individuals and their families want help finding the right service in a timely manner, and throughout their care journey.
- Virtual care has become a mainstream service. We need to embrace this model, and include digital care solutions within the menu of service options.

Jennifer's Story

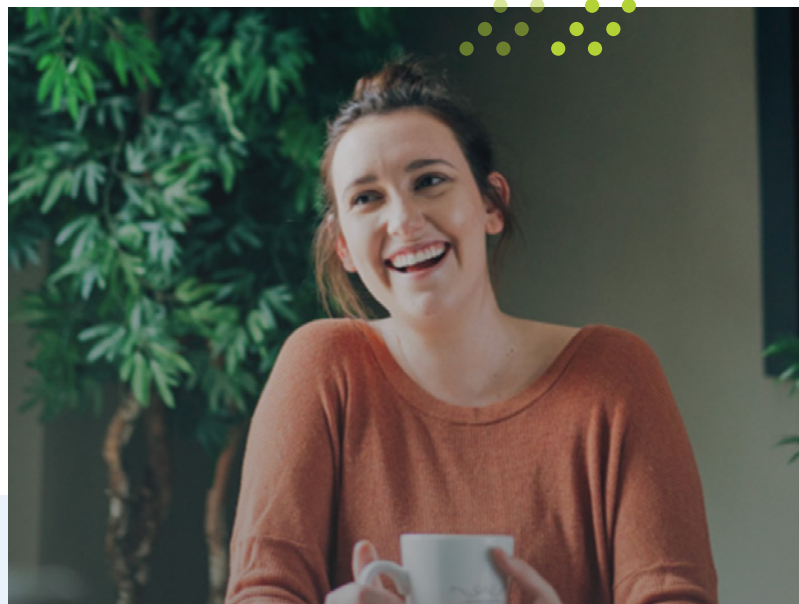
Jennifer suffered in silence for a long time from a debilitating eating disorder. So long that she had not only lost hope she'd ever recover, but had also considered taking her own life.

"I cried myself to sleep every night asking, 'Why is this happening to me?' I was keeping it a secret for years, not telling my parents, not my sister, not anyone. I was extremely discouraged and thought this is what my life is going to be like forever."

It wasn't until her second year of university that Jennifer developed bulimia, but she had been dealing with body image issues going back to grade three. Her burden was feeling that "I was ugly, worthless, and no one would ever want me."

Walking into Lakeridge Health for the first time, Jennifer was nervous and uncertain. But having

The time for change is now and we can do better together.



suffered so long, she was grateful to be receiving treatment at last. "This was the first place that seemed to appear at the right time."

Jennifer benefitted from the eating disorders program and a community-focused approach to health care. "It was the first time I felt heard and not alone," she says.

"Now, I'm excited about the future. I'm applying to do a master's degree in counselling and psychotherapy. Most importantly, I learned that my life is valuable. Lakeridge Health was the most beautiful example of how you can save someone's life. I'm the product of that."

“ It was the first time I felt heard and not alone.”

Eric's Story

Eric has been using the services of Pinewood for about 10 years. “During group meetings, I always pick up something new to help with my addiction, either from the counsellors or other clients,” he says.

When Eric comes in for withdrawal management, he feels “welcomed and safe.” He also uses the outpatient services, and talks to a mental health case manager regularly. “That helps me when I am struggling, and even when I am not,” says Eric.



Overall, Pinewood has been a life saver to me. The entire staff here are beyond kind, caring, and professional. I’m always treated with respect and compassion, and can always count on their support.”



Don's Story

Don has spent most of his adult life inside hospital systems, struggling with mental health and addictions. He was hospitalized for the first time in his late teens, and is now in his mid-thirties.

In a collaborative effort between Durham Mental Health Services and Ontario Shores Centre for Mental Health Sciences, Don was able to engage with case management services in 2018. Since then, he has learned life skills and avoided hospitalization.

He now lives in supportive housing, feeling a sense of accomplishment, and has set a goal to live independently.



What We Learned



We wanted to ensure the most comprehensive, responsive, and forward-looking plan possible. So we consulted and collaborated widely.



- A dedicated Planning Committee guided this work from start to finish. Beyond the expertise from Lakeridge Health, the committee included representatives from community health, mental health, youth, employment, Indigenous, LGBTQ2S+, educational, and first responder organizations.
- We sought guidance and input from our Lakeridge Health Client and Family Advisory Council and the Community Advisory Panel for Mental Health and Addictions.
- A survey of people with lived experience – those who have accessed services and dealt with the system – helped us to better understand the community and identify service gaps.
- We reviewed literature, health data, and best practices around mental health and substance use services.
- We consulted with system partners, subject matter experts, and other stakeholder groups.

We're grateful for this input. We listened and we learned about our successes, as well as our challenges and opportunities for improvement.

Where We're Headed

Mental health or substance use challenges can affect every aspect of a person's wellbeing.

These issues can have major impacts on physical health, safety, family and social relationships, employment, education, income, housing, and more.

Together, Best Mental Health is an opportunity to improve lives in Durham Region, by transforming how we plan and deliver our services.

This is a collaborative strategy, affirming our partnerships with other agencies, groups, clients, patients, and families in their journeys of care. Better experiences with the system, more integrated care and enhanced care all make for a healthier community.

Here are our five strategic directions, why they matter to you, and the goals to meet them over 2022-2025.



1 Ensure inclusion



2 Create better access, navigation, and transitions



3 Improve outcomes for the most vulnerable



4 Drive integration with primary and community care



5 Demonstrate outcomes

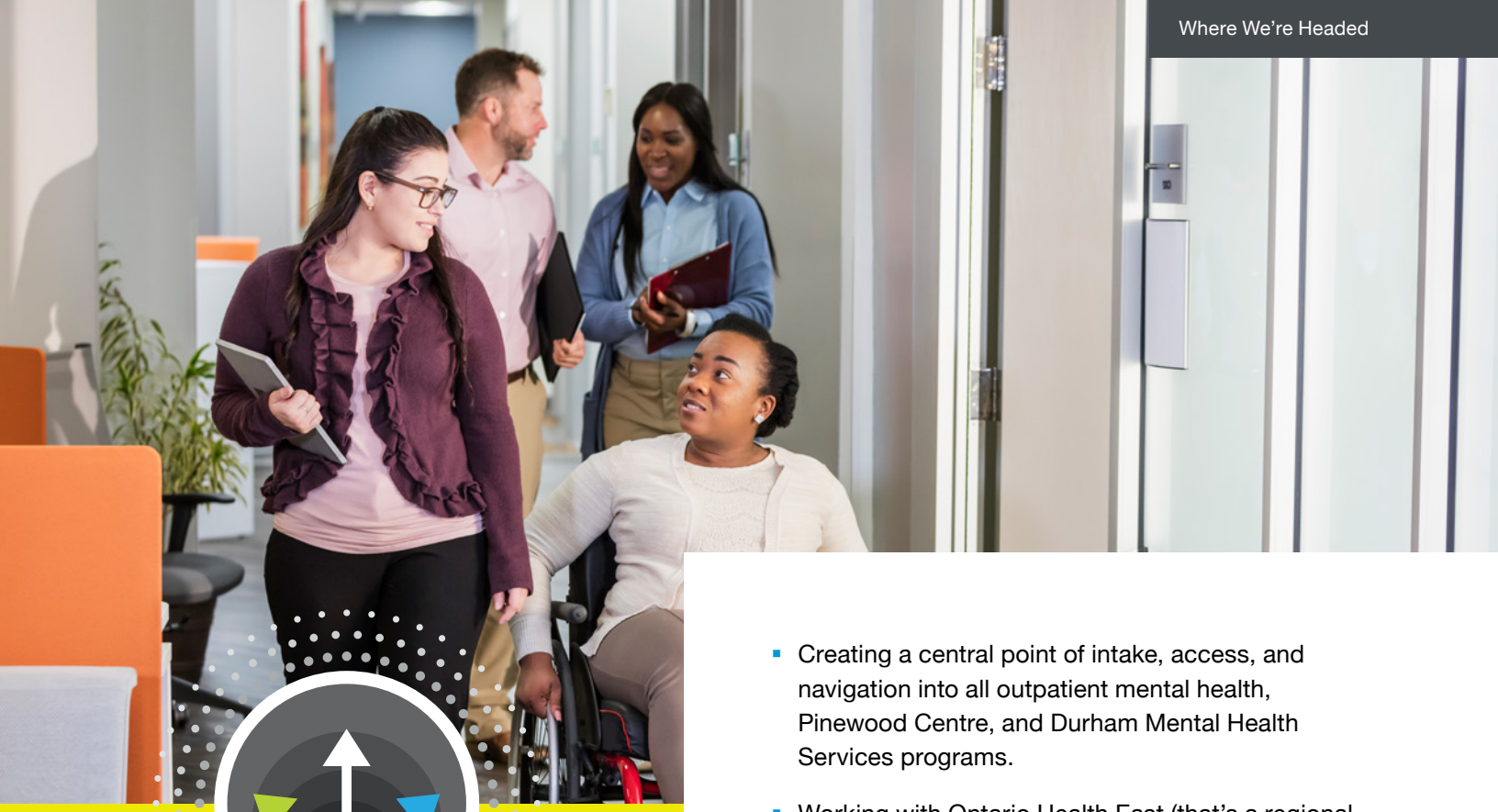


STRATEGIC DIRECTION 1

Ensure inclusion

Everyone should feel welcomed and safe when receiving care. We want to improve services for diverse and underserved communities. So we're learning even more about their needs, listening to their experiences, and reaching out to them in new ways. We'll do it by:

- Having mental health and addictions staff participate in specialized education and training. We will gain knowledge of, respect for, and competencies in Indigenous culture, anti-Black racism and oppression, and LGBTQ2S+ issues. We'll also learn about the intersectionalities (i.e., the connected or overlapping discriminations and disadvantages) that are inherent with each population.
- Hiring staff that represent the populations served, with an initial focus on Indigenous people.
- Developing and implementing specialized outpatient services for the LGBTQ2S+ population.
- Consistently engaging people with lived experience in core service developments and quality improvement initiatives.
- Making our environments visually welcoming to all.
- Increasing communication and partnerships with non-traditional organizations, such as cultural and welcome centres. That can assist with engaging individuals from diverse backgrounds and sharing service updates.



STRATEGIC DIRECTION 2

Create better access, navigation, and transitions

Making the decision to seek help with a mental health challenge or an addiction can be very difficult. We want to make it easy for people to seek and access help that gets them the right care at the right time.

- Creating a central point of intake, access, and navigation into all outpatient mental health, Pinewood Centre, and Durham Mental Health Services programs.
- Working with Ontario Health East (that's a regional network) and other provincial stakeholders to implement a coordinated access model.
- Establishing additional walk-in access to screening and short-term interventions for those with low-to-moderate mental health and substance use issues.
- Developing client pathways on the most common and acute points of entry, transition, and discharge.
- Sustaining virtual/blended care into all program options.
- Enhancing the role of peer support staff and trained volunteers within our EDs.
- Enhancing ED space to improve the patient experience, environmentally and structurally.
- Ensuring people leaving EDs have a clear plan of care.
- Ensuring treatment plans are stepped up or stepped down in accordance with client needs, based on the Lakeridge Health continuum of care.
- Leveraging Ontario's Structured Psychotherapy Program (short-term cognitive behavioural therapy and related approaches), and other emerging digital health solutions.



STRATEGIC DIRECTION 3

Improve outcomes for the **most vulnerable**

Health equity is a right. To meet the needs of vulnerable groups, and reduce ED visits, we're:

- Increasing outreach care in our communities by 25 per cent by March 2023, compared with pre-COVID-19 levels.
- Partnering with the Region of Durham in the Oshawa micro-homes (temporary housing for people who are experiencing homelessness) and Beaverton supportive housing initiatives.
- Further developing new school-based substance use and mental health positions.
- Expanding services for the 18-to-24-year-old population, known as Transitional Aged Youth, with a focus on day treatment and/or residential treatment services.
- Reviewing and implementing strategies to engage identified populations (Indigenous, Black, LGBTQ2S+, youth, and those from lower socio-economic conditions) who are also using outreach-based care.
- Engaging with regional partners in responding to the human trafficking crisis, particularly in the EDs and addictions treatment pathways of care.
- Strengthening strategies to alleviate risks of the opioid crisis. This includes:
 - implementing an Injectable Opioid Agonist Treatment service;
 - developing a rapid pathway from EDs into Pinewood's Withdrawal Management Program; and
 - conducting a pilot for eliminating costs for opioid agonist medication (a type of treatment for addiction) for those without insurance coverage.
- Collaborating with internal and external paediatric programs in response to the increased demand for eating disorder services.
- Enhancing regional partnerships toward an improved continuum of care.





STRATEGIC DIRECTION 4

Drive integration with **primary and community care**

Effective health care requires a team approach. For the people we serve, Lakeridge Health plays a key role, but not the only role. Improving relationships with primary care and community care providers means better results for clients. We're strengthening those links by:

- Building on the success of our Rapid Access Addiction Medicine service to provide additional support to community physicians in their treatment of substance use clients, and establish Continuing Medical Education opportunities.
- Advancing psychiatry outpatient services toward a consultation model, and providing support to community physicians as needed in a shared care model.
- Establishing formal partnerships with Community Health Centres, Family Health Teams and primary care clinics that provides real-time consultation and knowledge exchange opportunities.
- Leveraging our new clinical information system (Epic) to ensure primary care providers have timely access to patient information, particularly following an ED visit or inpatient admission.



STRATEGIC DIRECTION 5

Demonstrate outcomes

We want to provide optimal care, and also know what's working and what's not so that we can improve. To do it all, we need the best available evidence. Using data, we can understand the populations we serve, and develop programs that serve our community better. We'll be:

- Implementing measurement-based care, as part of Epic, our new Clinical Information System.
- Collecting equity data to assess and monitor whether diverse populations are accessing services with the expected frequency; to contribute to health equity planning; and identify and close gaps.
- Measuring efficiencies and quality improvements gained through the integration of Durham Mental Health Services with Lakeridge Health.
- Implementing program development and evaluation methods that include elements of health equity, such as the Health Equity Impact Assessment Tool.

Jane's Story

Not all recovery happens in a straight line. The journey can be winding and difficult. So it has been for Jane, a victim of human trafficking.

Jane has lived with post-traumatic stress disorder, addiction, borderline personality disorder and obsessive compulsive disorder. Her first contact with Pinewood Centre's Umbrellas Program occurred in 2018. Jane was pregnant and using crystal meth. That baby was removed from her care and legally adopted. After, Jane continued to struggle. In 2020, she was readmitted to Umbrellas, 14 weeks pregnant and using crystal meth daily. This time, she was determined to quit drugs and be able to be a mother.

Jane attended frequent counselling, and was linked with a primary care provider. She began developing skills in preventing a drug relapse, managing her trauma and regulating her emotions. Jane attended regular obstetrical visits, completed treatment, and accessed psychiatric care. She was also able to reconnect with supportive family.

Now, Jane is off crystal meth, lives independently, and parents her baby. She continues to access the Umbrellas Program and trauma therapy. Most importantly, Jane has found hope for her future.



Percy's Story

Percy found himself losing the joy he could find in anything, and didn't know why. "I just wanted to die," he says. At the urging of his wife, Percy shared what was going on with his family doctor. It became clear that Percy was dealing with depression, and he was referred to a psychiatrist.

Between 2016 and 2018, Percy was in and out of Lakeridge Health constantly, for two and half months in total. "That mental health unit became my second home," he says.

A combination of medication, counselling and other treatment helped immensely. Today, he's grateful to be alive, and to have the chance to "live my life to the fullest every day."

He says as people come here to "heal from the devastation mental suffering brings", they can count on one thing. "The care they will get will give them a decent, precious chance at putting their lives back together, and maybe even building a better life."

“That mental health unit became my second home.”

Integrated Mental Health and Addictions Planning Committee Membership



Paul McGary, Senior Director, Mental Health and Addictions, Lakeridge Health (Co-Chair)

Francis Garwe, CEO, Carea Community Health Centre (Co-Chair)

Dr. Charlene Lockner, community physician

Dr. Neeraj Bajaj, former Chief of Psychiatry, Lakeridge Health

Dr. Kevin Chopra, Chief and Medical Director, Mental Health and Addictions, Lakeridge Health

Derek Giberson, Board Chair, Backdoor Mission for the Relief of Poverty

Stella Danos-Papaconstantinou, Commissioner, Social Services, Region of Durham

Don Grant, Mental Health and Addictions Community Advisory Panel member, Lakeridge Health

Raza Masood, Mental Health and Addictions Community Advisory Panel member, Lakeridge Health

Jake Farr, Board Chair, PFLAG Durham Region

John Riches, Deputy Chief, Paramedic Services Durham

Monica Jain, Director, Careers, Counselling and Accessibility in Student Life, Ontario Tech University

Allison Hector-Alexander, Director, Diversity, Equity and Inclusion, Region of Durham

Craig Brochmann, Healthy Lifestyles Coordinator, Mississaugas of Scugog Island First Nations

Elizabeth Pierce, Co-chair, Durham Children and Youth Planning Network

Joanne Lau, Management Consultant, Strategy, Lakeridge Health

James Meloche, CEO, Community Care Durham

Melanie Hill, Manager, Carea Community Health Centre

Leslie Johnston, Regional Director, Mental Health, Ontario Shores Centre for Mental Health Sciences

Pam DeWild, Manager, Pickering Welcome Centre, and Acting Executive Director, Durham Region Unemployed Help Centre

Rob Bryan, Inspector, Durham Regional Police Service

Sheila Gallagher, Director, Community Mental Health and Addictions, Lakeridge Health

Sheryl Wedderburn, Interim CEO, CMHA Durham



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