



# youth wellness hubs

## ONTARIO

[youthhubs.ca](https://youthhubs.ca)

**Youth Wellness Hubs: Engaging with youth, families and service providers to create transformative change in youth mental health**

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# Outline

- ❖ Ontario context for YWHO development
- ❖ National and international context
- ❖ YWHO: The model and the initiative
- ❖ Engagement with youth, family members and service providers
- ❖ Integration
- ❖ Discussion



**CONTEXT FOR YWHO DEVELOPMENT**



# Youth Collaboration & Screening Networks

## Territories

- Whitehorse, **YK**
- Dawson City, **YK**
- Watson, Lake, **YK**
- Haines Junction, **YK**
- Dehcho Region, **NWT**
- Yellowknife, **NWT**
- Nunavut**

## Total Engaged:

- 7 provinces
- 3 territories
- 23 communities

## East Coast

- Cape Breton Region, **NS**
- Pictou County, Cumberland County and Guysborough / Antigonish / Strait Region, **NS**
- Prince Edward Island**
- St. John's, **NL**

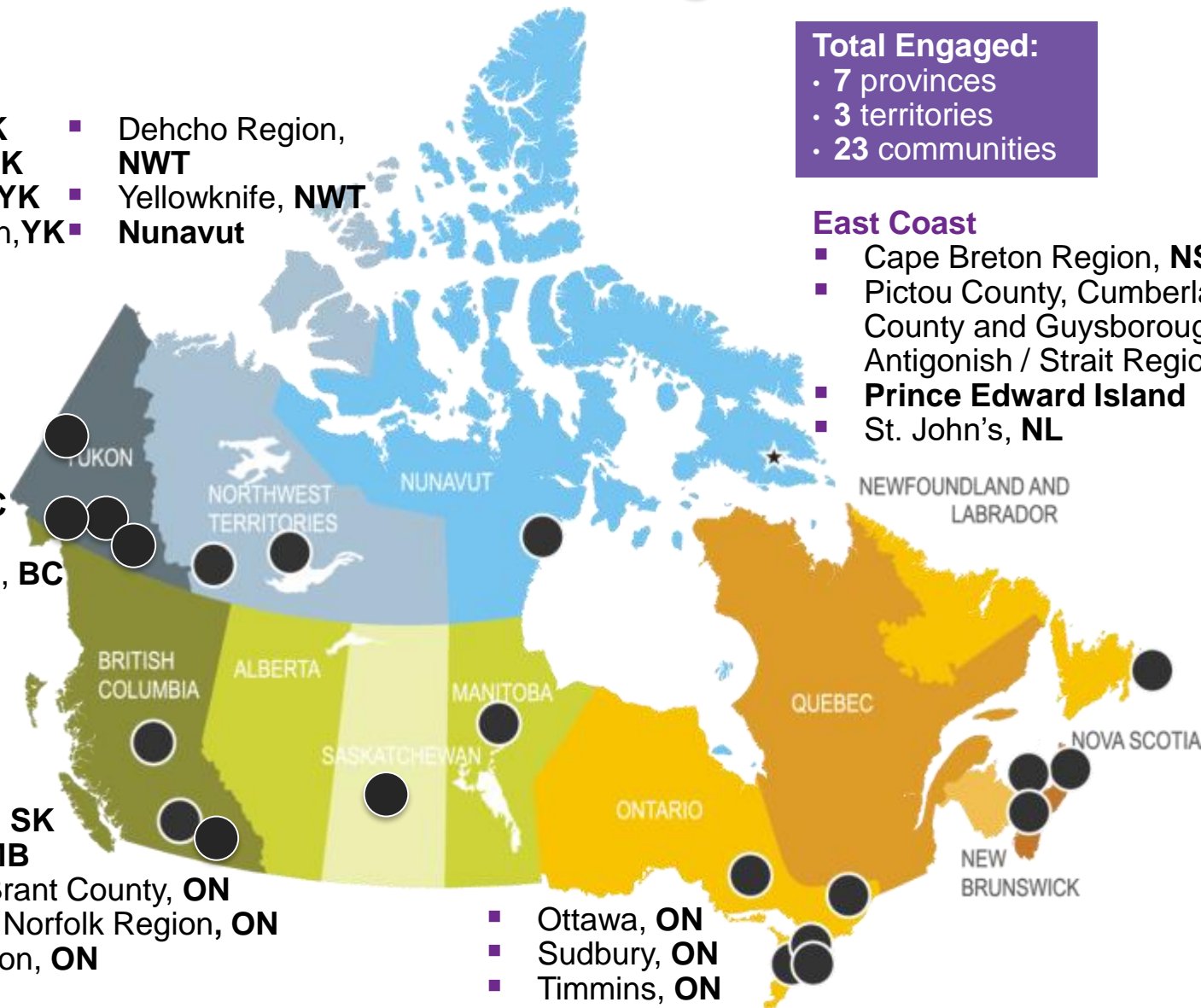
## West Coast

- Cranbrook, **BC**
- Kelowna, **BC**
- Prince George, **BC**

## Inland

- Prince Albert, **SK**
- Thompson, **MB**
- Brantford & Brant County, **ON**
- Haldimand & Norfolk Region, **ON**
- Niagara Region, **ON**

- Ottawa, **ON**
- Sudbury, **ON**
- Timmins, **ON**
- Toronto, **ON**







**YOUTH  
SERVICES  
SYSTEM  
REVIEW**

## A review of Ontario services addressing substance use (SU) available to youth age 12-24 (2010-2014).

- Consultations with stakeholder networks
- **447** stakeholder surveys (youth, families/ supporters, service providers)
- **17** focus groups with **186** youth
- 4 consultation days with 168 service providers, 11 youth and 3 family members
- **10** interviews with front line service providers

Brownlie, E.B., Chaim, G., Heffernan, O., Herzog, T., & **Henderson, J.** (2017). Youth services system review: Moving from knowledge gathering to implementation through collaboration, youth engagement, and exploring local community needs. *Canadian Journal of Community Mental Health*, 36(2), doi:10.7870/cjcmh-2017-018.



# Youth Screening & YSSR Combined

## Who we heard from:

	Service Provider*	Youth	Family**	Total
Surveys	314	134	116	564
In-person (Focus Groups/Workshops)	931	299	55	1285
Total	1245	433	171	



**YOUTH  
SERVICES  
SYSTEM  
REVIEW**

\* "Service provider" includes primarily direct service providers, along with agency leads, policy makers and researchers

\*\* "Family" includes family members/caregivers and other supporters of youth with lived experience



# System Challenges from Youth, Family Members and Service Providers

- Long wait times, many barriers
- Lack of clarity about where to go for help
- Little communication and coordination between services
- Limited meaningful engagement of youth and their families
- Mandatory and unguided transition to the adult care system at age 18
- Lack of information about quality and outcomes of services
- Inappropriate care given at the wrong time by the wrong provider

*“It’s easy to get lost in the system or overlooked.”*

*-youth*



# Key Solutions from Youth, Family Members and Service Providers

- Need easy & timely **access**; provide **early** intervention
- Address fragmentation with **integration**
- Offer **developmentally-appropriate, effective** services
- Keep **youth and families** at the centre
- Pay special attention to the needs of **transitional-aged youth**

*"Shouldn't give up on them at 16; need to support them through 24 years old."*

-youth

*"Be more youth focused. We have opinions and voices."*

-youth



# Ontario: System Vision

Right kind of services  
at the right time  
by the right provider  
in the right place





# YouthCan IMPACT

**A Collaborative Initiative to Build  
and Test an Integrated Model of  
Service Delivery for Youth**



# A Collaborative Project!



**The Sashbear Foundation**  
Making waves on BPD and suicide prevention...



*South East Toronto*  
**Family Health Team**



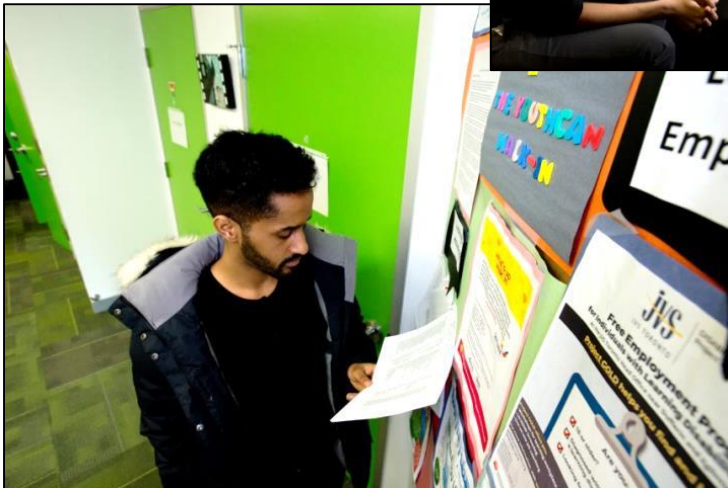
## Funders:



**Marilyn & Charles Baillie**









# YouthCan IMPACT

Co-created with youth, family members,  
clinicians, administrators, researchers

One team; 'one-stop-shop'  
Quick access; low barrier  
Local community  
Tailored services  
Leverages available  
community services

## Integrated Service Pathway

Evidence-  
informed  
practice

Walk-in or  
scheduled  
appts

Evenings &  
weekends

**Intake**

Solution-Focused Brief  
Therapy

Needs  
Assessment

Low

Moderate

High

Solution-Focused  
Brief Therapy

DBT Skills Group

Psychiatric  
Response

YMH & A Services

Moving hospital  
services to  
community

Drop-in  
Activity Area

Housing  
Supports

Peer Support  
Group

Care  
Navigation

Peer Support  
Mentor

24/7 Crisis  
Support

GP Access

Nurse  
Practitioner

Vocational  
Support

Internal/External  
Agency Services

Family  
Connections

Individual DBT

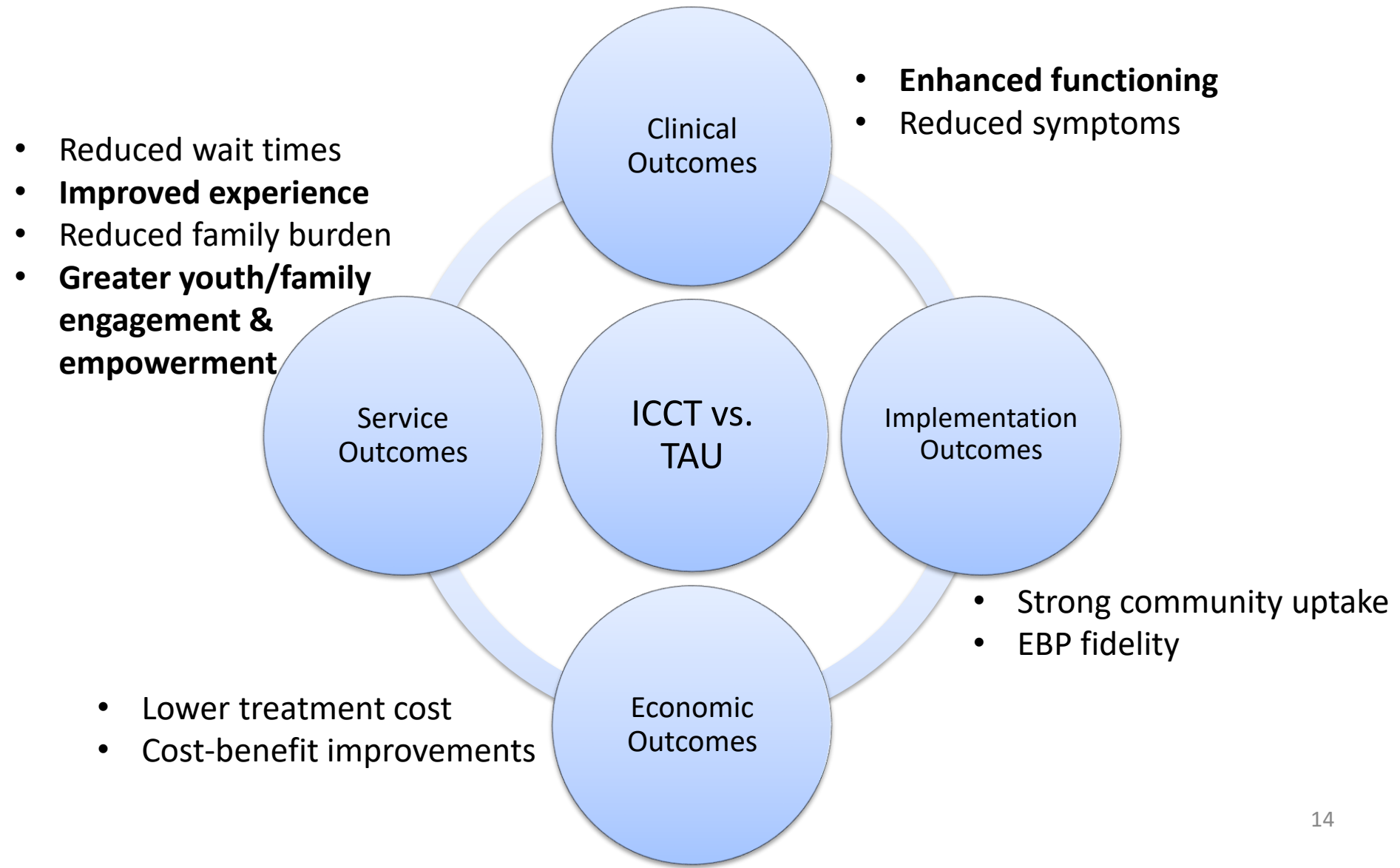
Cont'd  
YMH & A  
Services

## Additional Service Options

**Evaluation:** Wait times, satisfaction, functioning, burden, engagement, empowerment, symptoms, cost effectiveness, feasibility, process, model & treatment fidelity

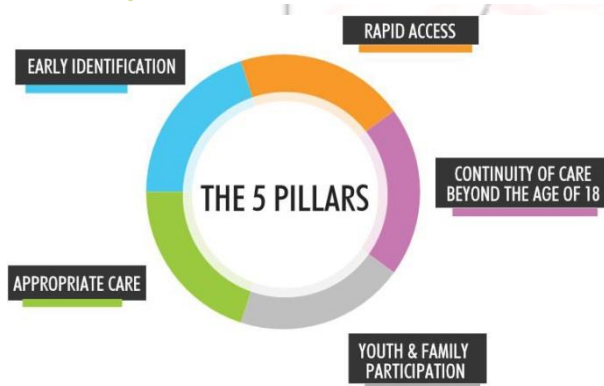


# Primary & Secondary Outcomes





# National & International Context



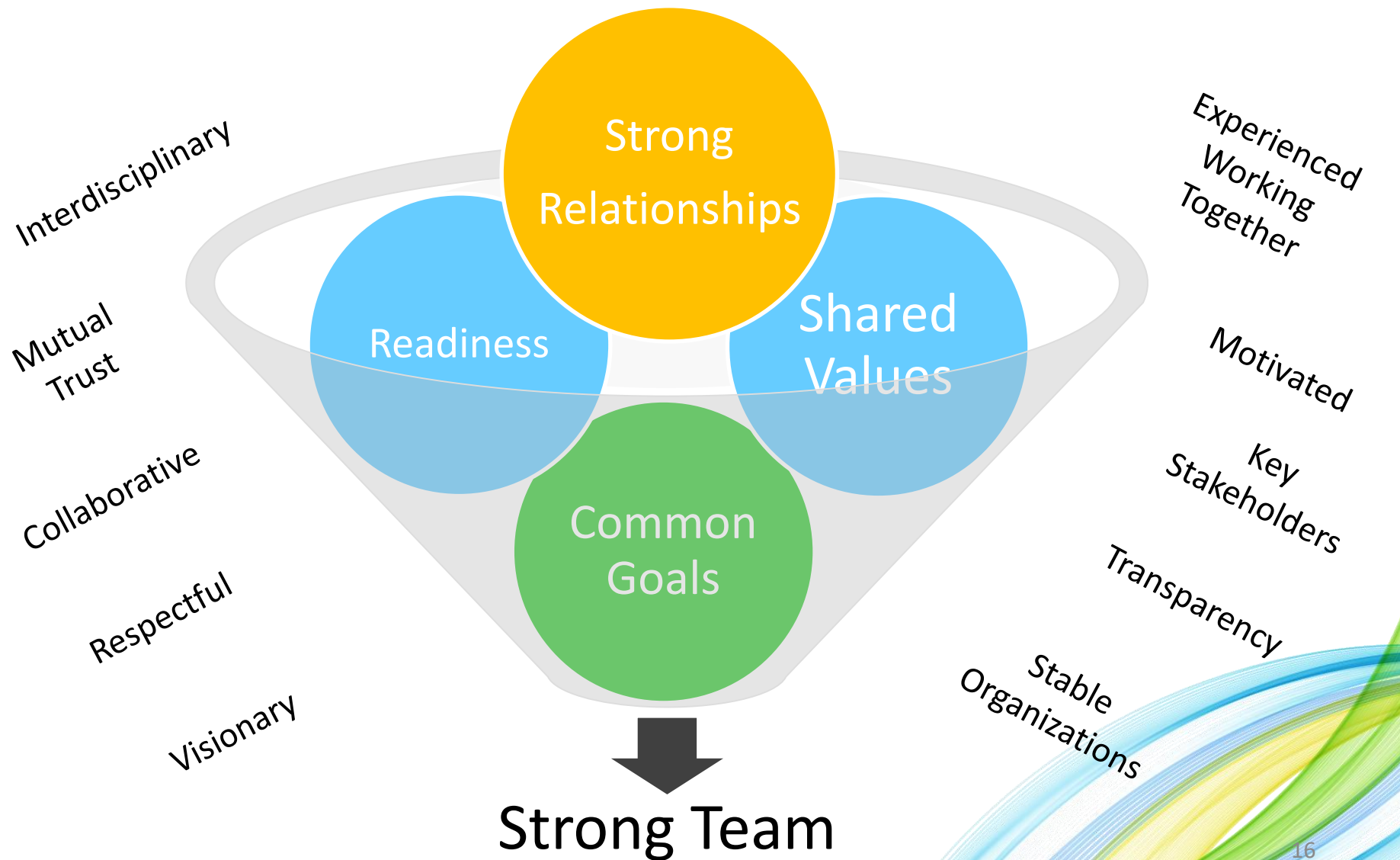
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WHERE WELLNESS TAKES SHAPE



youth wellness hubs  
ONTARIO



# Collaborative Team: Facilitator





A photograph of four young people of diverse backgrounds sitting together and smiling. A young woman with curly red hair is on the left, smiling and looking down. Next to her is a young man with short brown hair, also smiling and looking down. In the center is a young man with short dark hair, smiling and looking towards the right. On the right is a young woman with long dark hair, smiling and looking towards the center. They are all wearing casual clothing. The background is a plain, light-colored wall.

# youth wellness hubs

## ONTARIO

[youthhubs.ca](https://youthhubs.ca)



# Youth Wellness Hubs Ontario

- ❖ A system transformation initiative funded by the Ontario Ministry of Health
- ❖ An entity that is a backbone organization to support communities to develop & implement hubs that reflect common core features, with room for adaptation to local context



# YWHO Hub Model

- ❖ Youth friendly locations where youth aged 12-25 can easily and readily access a range of services that are integrated and high quality
  - ❖ Mental health (adolescent & young adult MH)
  - ❖ Substance use
  - ❖ Primary care
  - ❖ Education, employment & training
  - ❖ Housing and other community & social services
  - ❖ Peer support, family support, navigation & outreach



# How are hubs designed to help?

Current state problems	Desired future state	Hub features
Long wait times & poor access	No/minimal wait times & enhanced access	Walk-in/low barrier service delivery platform; clear service pathways
Lack of clarity re where	Good awareness & clarity	Branding
Poor communication, coordination & transitions	Strong communication, coordination & seamless transitions	Integration & co-location; continuum of services
Age cliff at 18	Developmentally-based services & no age cliff	Serve 12-25 years
Lack of standard services & quality	Standardized high quality services	Standardized core services; EBP
Lack of meaningful reportable outcomes	Meaningful outcomes consistently measured & reported	Systematic evaluation of meaningful outcomes
Service-centred care	Youth & family-centred care	Youth & family centred, responsive (e.g., hours, location); Stepped care; Youth friendly space
Lack of youth & family engagement	Meaningful youth and family engagement	Co-creation with youth & family members



# YWHO Hub Objectives

- ❖ **Co-create** with youth & families
- ❖ Provide **rapid access** to **easily identifiable** mental health & substance use services
- ❖ Provide **evidence-based** interventions **matched** to level of need
- ❖ **Integrate** services into one-stop-shop model of care offered in a **youth-friendly** space
- ❖ **Reduce transitions**
- ❖ Establish common **evaluation** across sites



# Youth and Family Engagement Guiding Principles

1. Value youth as community assets
2. Commit to participatory leadership
3. Build authentic relationships
4. Integrate health equity
5. Meet youth and families where they're at
6. Use a whole community approach
7. Put safety first



# Provincial Session: What we heard





# YWHO Core Values



Youth & family centredness in services



Engagement & co-creation of services



Increasing visibility & addressing stigma



Collaboration across sectors & stakeholders



Evaluation & quality





# WHAT SERVICE COMPONENTS ARE ESSENTIAL TO ADDRESS SYSTEM GAPS?

1

EARLY INTERVENTION SERVICES

4

WALK-IN SERVICE MODELS

2

TAY AND DEVELOPMENTALLY APPROPRIATE SERVICES

5

RESOURCES UTILIZATION MATCHED TO NEED

3

EFFECTIVE **INTEGRATED** ONE-STOP-SHOP MODEL

6

STANDARDIZATION & OUTCOME-BASED CARE



# Integration

“...the management and delivery of health services so that clients receive a continuum of preventive and curative services, according to their needs over time and across different levels of the health system” (WHO)



## BASIC PRINCIPLES OF

# HEALTH SERVICE INTEGRATION

Delivery of health care services is complex and requires an innovative and contextualized approach; as a result, there is no single definitive model of integration that is appropriate for all organizations and situations. The World Health Organization (WHO) describes integration as *"the management and delivery of health services so that clients receive a continuum of preventive and curative services, according to their needs over time and across different levels of the health system."* With this in mind, decision makers can use the following principles in the development of appropriate strategies for planning and implementing successfully integrated health care systems:

### COMPREHENSIVE



Integrated health systems take responsibility to plan for, provide, and coordinate all core services along the continuum of health for the population served.

These services include primary care through tertiary care as well as cooperation between health and social services to coordinate across sectors.

### CLIENT FOCUSED



Integrated health systems place the patient/client at the centre of their operations.

A client-focused approach encourages active participation by the client and their family or informal caregivers while focusing on population-based needs assessment.

### STANDARDIZED CARE



Shared protocols based on evidence are key to the functioning of interprofessional teams and serve as an important element of integrated health services.

Practice guidelines are meant to standardize care across services and sites, with the aim of enhancing quality of care.

### PERFORMANCE MANAGEMENT



Integrated health systems have well-developed performance monitoring systems, including indicators to measure outcomes at different levels.

Continuous measurement of care outcomes and reporting are fundamental parts of the quality improvement process.

### INFORMATION SYSTEMS



Quality information systems strengthen communication capacity and information flow across integrated pathways.

Data management through a computerized system allows for collection, tracking, and reporting of information such as population demographics and needs, use of services, and client experience.

### LEADERSHIP



An integrated health system calls for leadership with vision as well as organizational culture consistent with this vision.

Bringing different cultures together requires dedicated leadership with clear communication processes.



# Benefits of integration

- Experience common elements across services as multiple agencies and stakeholders are working together to target a common issue or set of issues; less fragmentation
- Responds to concerns expressed by clients, families and service providers
- Associated with improved access to service for individuals and families
- Associated with more positive clinical outcomes, especially for individuals and families with complex needs



# Integration barriers

- 3 Ts – time, trust and turf
- Value conflicts
- Lack of respect for other agencies' knowledge, approach and expertise
- Lack of clear and effective communication
- Negative views of other professionals
- Lack of common goals and unified purpose
- Lack of structural supports, including leadership



# Successful integration involves .....

- Common vision, goals
- Commitment to shared learning
- Shared power and accountability – clear governance structure
- Leadership
- Structural support, e.g. “backbone” resources
- Formal documentation
- Evaluation

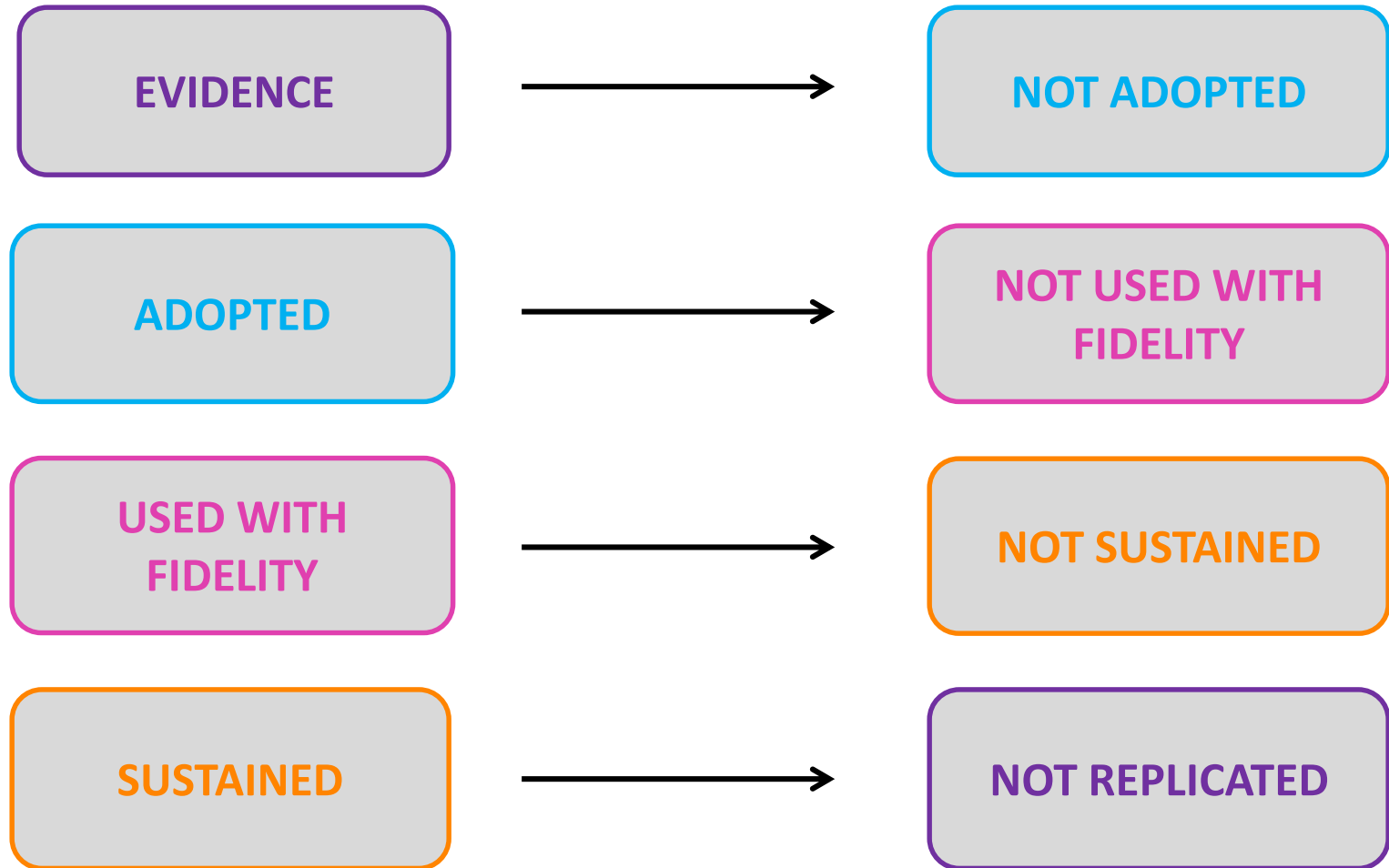


# Provincial integration

- **Standardization**
  - Brand
  - Model
  - Evaluation
- **Backbone support**
- **Network structures & Community of Practice**
- **Governance**



# Why Backbone Supports and Implementation Science are critical?





# The formula for success





# Evidence Supporting Integrated Youth Services

- **“A multi-disciplinary, multi-level, multi-sector and multi-linkage approach that is anchored in the local community is the hallmark of a sustainable and comprehensive community mental health care system.”** (Ng et al., 2013)
- Equitable partnerships with youth and other sectors promote innovative, equitable ways of providing services while also creating **lasting changes in perceptions, behaviours, and policies** that have negatively impacted youth in the past (Blanchet-Cohen, Mack, and Cook, 2011).
- Integrated stepped care models have been shown to positively influence clinical treatment outcomes, namely by **decreasing symptoms and increasing youth psychological and adaptive functioning** (van der Leeden et al., 2011; Zatzick et al., 2014)
- Integrated stepped care models have also demonstrated positive impacts on **health system outcomes, such as increased access to care, reduced wait times, and improved perceptions of care** (Rickwood et al, 2015).
- Youth with mild to moderate mental health needs can be given effective low-intensity treatments, thus freeing up specialist CMHC and hospital-based resources to provide those with more serious needs the requisite higher-intensity treatments (<http://bjp.rcpsych.org/content/186/1/11.2.full>)



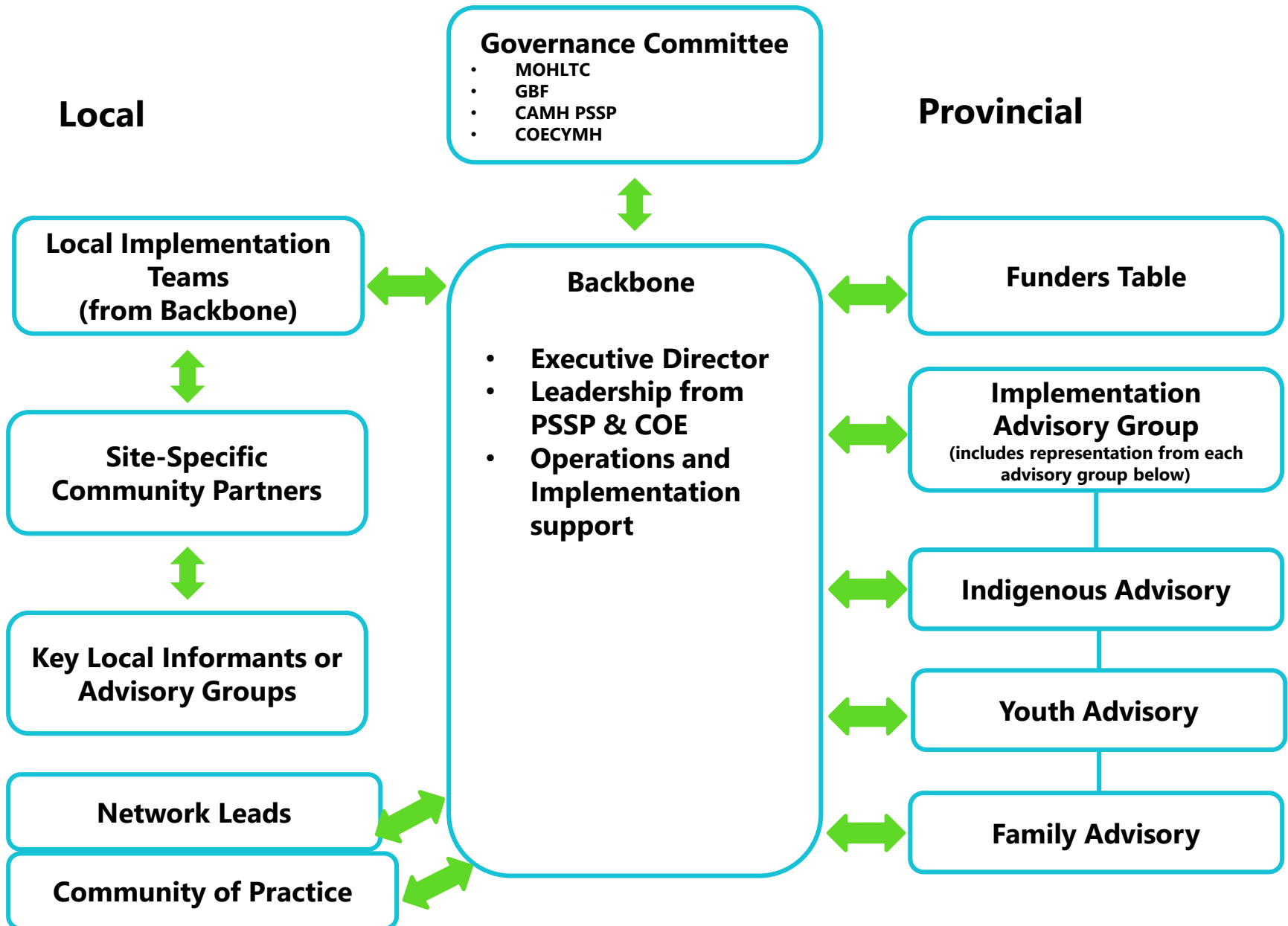
# Backbone resources

- Project management and facilitation
- Evaluation
- Coaching across the community, organizations and staff about the hub model and approach
- Integrating principles of equity
- Supporting authentic youth engagement and family engagement and co-design processes
- Communications, building awareness and support, and sharing information about the hub
- Implementation planning and operations



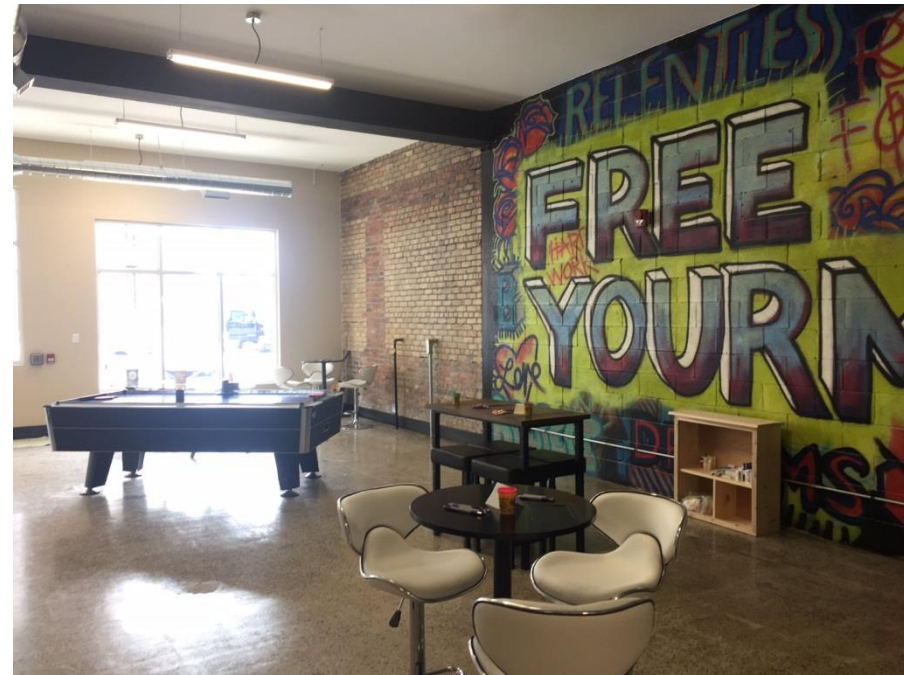


# Governance structure





# Chatham-Kent





**Questions?**



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THANK-YOU