

Is Every Door the Right Door?

Measuring Concurrent Capability Through Program Reviews

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Background

In Canada, more than half of individuals with Substance Use Disorder also experience co-occurring mental health issues, referred to as Concurrent Disorder.

What is Concurrent Capability?

to presume most individuals seeking services have concurrent issues (Concurrent Disorder), and need:

- To be welcomed for care
- Engaged with empathy and the hope of recovery
- To be provided what they need in a person-specific and integrated fashion
- To make progress toward having a happy productive life.

In 2014, Alberta Health Services (AHS) Addiction and Mental Health (AMH) Professional Development and Concurrent Capability (PDCC) team initiated the Concurrent Capable Review Service (CCRS) to provide provincial support to AMH programs using the COMPASS-EZ™

What is COMPASS-EZ?

- A fidelity assessment tool developed by Dr. Kenneth Minkoff
- Promoting welcoming, recovery oriented and concurrent capable care
- Facilitated conversations with all team members
- Teams reflect on their programs and rate their services
- Make planned quality improvements



Objectives

The outcomes of the Concurrent Capable Review Service are:

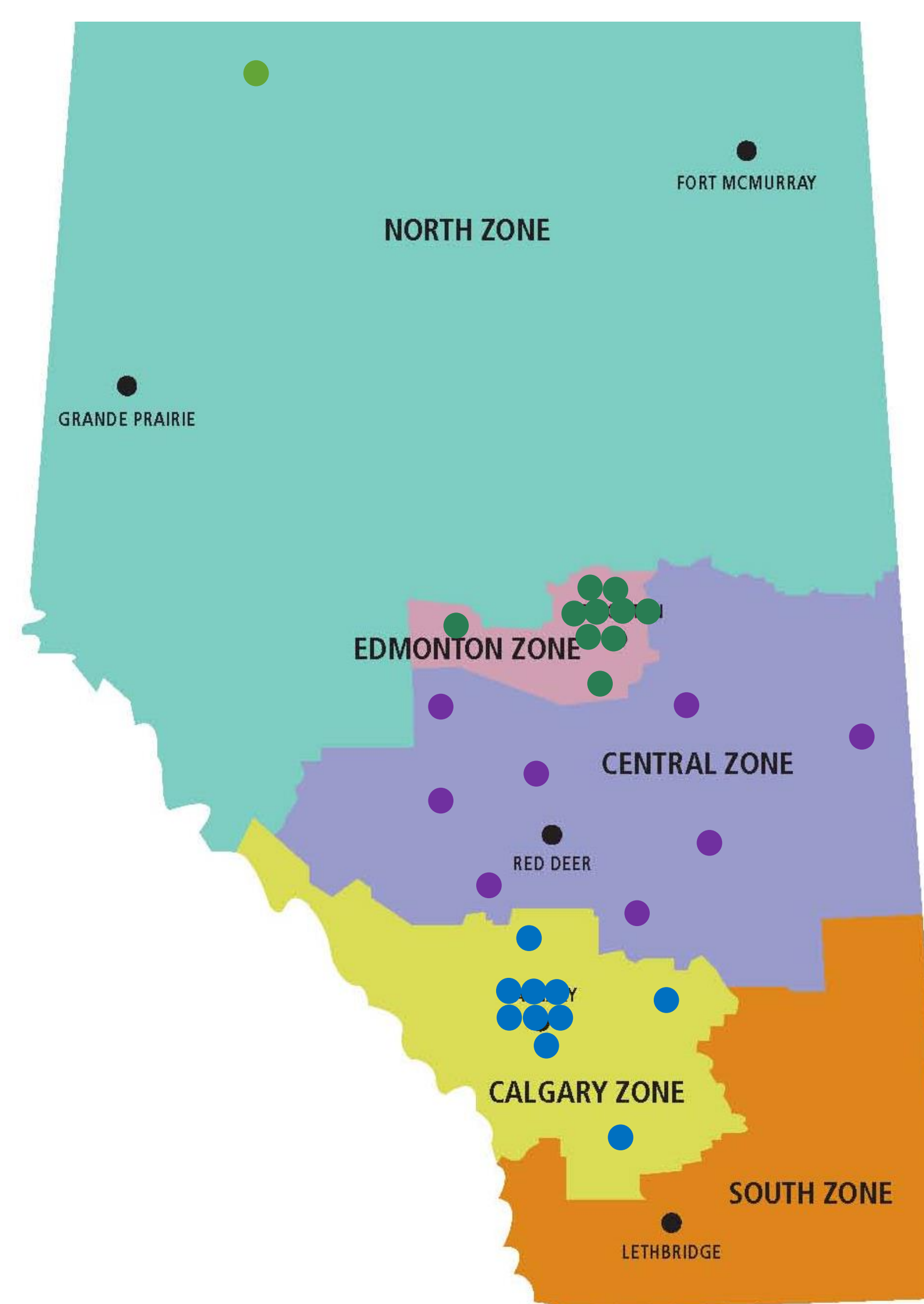
- Provide a common tool for diverse mental health and addiction care settings
- Capture a program's baseline of concurrent capability
- Communicate a common language and understanding of recovery-oriented concurrent capable services
- Create a continuous quality improvement framework
- Provide a consistent measure of progress toward integrated AMH service

Methods

1. Reviews are led by a Clinical Consultant who facilitates consensus building discussion and rating of 15 sections within the Compass EZ
2. Within one month a comprehensive recommendation list is presented to teams.
3. Teams choose 2-3 opportunities for quality improvement towards welcoming, recovery oriented and concurrent capable services.
4. Follow-up review every 18 month.

Results

- 30 Concurrent Capable Reviews were facilitated in four of five AHS service zones between 2015-2017.
- Zone leadership in two zones were presented with recommendation themes after 8-10 reviews were completed.



Common Team Strengths Identified:

- Individuals are welcomed and engaged at service entry
- Both addiction and mental health is screened and assessed on intake
- Service plans include clients goals, all issues and focus on building strengths and skills
- Collaboration and consultation with stakeholders
- Collaboration between mental health and addiction clinicians
- Service continuation despite clients stage of change
- Recovery oriented relationships celebrate small steps and successes

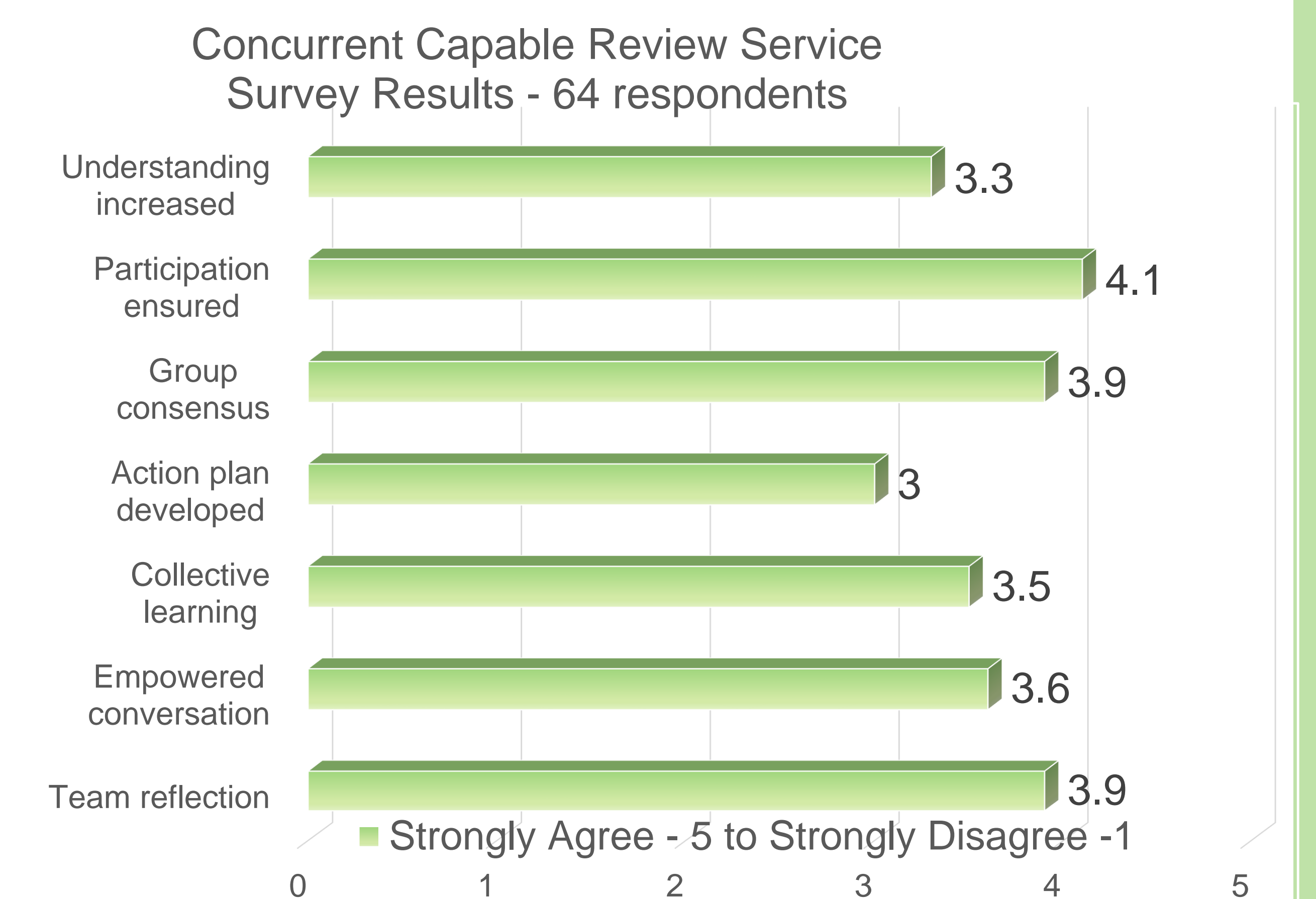
EVERY DOOR IS THE RIGHT DOOR
in Alberta Addiction and Mental Health Services!

Much progress towards seamless & integrated service has occurred since Alberta merged its Mental Health and Addiction service boards in 2008. The Concurrent Capable Review Service results show emerging concurrent capability and clear steps for each team's planned improvements towards welcoming, recovery oriented and concurrent capable care.

Recommendations

Common Team Opportunities Identified:

- Develop guiding principles of care or service charter
- Revise program brochures & guidelines to reflect welcoming, recovery oriented, concurrent capable service
- Ensure clear protocol for client to access primary care
- Host a regular interagency complex case conference meeting
- Use Stage of change language for screening, assessment, service and transition planning
- Provide accessible concurrent capable client education, medication teaching & workbooks
- Increase availability of : group therapy & peer support workers
- Collaborate with prescribers re use of medications for addictions and medication teaching/dosing
- Develop concurrent capable job descriptions and interview questions
- Ensure concurrent capable competencies reviewed with staff annually
- Develop annual team learning plan
- Provide learning opportunities re Seniors or persons with intellectual disabilities with co-occurring AMH issues
- Implement an IT system to support integrated documentation
- Form an advisory group with community agencies, family, clients, staff, and supervisors



Next Steps

Next Steps include:

1. Facilitate reviews with AMH teams in South and North Zone
2. Develop resources to address gaps identified:
 - Concurrent Capable Standards for Addiction & Mental Health Services: a Handbook for Patients
 - Recovery oriented concurrent disorders toolbox for clinicians
3. Offer to repeat reviews to managers and teams in Central, Calgary and Edmonton Zones with these options:
 - Self assessment using Compass EZ handouts
 - Request CCRS and facilitated review session
 - Focused conversation with consultant