

COMPLIANCE DETERMINATION

Suicide Aggregate- Recommendation 7

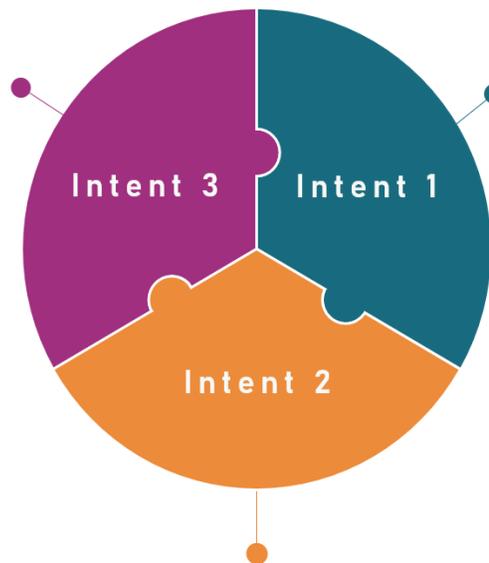
Recommendation Summary: Create long-term treatment for youth with the highest needs.

Primary Public Body: Manitoba Health and Seniors Care

3. Implement a long-term, community based in-patient treatment resource and model for children and youth at the top tier of needs, and evaluate its effectiveness in achieving the intended outcomes

Mental health assessments and treatment services for children and youth at HSC are being expanded.

Outstanding Action: More information and action are needed to meet the intent of the recommendation, which called for a long-term and community-based resource that meet the needs of children and youth who are at the top tier of mental health and addictions care needs.



1. Review national and international best practice and evidence-informed research from experts in the areas of youth mental health and addictions

Planning is underway with national leaders regarding the child and youth Needs-Based Planning framework.

Outstanding Action: A summary review of the best practice and evidence-informed research regarding youth mental health and addictions.

2. Develop a plan for a provincial application of a long-term treatment model, which must be culturally-informed and safe and where staff must be culturally competent

Work has been conducted towards developing a five-year road map. A consultant is being hired to conduct a system-mapping of mental health and addiction services and systems.

Outstanding Action: Clarification on the role and responsibility of the consultant may help meet this intent of the recommendation, if part of the consultation process is to engage with community stakeholders and Indigenous leadership, Elders, children, and youth.

COMPLIANCE DETERMINATION

0.25

Limitedly Compliant

Actions taken only implement a small part of the recommendation. Evidence supporting that an inpatient, community-based, long-term mental health and addictions treatment has been created and is operational.

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	
Report Name:	“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	Recommendation Seven: The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba develop an inpatient or community-based long-term treatment resource that offers stabilization, assessment, treatment, and aftercare for youth who are at the top tier of mental health and addictions care needs, and for whom less intensive options have been ineffective.
Intent(s) of Recommendation:	The intents of the recommendation are to: <ol style="list-style-type: none"> 1. Review national and international best-practice and evidence-informed research from experts in the areas of youth mental health and addictions. 2. Using information gathered from experts and in consultation with community stakeholders, including Indigenous leadership, Elders, and children and youth, develop a plan for a provincial application of a long-term treatment model. The model must be culturally informed and safe and staff must be culturally competent. 3. Implement a long-term and community based in-patient treatment resource and model for children/youth at the top tier of needs and evaluate its effectiveness in achieving the intended outcomes.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	N/A
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	

Intent 1: Review national and international best-practice and evidence-informed research from experts in the areas of youth mental health and addictions.

2021

- Manitoba Health and Seniors Care (MHSC) reported that discussions and planning are underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework, and indicated that many of the recommendations assigned to them can be addressed through this process. At this time, the intent of this recommendation is being put on hold until a national Need Based Planning Framework is complete.

Intent 2: Using information gathered from experts and in consultation with community stakeholders, including Indigenous leadership, Elders, and children and youth, develop a plan for a provincial application of a long-term treatment model. The model must be culturally informed and safe and staff must be culturally competent.

2021

- MHWR is leading an engagement process, including a series of consultations, to inform an integrated, whole of government 5-year roadmap. MACY participated in the recent consultation for the MHWR Departmental Roadmap held on August 23, 2021. MHWR's engagement process will guide the work of the department, and is aligned with the department's mission to provide access to mental health and addictions support and treatment to improve the life outcomes for Manitobans in their journey through recovery and healing. This will include services and systems for children and youth.
- MHWR is in the process of hiring a consultant to conduct a mapping of mental health and addictions services and systems in Manitoba, which will inform the development of a Stepped-Care model. Clarification on the role and responsibility of the consultant may help meet this intent of the recommendation, if the consultation process includes meaningful engagement with community stakeholders and Indigenous leadership, Elders, children, and youth.

Intent 3: Implement a long-term and community based in-patient treatment resource and model for children/youth at the top tier of needs and evaluate its effectiveness in achieving the intended outcomes.

2021

- MHSC has engaged Shared Health to expand mental health assessment and treatment services for children and youth at Health Sciences Centre (HSC) in Winnipeg. As physical space is at a premium in HSC, this initiative is being implemented in a phased manner. Phase One of this initiative was implemented in 2020, it 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) who are away due to illness or vacation. The 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 Services (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).
- Phase Two (Stage One) of this initiative will include:

- 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 the ICATS.
- Further increased capacity and reduced wait times in the OMHS.
- Further increased capacity and reduced wait times in the ADSCY.
- Shared Health has advised that they are currently interviewing for positions to enable capacity enhancement in these areas. These services were implemented early in 2021.
- MHSC reported that Phase Two (Stage Two) of this initiative requires additional office and treatment space in HSC. Shared Health has submitted a plan for renovations in the 2021/22 Regional Health Plan. Additional service enhancements will be planned once a timeline is solidified for any renovations that may occur.
- 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 goal of the initiative is to decrease future incidences of violence by addressing issues that put youth and young adults at risk. Individuals who accept CEDVIP services receive wraparound care in the community for approximately one year. CEDVIP is an expansion of the former Emergency Department Violence Intervention Program. 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. The Clinical Team (2.4 social workers, clinical team coordinator) provides 24/7 on-call clinical support and working alone protocol support.
- Manitoba Adolescent Treatment Centre (MATC) continues to have an Intensive Treatment Service Inpatient Service, which is a hospital-based services that provides inpatient assessment, treatment, and/or stabilization for youth with persistent and serious mental health disorders.

Analysis Summary: All three intents of this recommendation appear to be in the early stages of planning. More information and action are needed to meet the intents of the recommendation, which called for a long-term and community-based resources that meet the needs of children/youth who are at the top tier of mental health and addictions care needs. Outstanding questions remain, including whether MHWR will publish the results of their consultation. As such, the recommendation compliance determination is assessed as limitedly compliant.