

Adult Mental Health and Substance Use Network

With the Child and Youth Mental Health and Substance Use (CYMHSU) Collaborative focusing on the needs of children and youth for MHSU from 2013-17, and having evolved to a successful CYMHSU Community of Practice, Shared Care has recognized that there is an opportunity to continue the momentum to focus on adult care. With this vision it was decided to add the Adult Mental Health and Substance Use Network to the already existing Shared Care Networks.

Why Shared Care Committee continues to invest in Mental Health and Substance Use Issues

According to the Canadian Mental Health Commission, in any given year, 1 in 5 Canadians experiences a mental illness or substance use issue and most Canadians will know someone close to them that is dealing with a mental illness or substance use problem.

- By the time Canadians reach 40 years of age, 1 in 2 have—or have had—a mental illness.
- Young people aged 15 to 24 are more likely to experience mental illness and/or substance use disorders than any other age group.
- People in their early and prime working years are among the hardest hit by mental health problems and illnesses.
- Mental health problems and illnesses account for approximately 30% of short – and long-term disability claims and are rated one of the top three drivers of such claims by more than 80% of Canadian employers.
- Research shows that receiving early and appropriate mental health and substance use care can prevent the escalation of problems and symptoms, staving off larger crises, and even save lives.
- Identifying and addressing the gaps in the current system leads to better mental health outcomes, and reduces the need for system resources during adult years.

Shared Care's Mental Health and Substance Use Network will focus on three adult age range populations:

- Young adults (18-35yrs)
 - i.e., Youth transitioning into the adult care system.
- Middle age adults (36-55yrs)
 - i.e., including caregiver burnout involving anxiety and depression.
- Older adult (55-65yrs)
 - i.e., High prevalence of underdiagnosed depression which leads to a significant impact on physical health conditions.

Recognizing that British Columbia's population is home to about 4.63 million people, and within the different regions there are vast demographic differences, which this particular provincial initiative is keen to understand from all the work of the unique communities across the province. Together we can build on the experiences to tackle mental health and substance use.

Shared Care will support GP-Specialist led partnerships with other allied health care providers to regularly meet to identify and address community issues, and provide opportunities to strengthen and coordinate mental health and addictions care.

The network will have two initiation phases allowing for financial support to be allocated according to the proposal's size and scope. During these two phases, continuous central support such as resources, facilitation and an evaluation framework will be provided, which will enable a strong foundation for measurement, and streamlining of information.

Phase 1	Phase 2
<ul style="list-style-type: none"> • \$8,000-10,000-12,000 • Provider Engagement • Family, Caregiver and Patient participation. • Needs Assessment 	<ul style="list-style-type: none"> • \$45,000-50,000-60,000 • Budget varies depending on size and scope of community. • Project initiation (1 WG meeting) • Planning for solutions (2-3 WG meetings) • PDSA (3-6 months and 2-3 WG meetings) • Engage community (engagement event) • Evaluation and project Close (1-2 WG meetings)
<p>Shared Care Central Support</p> <ul style="list-style-type: none"> • Identify current state • Goals for improvement • Patient Journey Mapping • Delivery of Community Survey 	<p>Shared Care Central Support</p> <ul style="list-style-type: none"> • Facilitator/ Consultant • Centralized Project Coordinator • Centralized Evaluator • Learning Center • Existing resources • ACEs Toolkit

Spread

Shared Care has been able to spread it's learnings from the CYMHSU Collaborative and existing SCC funded mental health and addictions initiatives. We are now able to extract learnings and resources from the new Shared Care Learning Centre, as well as support communities to be involved in current adaptable initiatives such as CBT and ADHD training for health care providers.

Alignment

One of the most important goals for the Shared Care Committee is to have the network align our priorities with other respective governing bodies.



Partners and Linkages

Shared Care values exchanging information and encourages collaboration. By linking with partners regularly, our communities can stay up to date and aid in knowledge mobilization.