



MHSU Network

Building the Foundation for Change



Interior Health

Child and Youth
Mental Health & Substance Use
Framework
2022—2024

ACKNOWLEDGEMENTS

Interior Health covers over 215,000 km² and is situated within the traditional, ancestral and unceded territories of the seven Interior Nations peoples: Ktunaxa, Syilx, Secwépemc, T̓silhqot̓'in, D̓ākelh Dené, Northern St'át'imc and Nlaka'pamux Nations. We acknowledge that residents of Interior Health gather on Indigenous lands and we are grateful to the leaders of the Nations for meaningful partnerships that are forming and continuing.

The Framework has been developed through a consultative and collaborative process, drawing on contributions from individuals from across the health sector and the wider community, and considering the latest evidence in relation to child and youth mental health and substance use.

Interior Health would like to give special thanks to the many children, young people, communities, external and internal partners that informed the development of this Framework, your contributions are greatly appreciated.

PURPOSE OF THIS DOCUMENT

This Framework sets the broad direction for **improving access and quality of mental health and substance use care** for children and young people within the **Interior Health** service area in British Columbia - outlining the key system changes needed to ensure children and young people are better supported to be healthy, safe and thriving.

The Framework has been developed to guide our efforts for the period **2022 – 2024**. Periodic reviews of the evidence underpinning this framework will be undertaken during the life of the framework to ensure efforts are invested effectively, efficiently, and where needed.

In line with our wider partnerships, priorities, accountabilities, and developmental research, this framework is relevant to the provision of care for **children and young people aged from 0-24 years** who are experiencing **mental health and substance use difficulties**.

The Framework is primarily intended for **Interior Health staff** who are responsible for delivering Child and Youth Mental Health and Substance Use services; however, it may also be beneficial to other provincial organizations and service providers who support the mental health and wellbeing of children and young people.

This framework supports the implementation of **Interior Health's Strategic Priorities (2021 – 2024)**; aligns with the **Ministry of Health**¹ and **Ministry of Mental Health and Addictions**² Service Plans; and contributes to the directions outlined in the BC Government **'A Pathway to Hope'** report³ – *a roadmap for making mental health and addictions care better for people in British Columbia*.

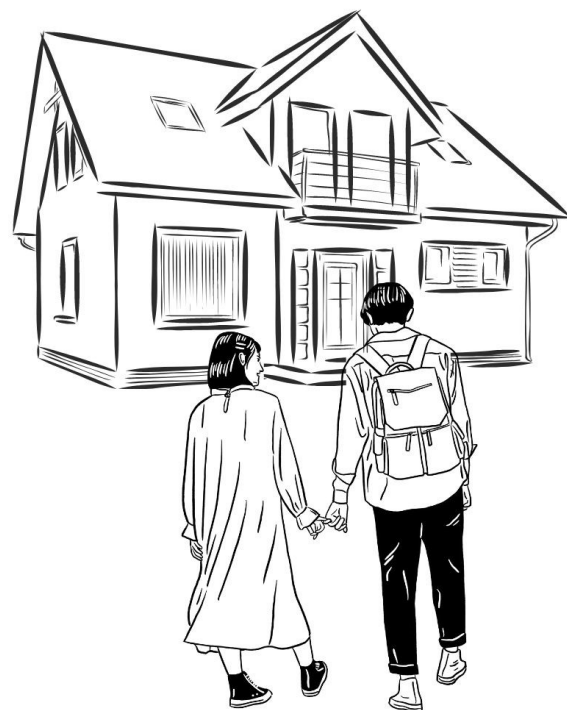


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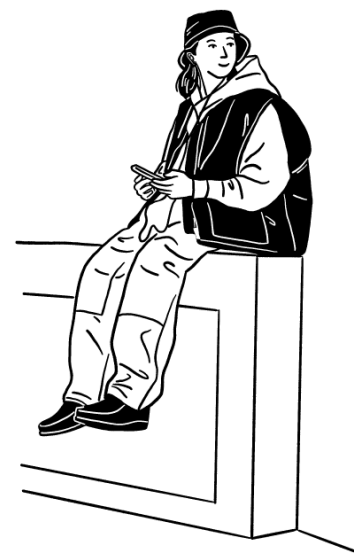
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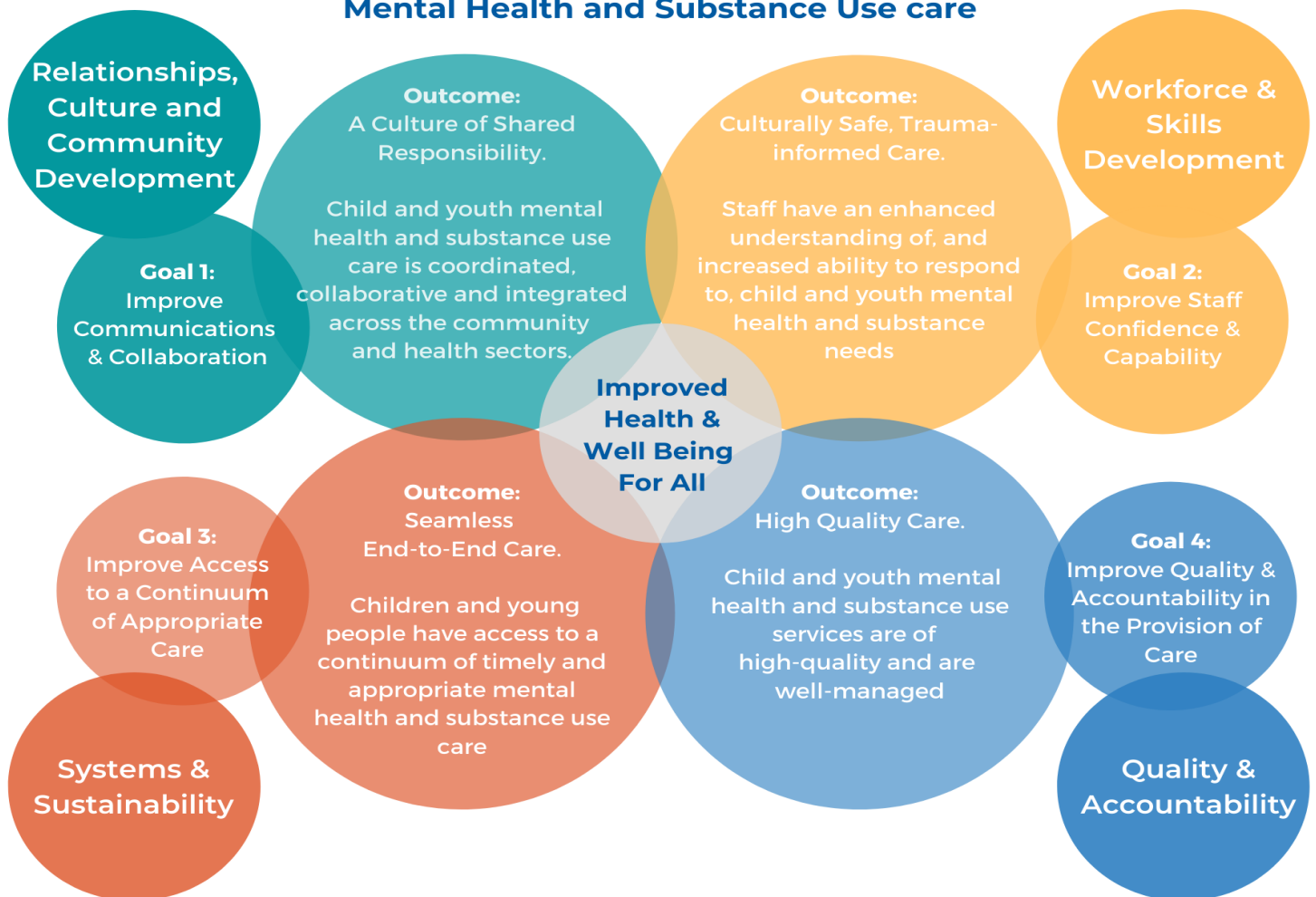
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INTRODUCTION

CHILD AND YOUTH MENTAL HEALTH & SUBSTANCE USE FRAMEWORK AT A GLANCE

Empower excellence in Mental Health and Substance Use care



INTRODUCTION

CHILDREN AND YOUNG PEOPLE OF BRITISH COLUMBIA

Approximately **188,520** children and young people live across the Interior Health region of British Columbia*



27,055 Indigenous Children and Young People in BC

-2016 data

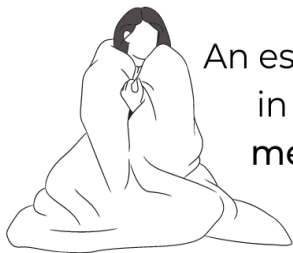


46,803 ~ 0-6yrs
45,729 ~ 7-12yrs
37,388 ~ 13-17yrs
58,600 ~ 18-24yrs

1 in 11 children and youth were dispensed a mood/anxiety or antipsychotic medication in 2018-2019⁴



Interior Health region has higher proportion of children in low income families compared to B.C. average¹²

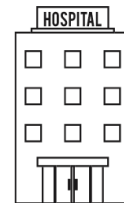


An estimated **84,000** children in B.C. are experiencing mental health disorders at any given time³

Approximately **25%** of youth in grades 7 to 12 engage in high-risk alcohol use²⁴



Those aged 15 to 17 have the highest rate of Emergency Department visits and hospitalizations for mental health disorders⁴



Poly-substance use is increasing among high school students in Grades 9 to 12²⁶



INTRODUCTION

LANDSCAPE OF SERVICES

Children and young people have a right to the highest attainable standard of health care for the treatment of illness and rehabilitation of health⁵

Many guiding principles, resources and toolkits for delivering child and youth mental health and substance use services have been developed globally; subsequently many different models of care have evolved across BC. Whilst Interior Health does not have the primary responsibility for all of these services; we are committed to strengthening our partnerships with other provincial Ministries, community stakeholders, and families to provide the best possible advantage to our children and youth.



A CASE FOR CHANGE

CHILD & YOUTH DEVELOPMENT

Mental Health and Substance Use continue to be major cause of childhood disability and illness globally¹⁴

The period of childhood and adolescence is both unique and foundational; what happens to us during this period of our lives - the habits, relationships, and interests we form - continues to affect us throughout our life.^{6, 7} It is a period of significant opportunity, change and development.

Whilst many young people self-report their mental health being as excellent or good⁸, there are many children and youth who identify their health and wellbeing as a concern to them and their peers. Additionally, 70% of adults with mental health disorders report that their symptoms began in childhood or adolescence.⁹

The good news is, the earlier we identify and connect a child or youth to the services they need, the better positioned we are to prevent or heal the long term effects.¹⁰

Evidence shows that interventions made in the earliest stages of life provide the greatest returns.^{7, 11}

By recognizing the power of investing in children, we can make a positive difference in future health and success of individuals.¹² Together, we can change how the story unfolds so that all of us, regardless of background and life circumstances, have the chance to lead happier, healthier lives, build stronger communities, and reduce risk for mental health and substance use difficulties.⁷

Yet sadly, most children are not receiving services for their conditions,¹³ and mental health and substance use disorders continue to be a major cause of childhood disability globally.^{14, 15}



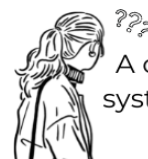
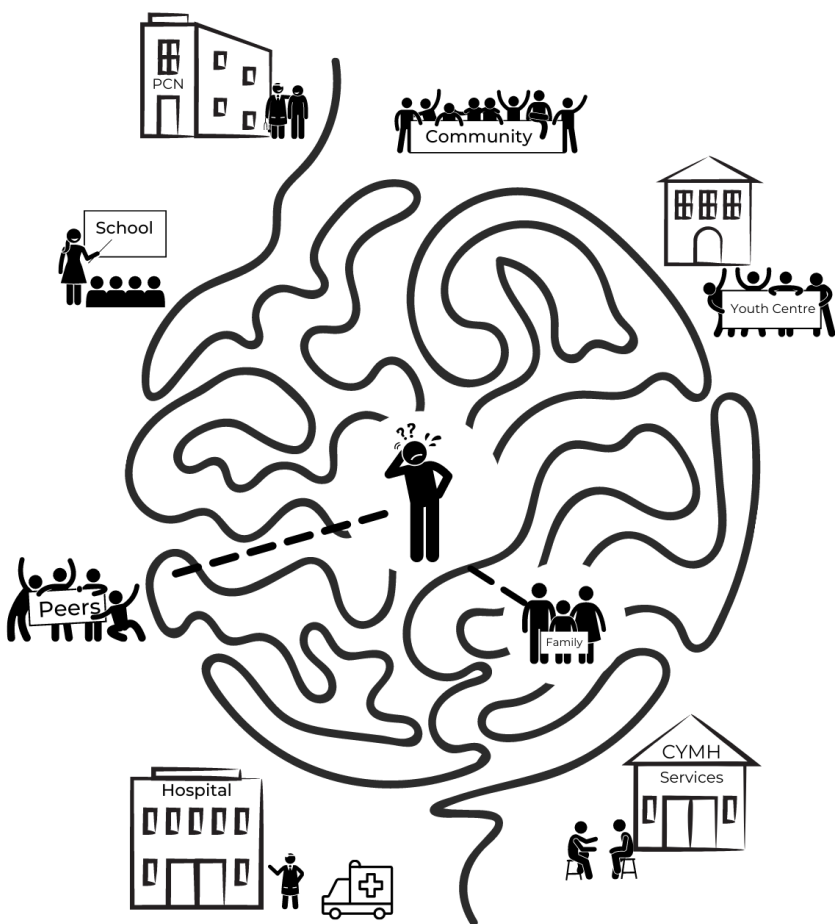
A CASE FOR CHANGE

BARRIERS TO CARE

Most children are not receiving services for their mental health and substance use conditions ¹³

The reasons why children and youth do not receive support for their mental health and substance use needs are plentiful. Many children and young people do not seek help because they do not want their parents and families to know about their difficulties; and many hope the problem will go away on its own or feel they can manage it themselves.⁸

For those who do seek help, they have to navigate a complex patchwork of disjointed, inadequate and inefficient services^{3, 13, 16} - overcoming many challenging financial and geographical barriers only to then come face to face with stigma, prejudice and discrimination.³



A confusing and disjointed system of mental health and substance use care³

Acute shortages of mental health and substance use treatment services for children and youth in B.C. ^{16 18}



75% of children and youth will not receive care in a timely manner ¹⁸

Stigma prevents 40% of people with anxiety or depression from seeking help³



Half of all mental health conditions start by 14 years of age but most cases are undetected and untreated⁶

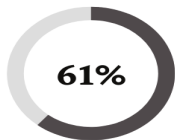
A CASE FOR CHANGE

THE IMPACT

16,000 paediatric visits to Emergency Departments in BC each year due to a mental health or substance use concern¹⁸

Positive mental health and wellbeing is on a downward trend, and BC is falling behind at an international level.³ The consequences of not addressing child and youth mental health and substance use include poor academic achievement,¹⁹ conflict with the law²⁰, chronic medical conditions,²¹ decreased life expectancy and suicide.²² These consequences extend well into to adulthood, impairing both physical and mental health and limiting opportunities to

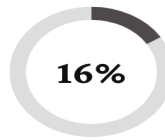
lead fulfilling lives as adults - limiting their ability to live independently, hold a job and achieve financial security.^{6, 12, 23} Beyond the long term individual impacts, the estimated impact of mental health and substance use on BC's economy stands at \$6.6 billion annually.³ As such, there is a clear social and economic rationale to sustaining and enhancing the health and wellbeing of all children and young people.



Between 2008–2019, there was a 61% increase in visits to the Emergency Department and a 60% increase in hospitalizations¹⁸



An annual cost of \$6.6 billion³



Globally, mental health conditions account for 16% of disease and injury in young people⁶



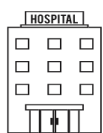
Depression is one of the leading causes of illness and disability among adolescents⁶



Opioid-related hospitalizations have been rapidly INCREASING in the past 5 years among young adults aged 15–24 years²⁴



One in eight children and youth will have a mental health disorder at any given time¹³



16,000 paediatric visits to Emergency Departments in BC each year due to a mental health or substance use concern¹⁸



70% of adults with mental health disorders report that their symptoms began in childhood or adolescence⁹

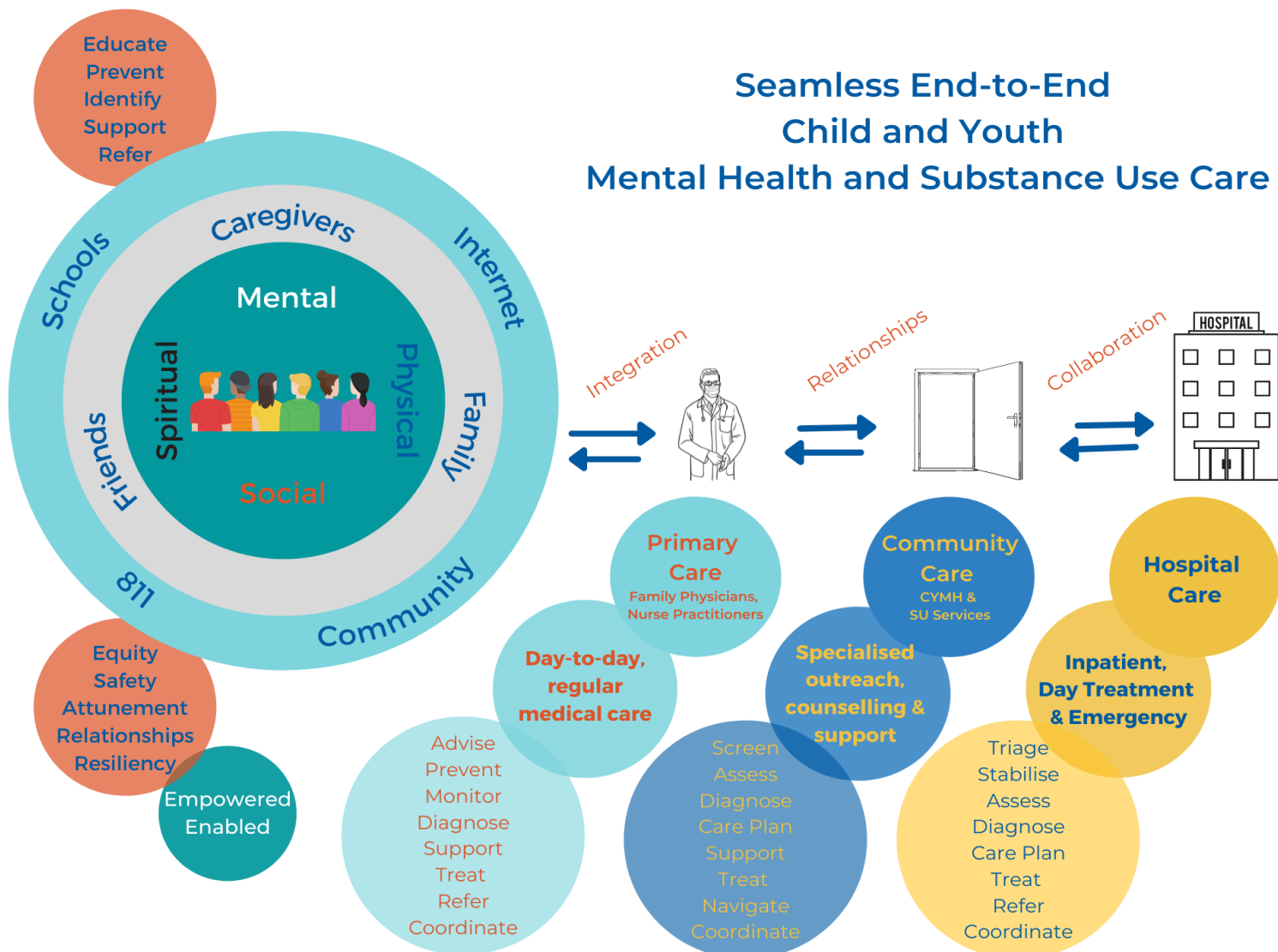
A FRAMEWORK FOR CHANGE

MAKING CARE BETTER

It is clear that the health of children and young people is fundamental to the ongoing prosperity of BC. What happens now has sustained, long term impacts; not only on children and young people's own health outcomes and life experiences, but the future social and economic wellbeing and connectedness of our community.

It therefore stands to reason that we need to build a strategy that recognises this.

Interior Health is committed to making care better for children and young people. We want to create a high-quality, seamless end-to-end system of care.



A FRAMEWORK FOR CHANGE

PRIORITY AREAS

Interior Health recognises that, to achieve effective change, we cannot do everything at once. As such, we have identified four priority areas which will guide our work:

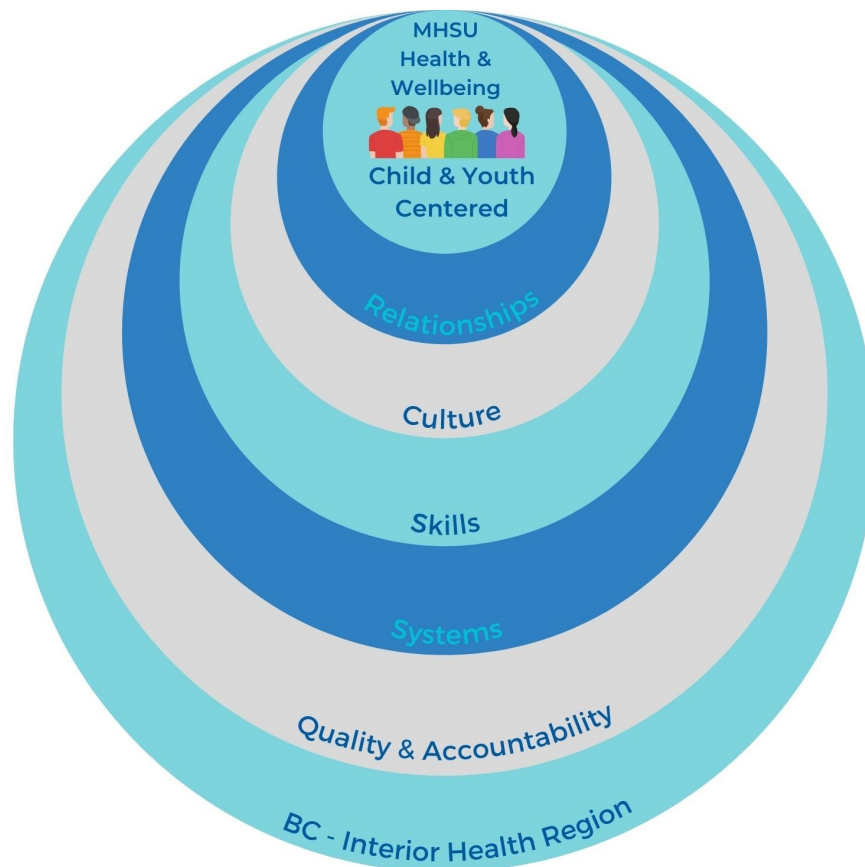
- **Relationships, Culture and Community Development**
- **Workforce and Skills Development**
- **Systems and Sustainability**
- **Quality and Accountability**

These priority areas are inter-related and are of equal importance. They build on existing system strengths, but also propose areas where processes can be improved to better meet the needs of children and

youth experiencing mental health and substance use difficulties.

Within each of the four priority areas, key goals and outcomes have been outlined, and all work will be underpinned by Interior Health core values (appendix A).

By focusing in on these identified areas, Interior Health can begin to make tangible progress towards achieving the long term vision: **Health and Well Being for All.**



A PLAN FOR ACTION RELATIONSHIPS, CULTURE AND COMMUNITY DEVELOPMENT

Goal 1: Improve Communications and Collaboration

Children's health and development occurs within multiple contexts; as such, health system improvements for children and young people will only flourish through effective collaboration and shared contributions made by a wide range of partners. These partners include:

- Children, youth and caregivers
- Indigenous and non-indigenous communities
- Non-profit organisations
- Health Authorities
- School Districts
- Ministries and Government

Together we make up the spectrum of health care for children and young people. Yet, currently, each key stakeholder has a different culture, structure, process, and approach to supporting children and young people. There is fragmentation at every point, from planning and delivery, to oversight and regulation. Working in such a disconnected way has significant impacts at the individual and community level – key risk factors are not communicated; children are re-traumatised through the re-telling of

their experiences; a culture of distrust begins to cultivate; and the system is becomes both ineffective and unsafe for all.

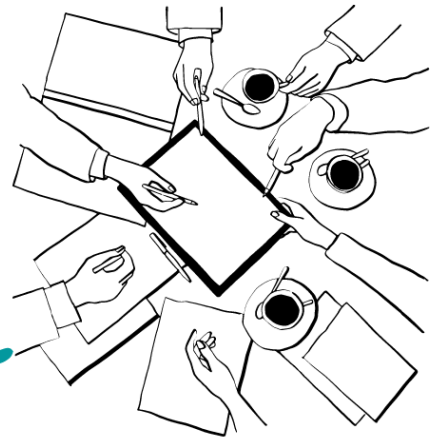
To solve these key issues it's crucial that organizations, children, young people, their caregivers and communities are empowered to come together to share wisdom, grow expertise and solve key issues.

We must focus our efforts on developing our cross-sector and community relationships in order to create a culture of shared responsibility. Working hard to build positive, productive relationships will help strengthen partnerships across different parts of an otherwise disjointed system, and strengthen the way we work together to provide mental health and substance use care for children and young people.



Improve Communications and Collaboration

Interior Health will drive key health system improvement projects through a process of engagement, coordination and collaboration with community partners



- 1.1 Build on local, regional and provincial partnerships (e.g. Ministry of Children & Family Development, Foundry, First Nations Health Authority) - to support the enhancement and development of integrated child and youth mental health and substance use services and supports.
- 1.2 Establish cross-organizational information sharing protocols (e.g. between Ministry of Children & Family Development, Foundry, First Nations Health Authority) – to facilitate early intervention, improve coordination, and promote safety and welfare.
- 1.3 Establish child and youth engagement pathways - to ensure the voices of people with lived experience are consistently integrated into the child/youth mental health and substance use framework development and execution.
- 1.4 Expand opportunities for indigenous children, youth, families, communities and service providers to participate in service development and evaluation - to ensure that services are inclusive and culturally appropriate.



A Culture of Shared Responsibility

Child and youth mental health and substance use care is coordinated, collaborative and integrated across the healthcare continuum

A PLAN FOR ACTION WORKFORCE AND SKILLS DEVELOPMENT

Goal 2: Improve Staff Confidence and Capability

Children, and young people have multiple touchpoints within the health care system, there is therefore great value in better equipping and, where necessary, upskilling the health workforce to be able to identify and address the health needs of children and youth. Yet, there remains significant challenges in establishing and maintaining a skilled workforce.

The Interior Health region, with its numerous rural and remote communities, faces unique challenges in providing access to quality mental health and substance use services. Children and youth in these communities must often travel great distances to get the specialist help they need. Where services do exist, they are frequently stretched thin, with long wait lists, and high turnover rates. This results in additional pressures being placed on staff across *all* care settings. These staff members form a crucial part of the child and youth mental health and substance use workforce and yet, they are often not recognised for their role in the child and youth health care system, nor are they given the time and training needed to support this population.

Without the opportunity to build their experience and skills or adapt to new health

care needs, employees begin to lack the skills and self-confidence needed to promote safe and effective practice - their performance may diminish and practice has the potential to become physically, mentally and culturally unsafe, laden with common misconceptions and driven by outdated and inaccurate information, stigma and stereotypes. These combined factors have a significant influence on the provision of care and ultimately impact the health outcomes of the children, youth and communities we support.

As an organisation it is crucial that we give ongoing attention to staff training and standards – both of which are necessary elements in building a capable workforce. Employees across Interior Health need the knowledge and skills necessary to support children and young people with mental health and substance use concerns, and they need to feel supported and confident enough to seek support from more specialist services when needed.





Actions

Improve Staff Confidence and Capability

Interior Health will strive to ensure that all staff who engage with children and young people have the knowledge, skills, and confidence needed to provide safe and effective care

- 2.1 Incorporate minimum competencies for Interior Health staff supporting children and youth with mental health and substance use needs – to promote professional development and maintain clinical standards.
- 2.2 Develop education modules for staff providing child and youth mental health and substance use care across – to improve staff knowledge, skills and abilities, and enhance support for children and youth receiving care.
- 2.3 Develop child and youth mental health and substance use training modules for 310-MHSU administrators – to enhance single point of access and improve the navigation of the care continuum.

Culturally Safe, Trauma-Informed Care

Staff have an enhanced understanding of, and increased ability to respond to, child and youth mental health and substance use needs.

Outcome



A PLAN FOR ACTION

SYSTEMS AND SUSTAINABILITY

Goal 3: Improve Access to a Continuum of Appropriate Care

Time and time again we are told about the importance of prevention and early intervention, yet we continue to see an increase in the number of children and young people attending emergency departments - clearly demonstrating that more and more children and youth are reaching the point of crisis before receiving support.

The factors contributing to this crisis in care are wide-ranging. The uneven distribution and location of core mental health and substance use services in different parts of the province makes it hard for children and young people to access support. For staff, the confusing and unclear referral pathways, combined with inadequate health care tools, incompatible IT systems and inefficient resources make it difficult to share information, coordinate care, transition between services, and get access to the right support at the right time. As a consequence of these system inefficiencies, children and youth are being bounced between different parts of the system and some are being turned away from services without alternative support.

The confusion and complexity that exists, combined with a lack of resources and information creates unnecessary delays in

accessing treatment and support, and has the potential to exasperate the mental health and substance use conditions, resulting in repeat referrals and readmissions, contributing to the demand for services and long waiting lists for treatment.



Promoting good mental health, intervening early and increasing the availability of specialised child and youth MHSU services is therefore crucial. By investing in child and youth MHSU resources across the continuum of care and focusing our efforts on developing effective tools and pathways to support the provision of care, we can make it easier for staff and caregivers to help children and young people get access to appropriate care when and where they need it.

Improve Access to a Continuum of Appropriate Care

Interior Health will invest in resources, create effective healthcare tools, and develop clear care pathways to support the provision of care. Making it easier for staff to help children and young people to access appropriate care when and where they need it

Actions



- 3.1 Foster public understanding and awareness of child and youth mental health and substance services and resources - to enable better navigation of the continuum of care.
- 3.2 Expand school-based substance use prevention services - to promote mental health and delay substance use among youth.
- 3.3 Expand child and youth mental health and substance use outreach, and early intervention programs - to promote mental health and ensure early access to support.
- 3.4 Through new investments, define and implement specialized systems of mental health and substance use care for children and youth - to increase access and improve navigation of the care continuum.
- 3.5 Develop and expand the use of child and youth mental health and substance use screening tools across Interior Health - to support staff in treating children and youth.
- 3.6 Develop escalation and transition protocols for supporting children and youth with mental health and substance use needs – to ensure the provision of timely, safe and effective care at key transition points.

Seamless End-to-End Care

Children and young people have access to a continuum of timely and appropriate mental health and substance use care

Outcome



A PLAN FOR ACTION

QUALITY AND ACCOUNTABILITY

Goal 4: Improve Quality and Accountability in the provision of Care

Interior Health have numerous efforts underway to improve the quality of health care services as a whole, as well as numerous methods for collecting data and information to support these improvements. Yet there continues to be significant difficulties with the quality and availability of data about children and young people experiencing mental health and substance use difficulties, and their interactions with health care services.

Within BC, mental health and substance use care is delivered across a spectrum of Ministries – Health, Mental Health and Addictions, Children and Family Development, Education. The result - different types of data are held by different parts of the system, but are not systematically shared. Education, health, social care and other services that work with children and young people each hold data, but they do not have a simple way of bringing that data together to create a complete picture.



As a result, there is a lack of clear and reliable information about how many children and young people access mental health and substance use services, how they are referred in to these services, whether or not they are accepted for treatment, and whether or not we are doing our best to support them. This gap in data mirrors gaps in the provision of services, and is a major barrier to the provision and improvement of health care because it is challenging to plan and deliver services that effectively meet the needs of children and young people when we do not fully understand what those needs are.

If we are to see significant and sustainable improvement in the quality and accessibility of mental health and substance use support for children and young people, then we must develop an infrastructure that facilitates enhanced accountability and quality improvement.





Improve Quality and Accountability in the provision of Care

Interior Health will drive improvements in accountability practices to ensure that there is a much better understanding of how to get the best outcomes for children and young people, and value from our investments

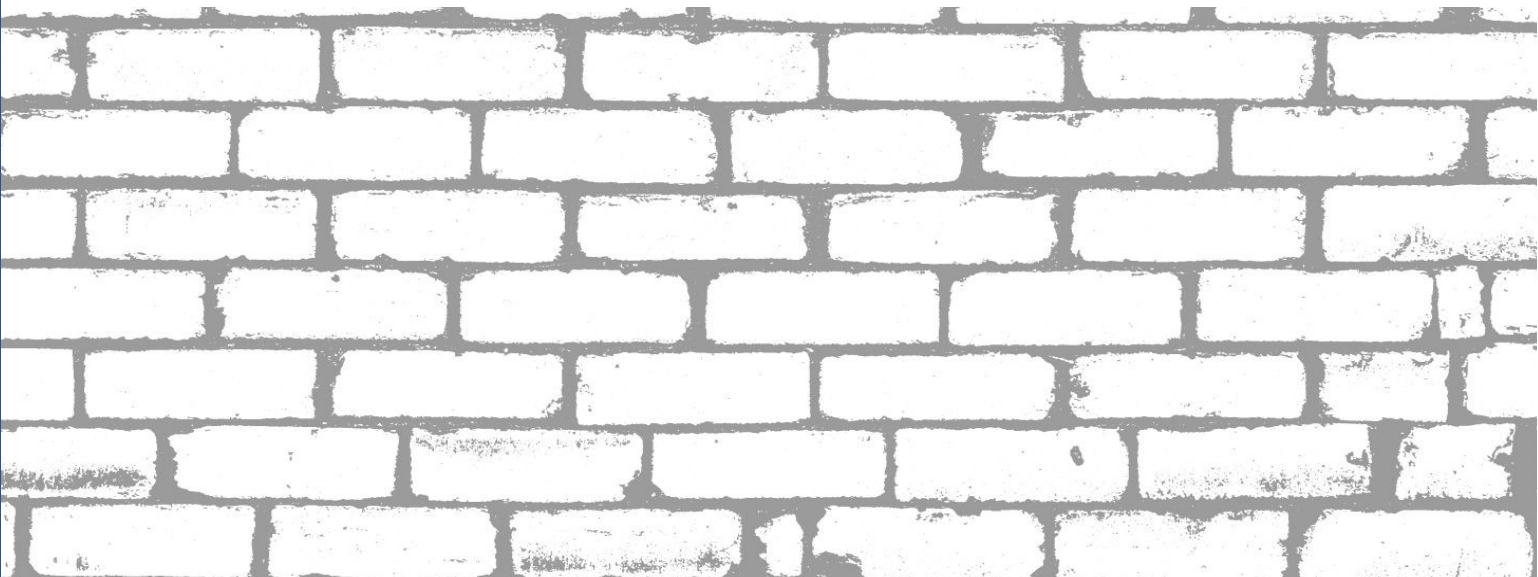
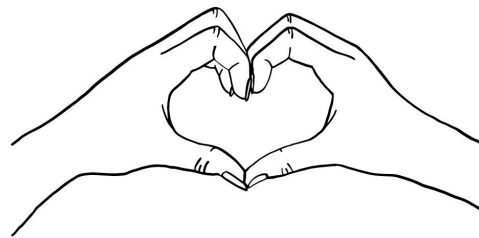
- 4.1 Formalize the child and youth mental health and substance use governance model - to ensure Interior Health is held accountable for its performance in the provision of child and youth mental health and substance use care.
- 4.2 Create cross-policy and cross-sector alignment in the provision of child and youth mental health and substance use care - to ensure effective utilization of resources.
- 4.3 Formalize quality, performance and evaluation measures for child and youth mental health and substance use care - to assess progress, identify opportunities for development and inform future planning.
- 4.4 Improve cross-sector data sharing - to monitor trends in child and youth mental health and substance use support needs and care.
- 4.5 Formalize methods for reporting and managing incidents relating to children and youth with mental health and substance use needs - to ensure that trends can be identified, learning takes place, and steps are taken to prevent similar incidents occurring in the future.
- 4.6 Support the implementation of legislative and policy measures related to child and youth mental health and substance care - to improve quality of care for youth with mental health and substance use needs.

High Quality Care
Child and youth mental health and substance use services are of high-quality and are well-managed



LOOKING AHEAD

The priority areas outlined in this Framework form the basic foundations needed to work towards improving mental health and substance use care for children and young people in our region. Interior Health will continue to work collaboratively with others to monitor and evaluate our progress on achieving the goals outlined in this framework; and will seek to identify future opportunities to build on these foundations and further improve mental health and substance use care for children and youth.



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A FRAMEWORK FOR CHANGE

CORE VALUES

Interior Health Core Values are integrated within this Framework:



Making care better for Children and Youth - Our Guiding Principles :

Grounded within Children and Youths Rights

Upholding and protecting the rights of children and youth is essential to promoting their overall health and well-being.

Person-centered, Community Driven

The voice of the child/youth is paramount. Services will be designed collaboratively with children/youth, families and communities - ensuring their voices are heard, and services are relevant to their local context.

Equitable and Developmentally Appropriate

Care will be adapted to the unique needs of children and youth; and delivered respectfully with sensitivity to those needs and characteristics - with none of these factors serving as barriers to care.

Culturally Safe

Cultural and spiritual identity is central to health and wellbeing. Service provision will respect and incorporate children and young peoples cultural and spiritual understandings.

Evidenced-Based, Wise Practice

Interior Health wants to provide the most effective care available. Our actions will be informed by the latest available evidence for child and youth care, and with respect to cultural and traditional knowledge.

Collaborative and Integrated

We are stronger when we work together. Having a shared responsibility, and an agreed set of outcomes will help us leverage individual strengths and achieve better outcomes for children and young people.

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