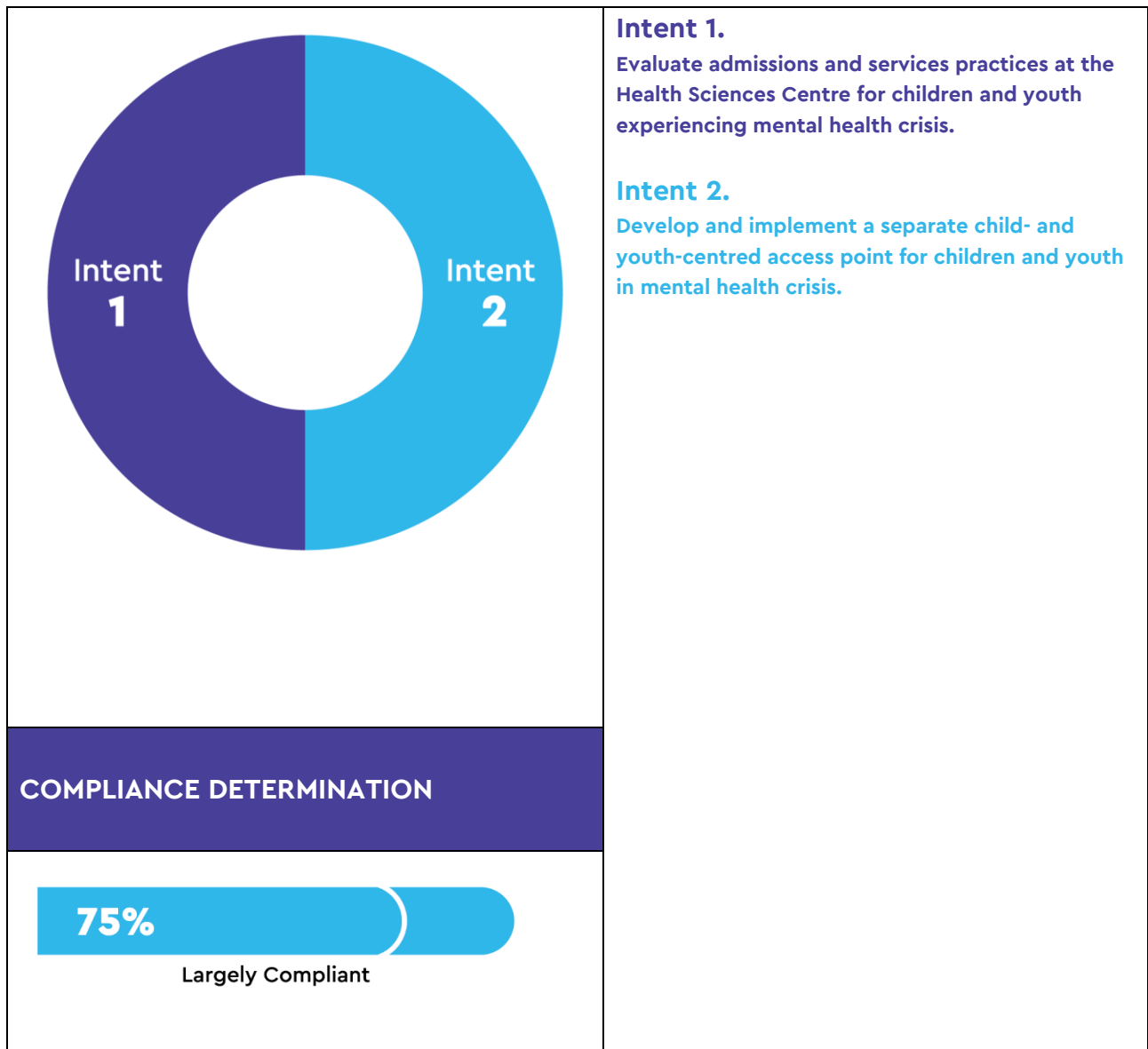


# COMPLIANCE DETERMINATION

## Matthew – Recommendation 4

**Recommendation Summary:** Evaluate existing mental health access points and implement a child- and youth-centred specialized access point that meets the needs of children and youth.

**Primary Public Body:** Manitoba Mental Health and Community Wellness



# Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

| 1. Recommendation Information                               |  |
|---|--|
| <b>Report Name:</b>   | <b>The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness</b>   |
| <b>Date Released:</b>                                       | 2/27/2020  |
| <b>Full Recommendation:</b><br>(including details)          | <b>Recommendation Four:</b><br>Improve access points for children and youth experiencing a mental health crisis. The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living, along with representatives from Shared Health, children's emergency staff and child and adolescent psychiatry – in accordance with their master plan overview of Health Sciences Centre – evaluate practices at the Health Sciences Centre – Children's Hospital Emergency Room, with the intent of developing and implementing a child and youth-centred, separate and specialized access point that meets the needs of children and youth who are experiencing a mental health crisis. |
| <b>Intent(s) of Recommendation:</b>                         | <ol style="list-style-type: none"> <li><b>1. Evaluate admissions and services practices at the Health Sciences Centre for children and youth experiencing mental health crisis.</b></li> <li><b>2. Develop and implement a separate child- and youth-centred access point for children and youth in mental health crisis.</b></li> </ol>   |
| <b>Issue:</b>   | Mental Health and Addictions   |
| <b>Public Body</b>  | Manitoba Mental Health and Community Wellness  |
| <b>Dates of Previous Official Updates from Public Body:</b> | September 6, 2023  |
|   | July 21, 2023  |
|   | June 30, 2022  |
|   | July 13, 2021  |
| 2. Compliance Determination                                 |  |
| <b>Largely Compliant 0.75</b>                               | Actions taken meet the majority of requirements for implementation, only negligible requirements remain.   |
| <b>Self-Assessment</b>                                      | Largely Compliant  |
| <b>Previous Compliance Determination</b>                    | Largely Compliant  |
| 3. Rationale for Determination                              |  |
| <i>(How did you reach this compliance determination)</i>    |  |
|   |  |

**Intent 1: Evaluate admissions and services practices at the Health Sciences Centre for children and youth experiencing mental health crisis.**

**2023**

- Mental Health reported that the initiative to enhance child and adolescent mental health services at the Health Sciences Centre (HSC) continues to be underway. Specific updates since 2022 include:
  - The Child and Adolescent Mental Health Program hired eight new staff in 2022.
  - Renovations for additional office and treatment space are still underway as of March 2023.
- Mental Health also reported the following data to demonstrate improved access:
  - Since January 2022, median wait times have been reduced by 42.5 days in the Intensive Child and Adolescent Treatment Centre (ICATS), 721 days in Anxiety Disorders Services for Children and Youth (ADSCY), and 335 days in Outpatient Mental Health Service (OMHS).
  - Number of urgent consultations to staff in rural and remote areas regarding direct care of patients has increased by 26 since January 2021.
  - Number of children and adolescents receiving group therapy at ICATS has increased by 114 since January 2021.
  - Number of children and adolescents receiving group therapy through ADSCY has increased by 130 since January 2021.
  - Number of children and adolescents receiving individual therapy through CAPSS has increased by 5 since January 2021.
- Mental Health reported that the Access Intake Assessment Coordination (AIAC) Advisory Committee and Steering Committee are continuously working to evaluate current practice and improve access and coordination. It was explained that enhancement proposals and ongoing projects are being conducted through these committees.
- In order to effectively assess compliance with this intent, it would be useful for MACY to be provided with the details of the AIAC Committees' work, including any evaluations, enhancement proposals, and ongoing projects.
- Mental Health confirmed that a formal project structure proposal on the new mental health and addictions structure from HSC reported on last year is pending.

**2022**

- Manitoba Mental Health reported that a new mental health and addictions structure has been established, and a Manager of Mental Health and Addictions Intake, Coordination and Crisis Services has been employed to improved admission services and practices for children and youth.

**2021**

- Manitoba Health and Seniors Care (MHSC) has engaged Shared Health to review and expand mental health assessment and treatment services for children and

youth at Health Sciences Centre (HSC) in Winnipeg. The review of the admission and services practices led to the development of the expansion of services plan (July 2021).

**Intent 2: Develop and implement a separate child- and youth-centred specialized access point for children and youth in mental health crisis.**

**2023**

- Mental Health reported that the Community Emergency Department Violence Intervention Program (CEDVIP) has been implemented as an additional access point and continues to work with children and youth who present with violence-related injuries to HSC Adult and Children's Emergency Departments.
- Mental Health also reported that an announcement regarding the [Pathminder](#) initiative, which will address access point enhancement, is coming in late July. It appears this initiative will not be child specific.

**2022**

- Manitoba Mental Health has reported that while Stage One of the initiatives to enhance child and adolescent mental health services at the Health Sciences Centre was implemented in 2021, Stage Two is still underway.
- It is unclear if the parts of the response referred to in Intent 2 are parts of the initiative to be implemented or parts of the initiative already implemented.

**2021**

- Expansion of services is being implemented in a phased manner. MHSAL reported that Phase One was implemented in 2020, and included:
  - Improving quality of care in the Children's Hospital Emergency Department (CHED) by providing relief coverage for child and adolescent Psychiatric Emergency Nurses (PENS). PENS assess children and youth who present in the CHED and facilitate referral to appropriate outpatient resources.
  - Increased individual and group psychotherapy capacity in the Intensive Child and Adolescent Treatment Centre (ICATS), a 12-week multi-disciplinary crisis treatment resource.
  - Increased capacity in the Outpatient Mental Health Service (OMHS).
  - Improved access to group therapy and reduced wait times for the Anxiety Disorders Services for Children and Youth (ADSCY).
- MHSC reported that Phase Two will require additional office and treatment space in HSC. Shared Health has submitted a plan for renovations in the 2021/22 Regional Health Plan. Phase two includes:
  - Increased capacity in the Child and Adolescent Rapid Assessment Clinic (CARAC) for additional children and youth to be able to receive a rapid psychiatric assessment. This will improve flow from, and wait times in, the CHED. This will also improve capacity to provide urgent consultation to

staff in rural and remote areas regarding direct care of patients, thus reducing transfers to CHED.

- Further increased group therapy capacity and reduced wait times in ICATS.
- Further increased capacity and reduced wait times in OMHS.
- Further increased capacity and reduced wait times in ADSCY.
- Shared health has advised that they are currently interviewing for positions to enable capacity enhancement in these areas. These services were implemented in April 2021 (July 2021).
- Additionally, the Community Emergency Department Violence Intervention Program (CEDVIP) assists youth and young adults aged 14-29 who present with violence-related injuries to the HSC Adult and Child Emergency Departments. The CEDVIP team provides 24/7 on call coverage by seven Community Support Workers who meet youth at HSC and offer wrap around support in community. Program implementation began in March, 2020. Due to COVID, full implementation was delayed until May, 2020 (July 2021).

**Analysis Summary:** Progress continues to be made towards the implementation of this recommendation, including the creation of new positions, treatment and office spaces, and an additional access point (CEDVIP) for children and youth who present with violence-related injuries at the HSC's Emergency Departments. While some evidence of enhanced access for children and youth was provided, it would still be useful to undertake a full evaluation of admissions and services available, prioritizing the collection of disaggregated data to identify disparities, and for the results to be made public. In addition, there remains a need to develop and implement a separate child- and youth-centred specialized access point for children and youth in mental health crisis. As such, this recommendation remains Largely Compliant.