Mental Health Services for Children and Youth in Nova Scotia

Presentation to the Standing Committee on Community Services - June 1, 2010

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Child and Youth Mental Health: Setting the Context

• If not recognized and treated early, mental illness can progress, becoming deeply entrenched and more difficult to treat by the time the person reaches adulthood.

• 80 per cent of all psychiatric disorders emerge in adolescence.

• Psychiatric disorders are the single most common illness that onsets in the adolescent age group.

• In Canada, about 300 children and adolescents commit suicide each year. Suicide is the second most common cause of death for people aged 15–24. Mental illness is a factor in most suicides.
Nova Scotia Context
Child and Youth Mental Health

- 17% of Canadian children and youth are affected by mental illness at any given point in time.
- In Nova Scotia, there are 267,000 youth between the ages of 15-25. Of these, 45,000 require mental health assistance, 40% (18,156) do not access treatment.

Sun Life Financial Chair on Adolescent Mental Health Backgrounder. October 2006.


## Children (<19 Years) Separations and Days Stayed

Where Nova Scotia Children are Treated

<table>
<thead>
<tr>
<th>Institution DHA</th>
<th>Patients</th>
<th>Seps</th>
<th>Days</th>
<th>ALOS</th>
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</thead>
<tbody>
<tr>
<td>DHA 1</td>
<td>2</td>
<td>2</td>
<td>8</td>
<td>4.0</td>
</tr>
<tr>
<td>DHA 2</td>
<td>9</td>
<td>15</td>
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<td>DHA 8</td>
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<td>5.7</td>
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<td>DHA 9</td>
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<td>1</td>
<td>15</td>
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<tr>
<td>IWK</td>
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<td>3035</td>
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<td><strong>Total</strong></td>
<td>207</td>
<td>279</td>
<td>3439</td>
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Where Nova Scotia Children are From

<table>
<thead>
<tr>
<th>Region</th>
<th>Patients</th>
<th>Seps</th>
<th>Days</th>
<th>ALOS</th>
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<tbody>
<tr>
<td>DHA 1</td>
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<td>4</td>
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<td>6.3</td>
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<td>24</td>
<td>219</td>
<td>9.1</td>
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<tr>
<td>DHA 3</td>
<td>6</td>
<td>8</td>
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<td>DHA 4</td>
<td>14</td>
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<td>10</td>
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<tr>
<td>DHA 6</td>
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<td>145</td>
<td>1985</td>
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<td><strong>Total</strong></td>
<td>203</td>
<td>279</td>
<td>3439</td>
<td>12.3</td>
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</tbody>
</table>
Children (<19 Years) Separations and Days Stayed

Percentage of Diagnostic Cluster Separations for Children (Under 19) Treated in Designated Psych Units in Nova Scotia

- Mood Disorders (not Bipolar), 30.8%
- Adjustments Disorder, 15.6%
- Schizophrenia, Schizotypy & Delusional Disorders, 11.1%
- Anxiety Disorders, 9.0%
- Disruptive Behaviours Disorder, 7.6%
- Mental & Behaviour disorders (Psy Sub Abuse), 7.3%
- Bipolar Mood Disorders, 6.6%
- Eating Disorders, 4.5%
- Other Non Clustered Diagnosis, 4.5%
- Other Diagnoses*, 3.1%
- Bipolar Mood Disorders, 6.6%
### Legislated Responsibilities

#### Health Authorities Act

**DOH – Section 60**
- Responsible for the strategic direction of the health-care system including the development, implementation and evaluation of Provincial health policy;
- Develop or ensure the development of standards for the delivery of health services;
- Monitor, measure and evaluate the quality, accessibility and comprehensiveness of health services;
- Conduct financial and human-resource planning;
- Administer the allocation of available resources for the provision of health services; and
- Establish requirements for information systems used in the health-care system.

**DHAs/IWK – Sections 19-20**
- Govern, plan, manage, monitor, evaluate and deliver health services
- Maintain and improve health of residents
- Determine priorities and allocate resources
- Implement health-services business plan
- Recommend health services
- Identify service delivery responsibilities
- Participate in the development and information of Provincial policies, plans, initiatives
- Provide information to public about health care and the health-care system and the operations and activities of the authority
- Carry out other such responsibilities as the Minister may assign or as prescribed by regulations
Delivery Structure

- 9 District Health Authorities and IWK are responsible for the delivery of services across the lifespan.
- Each of the Districts and the IWK have a Director of Mental Health Services and oversee a broad spectrum of services.
- For children and youth, the IWK has a provincial responsibility for tertiary care and treatment.
- Mental health services are provided by multi-disciplinary teams which can consist of Psychiatrists, Psychologists, Social Workers, Occupational Therapists, Nurses, Recreation Therapists, Teachers, Child/Youth Care Workers, Autism Support Workers, Nutritionists and Speech Language Pathologists.
Mental Health Core Business Areas

Five core mental health programs for children, youth and adults have been established:

1) Promotion, Prevention and Advocacy: aim is to provide information, education, and engage in secondary prevention e.g.:
   1) Depression Strategy- teen booklet, calendar, and bookmark focused on youth.

2) Outpatient & Outreach Services include:
   1) Early Identification/Intervention Services, Assessment/Treatment Services
   2) Other services as defined by a particular facility or district e.g.- Emergency Rooms, Mobile Crisis, Shared Care, Children and Family and Adolescent Day Treatment.
3) Community Supports: designed to help children, youth & families and their support networks manage the demands of daily life, and to promote full engagement/citizenship in their community. Services may include case management, intensive community-based treatment teams.

4) Inpatient Services: Includes acute treatment, rehabilitation, and youth forensics.

5) Specialty Services: Specialized assessment and treatment services delivered through a network. Includes:
   - eating disorders,
   - sexually aggressive youth,
   - forensic mental health (youth),
   - early psychosis,
   - neuro-developmental disorders children/youth (Autism)
Involuntary Psychiatric Treatment Act

- The Act is applicable to youth, adults and seniors.
- The Review Board under the Involuntary Psychiatric Treatment Act is designed to ensure that all patients being held involuntarily in Nova Scotia's psychiatric inpatient units have their rights protected. The Board reviews the status of involuntary patients at regular intervals, and upon request.
# Patients’ Stay with Involuntary Component

<table>
<thead>
<tr>
<th>Institution DHA</th>
<th>Institution Name</th>
<th>Separations</th>
<th>Separations as a Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHA 1</td>
<td>South Shore Regional</td>
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<td>3.3</td>
</tr>
<tr>
<td>DHA 2</td>
<td>Yarmouth Regional Hospital</td>
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<td>DHA 3</td>
<td>Valley Regional Hospital</td>
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<td>5.2</td>
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<tr>
<td>DHA 4</td>
<td>Colchester Regional Hospital</td>
<td>64</td>
<td>5.9</td>
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<tr>
<td>DHA 6</td>
<td>Aberdeen Hospital</td>
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<td>0.2</td>
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<tr>
<td>DHA 7</td>
<td>St. Martha's Regional Hospital</td>
<td>43</td>
<td>4.0</td>
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<tr>
<td>DHA 8</td>
<td>Cape Breton Regional Hospital</td>
<td>209</td>
<td>19.4</td>
</tr>
<tr>
<td>DHA 9</td>
<td>Nova Scotia Hospital</td>
<td>292</td>
<td>27.1</td>
</tr>
<tr>
<td></td>
<td>Queen Elizabeth II Health Science Centre</td>
<td>270</td>
<td>25.1</td>
</tr>
<tr>
<td>IWK</td>
<td>IWK Health Centre</td>
<td>60</td>
<td>5.6</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td></td>
<td>1076</td>
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</tbody>
</table>
Specialty Networks

- Eating Disorders
- Sexually Aggressive Youth
- Forensic Mental Health Assessment for Youth
- Early Psychosis
- Autism
Provincial Specialty Services Network Model

Examples
- Tertiary Care
- Specialty Services attached to academic centres
- Forensics Youth & Adult
- 4-South
- ACT
- CRP

Examples
- Sexually Aggressive Youth
- child psychiatry

- Director of MH Services
- Identified ER for the DHA
- Emergency MH Services

- Primary Care
- Satellite clinics
- NGO

Approved. DoH Senior Leadership October 2003
Autism Services

• $4 million Autism Treatment Program introduced in late 2004. (EIBI)

• One year of intensive services provided by multi-disciplinary teams, with periodic follow-up provided until the child starts school.

• Currently not funded to serve all eligible children.

• Provincial trainers are in place.

• Final evaluation indicates very positive outcomes for children and families.

• In the process of enhancing diagnostic capacity across the province.
Youth Forensics

• Provincial youth forensic services are the designated responsibility for the IWK Mental Health and Addictions Program.

• These services consist of court ordered assessments, designated mental health inpatient beds, a clinical team available at the Nova Scotia Youth Centre in Waterville, two mental health clinicians providing services at Halifax Youth Attendance Centre and treatment for sexually aggressive youth.
Adolescent Centre for Treatment “ACT”

- Provides rehabilitative mental health in a 24-hour residential setting
- For Nova Scotia youth, aged 13-19 with serious/profound functional impairment and/or severe disruptive behaviour disorders
- Length of stay is based on the treatment needs of the individual
- Staff work with the client and their families
- Programming may include individual therapy, skill training, medication management, parent education and support, family therapy, behaviour management, educational programming and liaison with community schools and organizations
Compass (formally Children’s Response Program)

- Provincial mandate of providing services to children and families across Nova Scotia
- 12 bed community-based residential program
- For children up to 13 years of age requiring intensive mental health services
- Treatment is provided by Child Care Workers in conjunction with a multi-disciplinary clinical team made up of social workers, psychologists, nurses a teacher and a consulting psychiatrist working closely with families and communities
- Treatment can consist of individual, family, and group therapy. On-site education is provided
Intensive Community-Based Treatment Team (ICBTT)

- Provides home, community and school-based support for clients up to 19 years of age with serious disruptive behaviour disorders
- Staff teaches skills through parent training/education, family and individual therapy and providing resources to help parents/caregivers learn to address their children’s behaviour disorders
- The team helps the client cope with family, peer, school and community issues
## Financial Dimensions For Mental Health

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total Mental Health Budget</th>
<th>Mental Health Budget</th>
<th>% Total Mental Health Budget</th>
<th>Children &amp; Youth Budget</th>
<th>% Total MH B</th>
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<td>2000-01</td>
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<td>2003-04</td>
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<td>$18,714,825</td>
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<tr>
<td>2004-05</td>
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<tr>
<td>2005-06</td>
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<tr>
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<tr>
<td>2007-08</td>
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<td>$31,482,134</td>
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<tr>
<td>2008-09</td>
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<td>$113,212,200</td>
<td>3.53%</td>
<td>$34,755,975</td>
<td>30.7%</td>
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Enhancements to Mental Health Services for Children and Youth

• Intensive Community-Based Treatment Program – ICBTT – IWK and Cape Breton – 2003/04
• Autism Treatment Program – Early Intensive Behavioural Intervention (EIBI) – 8 DHAs/IWK – 2005/06
• BEST Program – Cumberland – 2003/04
• Youth Navigator Service – IWK – 2003/04
• Reproductive Psychiatry - Located at the IWK – 2003/04
• Family Help – IWK- 2006/07 & Cape Breton – 2008/09
Enhancements cont’d.

• Crisis/ Emergency Response-Early Response – All DHAs/IWK have emergency response services in place across the lifespan. 2003/04

• The Mobile Crisis Services has expanded to cover all of HRM – partnership between CDHA, IWK, EHS and Police. 2009/10

• Adolescent Centre for Treatment – expanded from 12 – 18 beds. 2009/10
Enhancements – Youth Forensics

- Sexually Aggressive Youth Program – introduced in 2003/04
- Nova Scotia Youth Centre – Mental Health Team – 2004/05
- Halifax Youth Attendance Centre – in collaboration with Dept of Justice – introduced in 2007/08 – two mental health clinicians
- Court ordered assessments – expanded capacity in 2007/08 to address increased need following release of the Nunn Commission Report.
Collaborative Initiatives - Government

**DCS:**
- Child and Youth Strategy, Regional Networks, Services for Persons with Disabilities (DoH, DCS, DoE), Men’s Intervention Programs

**DoJ:**
- Forensic Mental Health for Youth – Designated Psychiatric Inpatient 4-South – IWK, Nova Scotia Youth Centre – Waterville, Halifax Youth Attendance Centre

**HPP:**
- Chronic Disease Prevention, Suicide Prevention, Youth Health Centres, Well Child Systems (Child and Youth Strategy)

**DoE:** Special Education Programs and Services (SEPS)

**Academic:**
- Dalhousie University – Department of Psychiatry, Department of Pediatrics & Department of Psychology

**Federal:**
- Health Canada
- Public Health Agency of Canada
- Mental Health Commission of Canada
Thank You.