

research snapshot

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Developing better mental health crisis services

What is this research about?

Community crisis services are provided to people with problems of mental health and mental illness. They reduce hospital use, involuntary treatment, and criminalization. Crisis response is an important part of a comprehensive mental health system. This study looks at a community-based crisis service that used extra funding to develop timelier crisis services and increase mobile capacity. The funding also helped service adaptations focus on broadening the scope of the crisis service. The follow-up needs of individuals served were also addressed.

What did the researchers do?

Researchers in Kingston developed a transitional case management model integrated with crisis services. They looked at the extent to which the new service led to expected and desired changes in service delivery patterns. The study investigated:

- the relationship between this new crisis service model and service capacity;
- access to mobile crisis services;
- access to crisis services by the broader community;
- appropriateness of service delivery patterns; and,

What you need to know:

This study evaluates a community-based crisis service that used extra funding from Ontario's Ministry of Health and Long-Term Care to develop a new model. The new model focused on increasing service capacity, access to mobile crisis response, and appropriateness of services delivered. The new model also included the addition of a transitional case management service. The results showed positive changes in the direction of desired service use patterns.

- acceptability of the new crisis service to the local network of community mental health and social services.

Their evaluation used existing databases, and interviews with a range of local community service providers to compare the "old model" to the "new model."

What did the researchers find?

The researchers found that the new model did lead to the expected changes in service use patterns. Specifically, the new model demonstrated:

- a significant increase in service capacity;
- a dramatic increase in the number of mobile crisis visits provided;
- improved access to a broader community population;
- more appropriate patterns of service delivery with respect to fewer days of crisis service; and,
- exit outlooks more consistent with crisis resolution.

Rankings of acceptance of the new crisis service by local service network varied greatly across service sectors. Police, hospitals, and community health agencies were most satisfied. Non-health social services and educational institutions were the least satisfied. The researchers also commented on the need for:

- more crisis beds;
- more attention to the needs of people with addiction problems who also have psychosis;
- a way to better address the difficulties associated with individuals who refuse assistance;
- more psychiatry services; and,
- more and better organized access to mental health resources in the community.

How can you use this research?

This research can be used to look at a new service model that may be relevant and applicable to other communities. It can also be used to support the need for funding and policies that are flexible and sensitive enough to address issues as they emerge in the field.

About the researchers

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Evidence Exchange Network (EENet; formerly OMHAKEN) has partnered with the **Knowledge Mobilization Unit at York University** to produce Research Snapshots in the field of mental health and addictions in Ontario. EENet actively promotes the use of research evidence in decision-making by supporting engagement and connections between researchers and mental health and addictions stakeholders across Ontario. EENet works to develop targeted KT products and tools and supports interactive exchanges. It is supported by the Ontario Government and the Centre for Addiction and Mental Health. This summary was written by Angela Yip.

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