

Public Accounts Committee (May 14)- Questions for Written Response

- 1. How many complaints were received by the mental health and addiction patient advocate in the fiscal year we are reviewing? How many of those were investigated, and what were the outcomes?**
 - During the year, the Office of the Mental Health Patient Advocate served 778 unique clients and responded to 1,913 issues (complaints/concerns/information requests).
 - The office conducted three formal investigations, one of which was supported and therefore resulted in recommendations. Those recommendations were fully implemented.
 - The advocate generally provides formal recommendations, where warranted, on formal investigations. Additionally, they completed 49 inquiries or informal investigations on some files.

- 2. Did the ministry monitor the outcomes of the service provider I'm talking about; that is, the Calgary Counselling Centre and Counselling Alberta division of the centre? What are the outcomes, and how did the ministry specifically select this provider?**
 - Counselling Alberta is a division of the Calgary Counselling Centre that provides affordable, no wait list virtual counselling across the province. Virtual care includes counsellor-client interaction through video, audio, or chat.
 - Calgary Counselling Centre was selected by government based on its long history of providing evidence-based and innovative counselling services. Established in 1962, Calgary Counselling Centre is a recognized leader in the treatment of depression, anxiety, domestic abuse prevention, youth mental health, substance abuse and addictions, and eating disorders, utilizing an outcomes framework and data driven approach.
 - This innovative service is working to reduce barriers to accessing counselling services, particularly for those living in rural and remote areas of Alberta where access to traditional counselling services may be limited or unavailable.
 - Counselling Alberta is also working to expand access to affordable in-person services beyond the Calgary area to help address the growing need for mental health services throughout the province. The expansion targets Albertans affected by social, emotional, and psychological problems who need access to care. This includes children and youth, adults, and seniors representing all cultures, backgrounds, and walks of life residing in urban, suburban, and rural and remote areas.
 - During Counselling Alberta's first 12 months of operation (June 2022 – May 2023):
 - 2,700 hours of counselling were provided;
 - 545 clients were served across 41 communities;
 - 67.8 per cent of clients were female;
 - 31.6 per cent of clients were male;
 - 38 per cent of clients were between the ages of 18 and 29; and
 - 24.4 per cent of clients were between the ages of 30 and 39.

- 3. The ministry reports that between April and September of 2022 Counselling Alberta served 197 new unique people, offering 416 counselling sessions. Looks like the cost of counselling over the six months reported appears to have cost over \$4,000 per session. What was the total number of counselling sessions delivered via this investment at year-end, and does the ministry consider this good value for money?**
 - In 2022-23, 2,408 counselling sessions were delivered in the fiscal year.

- In 2023-24, more than 12,200 counselling sessions were offered both virtually and in person to almost 2,200 unique clients.
 - This represents a significant increase from the prior year and demonstrates the effectiveness of scale up and expansion activities.
 - As of March 31, 2024, program reporting indicated nearly 50 per cent of Counselling Alberta clients experienced improvement or recovery in their mental health conditions, higher than the published benchmark of 35 per cent. An additional 46 per cent of clients achieved stability in their mental health through the counselling service.
 - Work is underway to implement a digital tool that will allow Counselling Alberta's partner agencies to provide information in a standardized, systematic manner.
 - Overall, the Counselling Alberta expansion is expected to have a far reaching and sustainable impact on the mental wellness and recovery of Albertans.
- 4. Out of the 10,000 spaces 7,700 are detox. These are short term, like, less than two weeks, and are usually an interim stage before going into long-term treatment. So the question here is: when detox spaces far outweigh treatment, how does the department address the bottleneck? What were the wait times in 2022-2023 for detox and treatment?**
- The flow of clients from a withdrawal management (detox) service to addiction treatment (intensive and recovery) is not always linear. Some clients who access withdrawal management do not require bed-based addiction treatment and are better supported in their long-term recovery through the provision of out-patient services like the Virtual Opioid Dependency Program (VODP), where there are no wait times as services can be provided same day. For clients who would benefit from bed-based addiction treatment that cannot be immediately transitioned (i.e., a bed is not immediately available), other out-patient resources are provided to the clients during the wait time to ensure they are appropriately supported (e.g., peer-based recovery support groups, community-based resources, 24/7 addiction help line). For individuals determined to have a high likelihood of returning to drug use during this waiting period, limited post-withdrawal management/pre-treatment beds will be leveraged.
 - A key part of what My Recovery Plan will play is to more accurately identify, and in a consistent way, how long wait lists are because during this fiscal year there were still many instances of the same person being on multiple wait lists, therefore estimated wait times by operators are not always accurate and have been found to over project how many people are actively waiting and ready for treatment.
 - Based on a province wide vacancy rate that was often less than 80 per cent, in many cases there are opportunities to access detox and treatment the same day. A reported median wait time for Addiction Treatment Services funded through the Medical Detoxification and Residential Addiction Treatment Expansion (residential treatment only, not detox or recovery) was report at the higher end at approximately 35 days in both the 2022-23 and 2023-24 fiscal years; however, waitlists in these years were not tracking by unique clients (clients in waiting) so this figures are not verifiable or fully accurate.
 - Currently, most withdrawal management services do not have a formal waitlist but rather use a triage-based system. Work is underway to establish benchmarks and tracking of this indicator and scale up use of My Recovery Plan to track unique individuals waiting for treatment.
 - In 2023-24, the VODP provided services to 6,595 unique clients from 239 different communities across Alberta, so there is strong uptake of treatment on demand and same day.

- 5. Just under My Recovery Plan what consultations and actions were undertaken to ensure this online platform is accessible to people with disabilities?**
- The My Recovery Plan (MRP) tool is a digital platform that helps individuals assess, plan, monitor, and measure their own recovery capital as they pursue a pathway of recovery that is unique and meaningful to them.
 - MRP allows Mental Health and Addiction to better track utilization, outcomes, and waitlists to improve system management and reduce barriers to accessing services. MRP also allows service providers to evaluate their programs and meet reporting requirements more easily.
 - According to The Last Door Recovery Society, the developer of MRP, the web application has not been specifically designed or audited for accessibility. Staff (navigators) do the intakes and assessments, therefore minimizing the need for clients to use MRP directly.
 - “Person with a disability” is captured as a category of priority population in MRP. These numbers are likely to be a low representation for this population as MRP was incrementally implemented during the 2023-24 fiscal year.
 - The number of Treatment MRP patients included in the disability priority population category and admitted in the 2023 calendar year was 33.
 - The number of Detox MRP patients included in the disability priority population category and admitted in the 2023 calendar year was 40.
- 6. HealthIM is a digital platform that provides police officers with evidence-based on-site tools and information they need to respond to mental health crises safely and effectively by better assessing the needs of someone experiencing a mental health crisis. The platform was launched in July 2022 with EPS. I see on page 22 that “the total committed funding for HealthIM is approximately \$2.4 million over three years.” My question is: how has this funding contributed to improved responses to individuals with mental health concerns while ensuring police and emergency resources are used effectively? Also, how many police services are currently using HealthIM, and what is the status of implementation by police services across the province?**
- Government invested approximately \$789,000 in 2022-23 to establish and implement the HealthIM digital tool that was launched in July 2022. An additional \$740,000 was invested in 2023-24.
 - Through HealthIM, police officers responding to an incident involving mental health have access to de-escalation techniques, police information about the person in crisis, and information sharing with health facilities and community services that increases safety for people in crisis.
 - When a police officer determines it is appropriate to apprehend a person under the *Mental Health Act* for assessment by a qualified health professional, the app sends information in advance to the nearest designated hospital so they can be prepared and minimize wait times when the individual arrives.
 - As of March 31, 2024, HealthIM was in use in nine police services: Edmonton, Lethbridge, Medicine Hat, Camrose, Lacombe, Tsuut’ina Nation, Lakeshore Regional (Driftpile), Blood Tribe, and all four RCMP K Division districts.
 - In 2023-24 and future fiscal years, Mental Health and Addiction has and will continue to collaborate with co-lead ministry Public Safety and Emergency Services to support further roll out of HealthIM to remaining police services and update the tool to provide greater efficiencies when a police officer chooses to detain an individual under the *Mental Health Act*.
 - In 2022-23, HealthIM logged a total of 2,062 mental health calls (the service was available beginning in October 2022). In 2023-24, HealthIM logged a total of 8,877 mental health calls and the service was used to assist people 7,743 times.