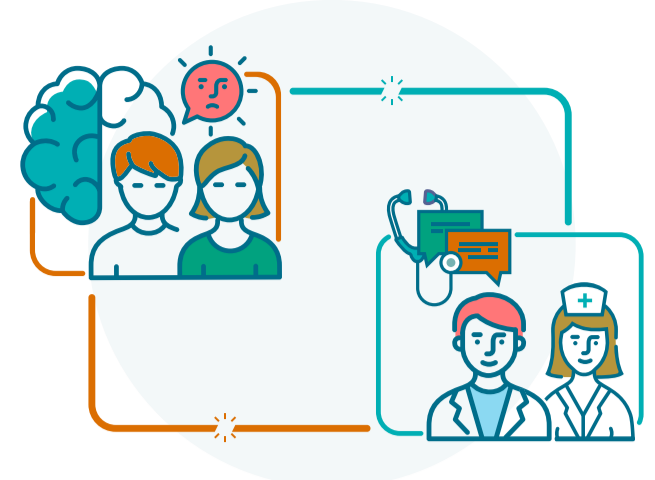


MHA WHITE PAPER – EXECUTIVE SUMMARY

The **White Paper on Mental Health and Addictions** is comprised of **two parts**. Through research, focus groups, and surveys from Vancouver Division family physicians, we developed a **“current state” description of gaps within the system of mental health supports**. In the second section we have suggested the myriad of **opportunities to address the challenges with the system of mental health supports**.

The Mental Health and Addictions Steering Committee provided guidance and leadership in the development of this White Paper.



GAPS – CURRENT STATE

Missing Middle



Family Physicians

- Consolidated MHA knowledge & resources is not accessible
- Navigating patient resources is difficult & time consuming
- FP's acting as counselors beyond scope of practice & challenge of 8 session limit
- When things get beyond MHA capacity of FP - enhanced expertise is needed for patients w/ chronic MHA conditions & comorbidity of conditions
- Timely access to help when all other treatment has been exhausted



Patients

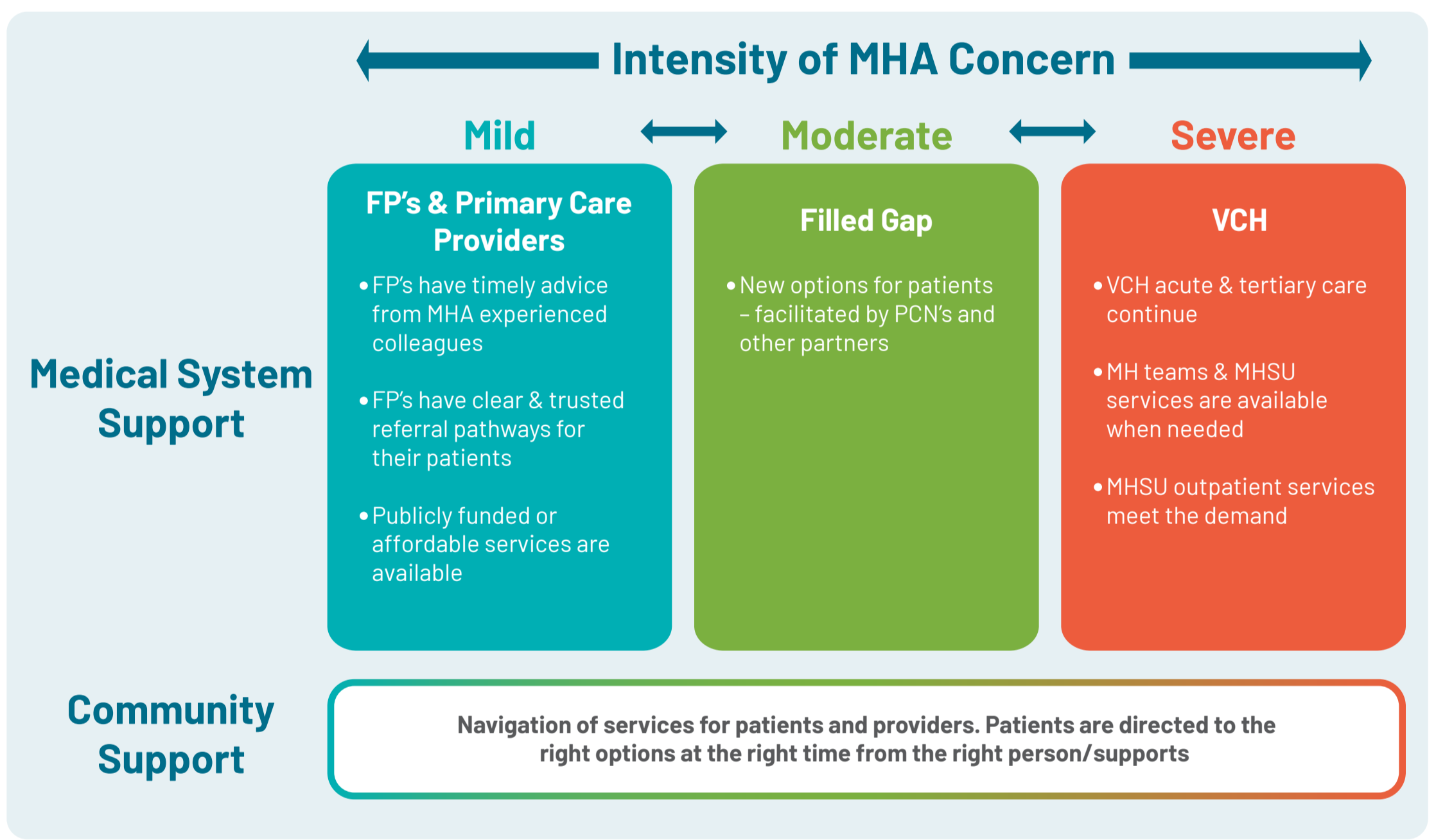
- Not complex enough for VCH services
- In between systems of support
- Unattached patients who present in the Health Authority System & not suitable for FFS FP
- Need for temporary but timely psychiatric care

Who is the “Missing Middle”?

Patients whose MHA concerns have grown beyond what FPs and NPs can support in their clinical encounters but do not meet the official mandate of available health authority options. Some patients may have the means to access private or extended health options like counselling. However, this is not accessible for all patients, leaving some **without support**.



FUTURE STATE



SYSTEM IMPROVEMENTS & OPPORTUNITIES

The gaps identified in this white paper are systemic and require multi pronged systems wide solutions. We have considered a number of opportunities for system improvements.



Address the Missing Middle -PCN

- PCN mental health services to support patients who decompensate
- FP's to provide focused care to patients of fellow primary care providers (eg. OAT)
- Home for mild-moderate programs such as CBT Skills, chronic conditions management, self healing strategies



Ease System Navigation

- Support FP's to easily access up to date info on programs & services
- Timely info on:
 - VCH mental health programs
 - MHSU and wellness community based programs
- Ensure patient info and consult notes are timely and easily accessed
- Ideally, Navigators/ peer supporters work alongside patients



Enhance Education & Training

- Develop training opportunities for FP's in these areas:
 - Social determinants of health
 - Trauma informed care
 - Cultural competencies
 - Self care & mindfulness
 - Addictions care
- Mentoring/ shadowing w/ peers who have MH expertise
- FFS FP's to be better informed of VCH MHSU programs & services
- Clinic Operations training on inclusion of addictions care w/ in a FFS setting



Patient Attachment

- Leverage PAI services to improve attachment of MHA patients to primary care supports