

Health Sciences North Crisis Intervention Services Model

As of October 1, 2012 the Crisis Intervention Services Program of Health Sciences North (HSN) relocated the majority of its staff from the Emergency Department at the Ramsey Lake Health Centre to the Sudbury Mental Health and Addictions Centre at 127 Cedar Street in downtown Greater Sudbury. The Sudbury Mental Health and Addictions Centre, is HSN's hub of excellence for community-based outpatient mental health.

Our decision to relocate and redistribute our crisis intervention services was supported by the Ontario Ministry of Health via the North East Local Health Integration Network (NE LHIN), in partnership with the Canadian Mental Health Association Sudbury/Manitoulin Branch, Greater Sudbury Police Services (GSPS), Child and Family Services, and the Northern Initiative for Social Action (NISA).

There was a very strong sense among key partners that the goal of this move must be to enhance community-based mental health care for clients. In doing so, many mental health care clients can be diverted away from the Emergency Department, and treated in a more suitable environment.

Partners also felt there was a compelling need to assist Greater Sudbury Police Services when they dealt with people requiring mental health care services. This new approach had to be more sensitive and client-centred, and reduce the number of times GSPS would have to escort people to the HSN Emergency Department for care, tying up valuable police resources.

Together we have developed a Crisis Intervention Model designed to respond to individuals whom are experiencing a personal crisis. This group of agencies formed a large component of the Steering Committee which has helped to guide the development and implementation of our new service model.

The Crisis Intervention Service model that has been introduced involved a number of key amendments to our previous model. These include the following parameters;

1. **Live Voice.** We have restructured our staffing model to ensure that our Crisis Intervention Services provides a live voice to all calls that we receive.
2. **Mobile Crisis Intervention Services.** This team is comprised of a social worker and a nurse available 7 days a week from 10:00 a.m. until 10:00 p.m. (latest dispatch is 8:30 p.m.) and within the catchment area of the City of Greater Sudbury.

3. **127 Cedar Street.** Our office is on the ground floor, and located conveniently behind the Pita Pit.

Being co-located with a well known eatery does help to provide clients with an ease of access and anonymity should that be of assistance to them. This office is able to assist clients seven days a week, from 8:30 a.m. until 10:00 p.m. Our office is open 365 days per year.

4. **Crisis Intervention Services with the Health Sciences North Emergency Department.** We continue to provide a Crisis Intervention nurse clinician every day of the year. The Crisis RN takes referrals for clients that have attended at the Emergency Department and will benefit from a crisis intervention assessment.

Our service model is designed to assist clients in a personal crisis. These situations are individualized and unique. In essence, it is a point in time when we find ourselves in an unmanageable situation. In addition, our normal reservoir of resources and support are no longer sufficient or available to help us cope in a crisis situation. This is a very personal and difficult situation for an individual to be in, and our skilled clinicians are excellent to assist individuals in crisis to identify and obtain the help that they need, immediately if necessary!

Our service is available to any age group, and we address any issue that falls under the broad umbrella of mental health issues. Our Crisis Intervention model is grounded in providing an in-depth biopsychosocial assessment. This assessment provides the client an opportunity to actively participate in this assessment process, and to ensure that the time spent with the clinician provides the opportunity for clients to discuss their respective situation in a safe and objective manner. It also provides critical information for health care decisions made at the Emergency Department should this client require further medical assessment and possible admission. Our Crisis Intervention staff will assist clients with transportation and support should they need to attend the Emergency Department.

As an added support to clients who do attend the Ramsey Lake Health Centre in need of crisis intervention services, we have partnered with the Canadian Mental Health Association Sudbury/Manitoulin Branch . Together, we are providing a System Navigator, who is available to assist and support people who may not require the services and attention of the Emergency Department. The System Navigator will assess clients and when appropriate refer them to either the Crisis Intervention Program downtown, or Crisis Mobile service. The System Navigator plays a key role in providing information to people who may not be aware of the options available to them in accessing crisis services.

In order to further assist the police with their work the Canadian Mental Health Association and HSN Mental Health Services jointly developed a training package that has been offered to the frontline officers of the Greater Sudbury Police Services. This included a 3-hour presentation designed to educate police on how best to recognize and respond to people in crisis with mental health care needs. This training includes enactments of likely scenarios the police officers would face. The training has been well received, As a result, there has been a reduction in the number of clients who are being held under the Mental Health Act, assessed and discharged by the physician.

Police officers are better prepared to assess on-site presentations, and to make decisions to access the resources of 127 Cedar Street Walk-In or Crisis Mobile as a suitable alternative to arresting and transporting to the Emergency Department.

Furthermore, the police are encouraged to call the Crisis Live Voice service to assist with clients that the police may identify as an appropriate client for the Crisis Service at 127 Cedar Street or they may request Crisis Mobile Services to attend at the client's place of residence. The police may opt to offer to transport the client voluntarily to our Cedar Street location and our office can be accessed via the Old City Hall Lane Way which is discreet and respectful for the client's dignity and privacy. The feedback thus far from the police and clients accessing our services in this manner has been positive.

An extensive public education and awareness campaign has been launched in conjunction with the launch of the new Crisis Intervention service. The goal is to inform the public about the options available for urgent mental health care needs. Our advertising campaign included a number of strategic efforts such as: onsite presentations to local agencies and facilities, extensive news media coverage, and advertising (newspapers, billboards, posters) in public places such as schools, libraries, recreations centres, and walk-in clinics. The overall advertising campaign has been successful thus far.

So far, early results of the new Crisis Intervention model have surpassed our expectations, due to the incredible hard work and dedication of our clinical and administrative team, and partners.

A key objective of the new Crisis Intervention model was to divert appropriate and suitable mental health clients from the Emergency Department to our 127 Cedar Street location or alternatively provide a Crisis Mobile team response to this client. Recent data from the Emergency Department indicates a twenty five percent (25%) reduction in the number of mental health presentations to the ED. This figure correlates to the increase in volume for our walk-in service and our Crisis Mobile service. Since our move in October 2012 to 127 Cedar Street we have seen a significant increase in client attendance at the Cedar Street location, as well as with the Mobile Crisis team. We expect that this volume of service

demand will continue to increase as more people become aware of their service options and that this new model is accepted as a viable alternative to attending at the Emergency Department.