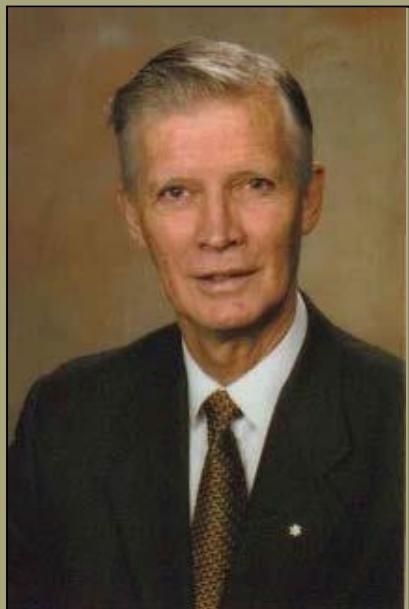


Provincial Mental Health and Addictions Advisory Council

ANNUAL REPORT

April 1, 2012 - March 31, 2013

CHAIRPERSON'S MESSAGE



Vince Withers

**Council Chair,
Provincial Mental Health and
Addictions Advisory Council**

I am pleased to provide the 2012-2013 Annual Report for the Provincial Mental Health and Addictions Advisory Council in accordance with the requirements of the Transparency and Accountability Act for a Category 3 Government Entity. In the development of this report careful consideration was given to the strategic directions of government, as communicated by the Minister responsible for this entity.

This annual report, our second such report since the Advisory Council was formed in June 2010 outlines some of the programs and activities undertaken and identified in the 20-11-2014 Activity Report. It also reflects the Advisory Council's interest and commitment in pursuing more proactive and effective mental health and addiction activities that hopefully in the longer term will increase awareness and improve access to treatment and support services. The Advisory Council continued placing emphasis on preventative and wellness priorities such as housing, e-outreach based services and recovery and peer support programs.

I want to recognize the work and dedication of Advisory Council members who are contributing a significant amount of time and effort and particularly for their advice and counsel so important in maintaining the very positive mental health and addiction momentum currently in place in our province. The Council works closely with the Department of Health and Community Services and appreciates their ongoing collaborative support and encouragement in delivering on their commitment to improve mental health and addiction services.

As chairperson of the Provincial Mental Health and Addictions Advisory Council, my signature is indicative of the Advisory Council's accountability for the actual results reported.

Sincerely,

A handwritten signature in black ink that reads "Vince Withers". The signature is written in a cursive style and is positioned above a horizontal line.

Vince Withers, Chair

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1.0 Overview

The Provincial Mental Health and Addictions Advisory Council (Advisory Council, Council) was established in June 2010 to advise the Minister of Health and Community Services on key mental health and addictions matters in order to enhance services and improve the lives of those living with mental health and addictions issues in Newfoundland and Labrador.

1.1 Mandate

The Provincial Mental Health and Addictions Advisory Council advises the Minister of Health and Community Services on key mental health and addictions matters needed to formulate effective policy and decision making.

The Advisory Council specifically advises on matters related to:

- How government can best develop policy to improve and/or prevent mental health and addictions problems
- The process and content of possible revisions to the provincial policy framework for addictions and mental health
- The development, planning, delivery and evaluation of evolving mental health and addictions programs, services and support infrastructures
- The establishment of a set of indicators to measure performance within the policy framework and for service provision throughout the province
- How to increase public awareness and education of addictions and mental health issues in Newfoundland and Labrador.

1.2 Membership

The Provincial Mental Health and Addictions Advisory Council is a 13 member group representing persons/families affected by mental illness and/or addictions; health regions, and community-based agencies. Membership is voluntary and appointments are made by the Minister of Health and Community Services. Ministerial approval was provided to increase membership by two and to replace the western representative who resigned in 2012. Current Advisory Council members are listed in Appendix A.

1.3 Meetings

The Mental Health and Addictions Advisory Council first met in July 2010. Since membership is geographically representative of Newfoundland and Labrador, members can attend in person or by teleconference. In 2012-13, meetings were scheduled monthly or bi-monthly and attendance was always strong demonstrating the dedication of Advisory Council members. In 2012-13, there were nine meetings in total held.

1.4 Financial

The work of the Provincial Mental Health and Addictions Advisory Council was supported and funded by the Mental Health and Addictions Division, Department of Health and Community Services. In addition, clerical support and secretariat services were also administered by the Mental Health and Addictions Division within the Department of Health and Community Services.

In 2012-13, the total expenses for the Advisory Council were \$6814 and included transportation, meals, accommodations/meeting venues and other logistical components such as teleconferences.

1.5 Values

The Mental Health and Addictions Advisory Council adopted the values of the Department of Health and Community Service, which were incorporated into Advisory Council activities:

<i>Professionalism</i>	Each person is qualified and competent, and supported in their work through a culture that encourages continuing education and employee development.
<i>Excellence</i>	Each person makes decisions based on the best evidence available and follows proven best practices to ensure individual and departmental performance is maintained at the highest possible standard.
<i>Transparency and Accountability</i>	Each person takes their responsibility to their clients seriously and contributes to a culture of openness and transparency in decision-making and reporting.
<i>Collaboration</i>	Each person engages others, both within and external to the department, in a positive manner, respectful of others and their different perspectives.
<i>Privacy</i>	Each person manages and protects information related to persons/families/organizations/communities and the department appropriately.

1.6 Primary Client

The primary client of the Provincial Mental Health and Addictions Advisory Council is the Minister of Health and Community Services. By fostering an environment of understanding within government about mental health and addictions, all persons in the province are also served.

2.0 Shared Partnerships 2012-13

In 2012-13, the Advisory Council partnered with several organizations with the goal of improving mental health and addiction services in Newfoundland and Labrador. In addition to mental health and addiction service improvements, the 2012-13 partnerships also supported the strategic directions of population health and access to priority services (see Appendix B) as communicated by the Minister. The work of the Advisory Council supported the strategic direction of the Department by aiming to improve population health and access to mental health and addictions services.

This section provides information on significant partnerships in 2012-13 and the Advisory Council's contribution to these strategic directions.

Mental Health Commission of Canada (MHCC): The Advisory Council partnered with the MHCC for information sharing and knowledge exchange purposes. In 2012-13, the Advisory Council had one meeting with the president and CEO of the MHCC who presented on the various programs and activities of the MHCC and possible partnership opportunities with MHCC. The Provincial Mental Health and Addictions Advisory Council, with the support of the Department of Health and Community Services has partnered with the MHCC on a recovery project for Newfoundland and Labrador. The purpose of the recovery project is to provide a recovery curriculum to clinical leaders in mental health and addictions services, both within RHAs, community agencies, and correctional settings throughout the province. In addition to building a relationship with the organization, the Advisory Council had two members actively involved in other facets of the MHCC- one member was on the Board of Directors and another was a representative on the National Service Systems Advisory Committee.

Community Support Groups (CSG): By the very nature that Advisory Council membership included representatives from community support groups (CSG); partnerships between CSG and the Advisory Council were strong. In 2012-13, six of the 13 members belonged to one of the following organizations at the community level:

<i>Choices for Youth</i>
<i>Canadian Mental Health Association- Newfoundland and Labrador (CMHA-NL)</i>
<i>Consumers Health Awareness Network Newfoundland and Labrador (CHANNAL)</i>
<i>Eating Disorder Foundation of Newfoundland and Labrador (EDFNL)</i>
<i>Stella's Circle Community Services</i>
<i>Turnings</i>

The Chair of the Advisory Council spoke to five community support groups during 2012-2013 (two Rotary Clubs, the Pastoral Care Foundation, the Schizophrenia Society of Newfoundland and Labrador, and the Newfoundland and Labrador-Canadian Red Cross). CSG partnerships were important to the Advisory Council because they provided the grassroots or 'on the ground' perspective to mental health and addictions issues. Partnering with community organizations ensured community views positioned the Advisory Council to provide the best possible and most meaningful advice to the Minister.

Regional Health Authorities (RHAs): The Advisory Council partnered with RHAs throughout the year. In 2011-2012, the Advisory Council visited Eastern Health, Western Health, and Labrador-Grenfell Health. In 2012-2013 the Advisory Council visited Central Health. On these visits, the Advisory Council was briefed by RHA representatives on mental health and addiction services in the region; as well as successes and challenges in service delivery. The Advisory Council Chairperson attended the regional/provincial meetings in May, 2012 which included regional Directors for Mental Health and Addictions and Chief Psychiatrists from all four RHAs to continue to strengthen collaboration between the Council and service providers throughout the province.

Department of Health and Community Services (DHCS) The DHCS and the Advisory Council had a strong relationship in 2012-13. The Mental Health and Addictions Division provided secretariat support and also organized meetings, based on consensus from the Advisory Council. In addition to logistical work, the Advisory Council reported to the Minister and informed policy makers on pertinent issues related to mental health and addictions.

The Advisory Council had two meetings with the Minister of Health and Community services. The Advisory Council submitted a report outlining key priorities for 2013-2014 which include:

- Awareness and E-Mental Health Program
- MH&A Policy Framework
- Provincial Addictions Conference
- Housing First Policy
- Mental Health Commission of Canada (MHCC) Partnership
- MHCC Advisory Partnership Recovery Project
- Quarterly meetings with the Minister
- Waitlist Management
- MH&A Performance Measure Standards
- MMT Treatment Policy
- Waterford Replacement Program
- Labrador MH&A Scoping Project

In 2012-2013 a number of groups presented to the Advisory Council on various topics of interest. These presentations represented areas of priority/concern. The Advisory Council will continue its support of these initiatives.

Group	Presentation Topic
Office for Aging and Seniors, Department of Health and Community Services	Seniors and Mental Health
NL Housing and Homelessness Network, community level Liaison with the St. John's Community Advisory Committee on Homelessness	Ending Homelessness and Ensuring Housing Stability in Newfoundland and Labrador
Mental Health Commission of Canada	Overview of MHCC priorities
Department of Health and Community Services	Methadone Maintenance Treatment
Department of Health and Community Services	E-Mental Health and Addiction Awareness
Department of Health and Community Services	System Readiness Planning for the E-Mental Health and Addiction Awareness Program
Advisory Council Chair	Labrador Mental Health and Addictions Scoping Project
Dr. Edgardo Perez and Department of Health and Community Services	Clinical Efficiency and Access Management
Department of Health and Community Services	Recovery Project
Eastern Health	Methadone Maintenance Treatment
Advisory Council Chair	Advisory Council Priorities for 2012-2013
Turnings	Correctional Support / Treatment Programs for those who have been incarcerated
Department of Health and Community Services	Progress Report for Department and RHAs

3.0 Accomplishments and Highlights

Waitlists: In 2011-12, the Advisory Council attended a Ministerial roundtable discussion on mental health and addiction wait-times with a goal of addressing how to improve access. The roundtable discussion produced action items to reduce wait-times including (among others) an analysis by RHAs of current waitlists as well as innovative solutions towards collaborative care models. In 2012-13 significant work was undertaken to support clinical efficiencies and reduce wait-times.

Policy Advice: Building on the advice provided in 2011-12, Advisory Council submitted two policy documents to the Minister in 2012-13. The submitted policy statements are:

1. Housing First: A Basic Human Need. The Advisory Council aims to work collaboratively with the Department of Health and Community Services and other departmental stakeholders to make housing development a high priority for individuals with complex mental health and addictions issues. The Advisory Council has asked the Department of Health and Community Services to review existing supportive housing options within RHAs with housing first principles in mind.
2. Labrador Mental Health and Addiction Scoping Assessment. The Advisory Council sent a report to the Minister regarding Labrador outlining the need to study current mental health and addictions treatment and support services and what program improvements are required including a determination of the most critical priorities and time frames.

These documents were reflective of the Advisory Council's experience and the input received from the community. This was an accomplishment that spoke to the Advisory Council's dedication on current issues and their desire to provide the best possible advice to the Minister.

Methadone Maintenance Treatment (MMT): Building on the work in 2010-12, the Advisory Council remained committed to MMT in 2012-13 with discussions at six of the nine council meetings. MMT remained a priority throughout the year and Advisory Council's feedback and advice for MMT in Newfoundland and Labrador was actively communicated to the Minister. In 2012-2013 the Director of the Mental Health and Addictions Division began chairing the Provincial Advisory Committee on Opioid Treatment Services.

4.0 Report on Performance

The Advisory Council recognized the alignment between its vision and mission and that of the Department of Health and Community Services and adopted the Department's as its own.

4.1 Vision

The vision of the Department of Health and Community Services is for individuals, families and communities to achieve optimal health and well-being.

4.2 Mission

By March 31, 2017 the Department of Health and Community Services will have provided leadership to support an enhanced health care system that effectively serves the people of the province and helps them achieve optimal health and well-being.

The Advisory Council members, individually and collectively, contributed to achieving the Department's mission by providing advice, and at times, participating in the review of the existing policy framework, *Working Together for Mental Health*. The provision of advice and the collaborative efforts to inform policy development and the delivery of programs and services furthered positive mental health and well-being throughout the province.

4.3 2012-13 Progress

GOAL 1:

Provincial Policy Framework Annual Objectives

The 2005 policy framework, *Working Together for Mental Health*, was the Government of Newfoundland and Labrador's response to the long acknowledged challenges faced by those who use the mental health and addiction system. The policy directions in *Working Together for Mental Health* are:

- Prevention and early intervention
- Bridges for better access
- Quality mental health and addiction services
- Consumers and significant others
- Accountability and measuring progress

Under this policy framework, \$30 million over the past three years was invested by the Provincial Government to support mental health and addiction services throughout the province. Investments included the development of two youth treatment centres for youth with addictions and complex mental health issues, early planning for the replacement of the Waterford Hospital, and additional case manager positions among many other initiatives. In order to have continued benefits from these investments, the Advisory Council remained current and relevant. Because of the Budget 2011-12 investments in mental health and addictions, the Advisory Council viewed the occasion as a time of renewed commitment to mental health and addictions including the revision of the 2005 policy framework. When the Advisory Council reviewed the existing 2005 framework, they identified strengths and achievements as well as areas for change and revision. Progress towards achieving this goal during 2012-2013 is documented below.

This goal supported the strategic direction of population health by addressing mental health and addiction concerns in the province.

Goal: By **March 31, 2014**, Provincial Mental Health and Addictions Advisory Council will have reviewed the existing provincial policy framework for addictions and mental health.

Annual Objective: By **March 31, 2013**, the Provincial Mental Health and Addictions Advisory Council will have advised on possible revisions to the Policy Directions of the Framework.

Measure: Advised on possible revisions.

Indicators Planned Activity	Actual Activity
Participated in public and targeted stakeholder meetings	Targeted stakeholders meetings were not held. However, the Advisory Council presented to community groups during the last two years and used all information and feedback provided to inform revisions to the Policy Framework. Additional approaches to collecting stakeholder input are being explored.
Provided advice on the policy directions, following stakeholder meetings	Targeted stakeholders meetings were not held. However, the Advisory Council provided advice into the policy directions and best methods to engage interested stakeholders.
Reviewed possible policy directions to assess degree of influence	The Advisory Council reviewed and assessed the policy directions.

Discussion of Results:

The Advisory Council continued to provide input into policy directions for a new mental health and addictions Policy Framework through bi-monthly Council meetings and discussions with the Director of Mental Health and Addictions. The Advisory Council oversaw work related to two Policy Framework directions (recovery and stigma reduction) through their ongoing work with the Recovery project and the E-Mental Health and Addiction Awareness program. Feasible options for stakeholder engagement were explored and the Advisory Council will support future engagement activities.

Annual Objectives 2013-14

By **March 31, 2014**, the Provincial Mental Health and Addictions Advisory Council will have provided advice on select improvements/revisions to the Policy Framework.

Measure: Provided advice on select improvements/revisions.

Indicators:

- Reviewed Policy Framework.
- Provided advice on select improvements and final revisions to the Policy Framework.

GOAL 2:

Pervasive Stigma Associated with Mental Health, Mental Illness, and Addiction

Stigma and discrimination associated with mental health and addiction are significant barriers to accessing help. One in five people experience a mental illness in their lifetime and many people living with mental health issues say the stigma of the disease is often worse than the illness itself.

The Advisory Council acknowledges the impact stigma has on people accessing support and services. One goal of the Advisory Council is to increase public awareness and education of addictions and mental health issues in Newfoundland and Labrador to reduce stigma and discrimination.

In Budget 2011, the Provincial Government committed to the development of a public awareness campaign supporting the second goal of the Advisory Council (Pervasive Stigma Associated with Mental Health, Mental Illness, and Addiction). The awareness campaign will decrease stigma and discrimination attached to mental illness and addictions and increase understanding of how and when to seek help.

A program manager was hired by the Department of Health and Community Services in August 2011 to oversee the development of the public awareness campaign. The manager met the Advisory Council three times during the 2012-13 year to provide updates and requested input on all planning stages of the program. In 2012 a request for proposals (RFPs) was issued seeking vendors to develop the awareness campaign. The Advisory Council Chair participated in the evaluation and selection of a vendor with Department representatives during the summer of 2012. Progress towards achieving this goal in the second of three years is documented below.

This goal supports the strategic direction of access to priority services by promoting positive mental health and decreasing the stigma associated with mental health issues; thereby, enabling the public to seek and use needed services.

Goal: By **March 31, 2014**, the Provincial Mental Health and Addictions Advisory Council will have participated in the development and implementation of a provincial awareness campaign for mental health and addiction issues.

Annual Objective: By **March 31, 2013**, the Provincial Mental Health and Addictions Advisory Council will have participated in the campaign.

Measure: Participated in the campaign.

Indicators Planned Activity	Actual Activity
Commented on the evaluation criteria to be used in the evaluation of the awareness program	The Advisory Council has been engaged in the selecting and planning of evaluation criteria for the e-mental health and addiction awareness program.
Participated in the implementation of the e-mental health program	The Advisory Council Chair participated on an evaluation team for the review and selection of RFPs pertaining to the awareness campaign as part of the e-mental health and addiction awareness program. Selecting a successful vendor is considered to be in the initial phase of implementation.
Participated in community announcements of the e-mental health program	The Advisory Council actively communicated progress and updates to the community regarding the e-mental health and addiction awareness program.
Provided input into further development of the e-mental health program	The Advisory Council received regular reports and updates regarding the e-mental health and addiction awareness program and they actively provided feedback to the program manager to guide program development.

Discussion of Results:

The Advisory Council was very active in the planning of the provincial awareness campaign. The Advisory Council provided input into all planning stages of the campaign by reviewing the consultant reports, evaluating/selecting a successful vendor and discussing the project at multiple council meetings throughout the year.

Annual Objectives 2013-14

By **March 31, 2014**, the Provincial Mental Health and Addictions Advisory Council will have informed the evaluation of the campaign.

Measure: Informed evaluation of the campaign.

Indicators:

- Participated in campaign development.
- Provided input on how to publically launch the campaign.
- Participated in program evaluation.

GOAL 3:

Accessibility of Services for Youth in Rural Areas

Despite the gains that have been made in the recruitment of mental health professionals, challenges with accessibility and gaps in service delivery remain. Innovative methods of service delivery such as the use of e-mental health and addiction services and telemedicine can help to address service gaps. These gaps are notable in rural and remote areas of the province where geography and isolation play significant factors with how youth are engaged in traditional services and where cultural barriers, specific to Aboriginal populations, continue to prevent access to help.

During 2012-2013 the Advisory Council provided input into the planning of web-based mental health and addiction services for youth and stakeholders. In addition, funding was provided to strengthen telemental health services in Newfoundland and Labrador. Both components of e-mental health services support this goal and will positively impact access to services specifically for youth and those in rural areas.

A program manager was hired by the Department of Health and Community Services in August 2011 to oversee the planning and development of a youth and stakeholder portal. The manager met the Advisory Council three times during the 2012-13 year to provide updates and requested input on all planning stages. In 2012, a request for proposals (RFPs) was issued seeking vendors to create the youth and stakeholder portal. The Advisory Council Chair participated in the evaluation and selection of a vendor with Department representatives.

This goal links to the strategic direction of access to priority services by providing another avenue of service that will connect individuals to addiction services, if desired.

Goal: By **March 31, 2014** the Provincial Mental Health and Addictions Advisory Council will have advised on the implementation of an application of web based mental health and addiction services.

Annual Objective: By **March 31, 2013**, the Provincial Mental Health and Addictions Advisory Council will have provided input on the location, planned implementation and administration of web based mental health and addiction services.

Measure: Provided input.

Indicators Planned Activity	Actual Activity
Provided input into service design	The Advisory Council provided input into service design and functionality which was incorporated into the request for proposal (RFP) criteria which sought a vendor to develop the youth portal. The Advisory Council Chair participated on an evaluation team for the review and selection of RFPs to develop a youth and stakeholder portal as part of the e-mental health and addiction awareness program.
Advised external consultants	The Advisory Council advised Health TRx, a New Zealand based e-health consultant who was contracted by the Department of Health and Community Services, on key directions for the e-mental health and addiction awareness program.
Participated in the implementation of the e-mental health and addictions services	Due to a change in program direction, the youth portal and stakeholder portal as part of the e-mental health and addiction awareness program has not yet moved to the implementation phase.

Discussion of Results:

The Advisory Council was fully engaged in the program planning, development and progress of web-based services for youth. The Advisory Council provided input into all planning stages by reviewing consultant reports, evaluating/selecting a successful vendor and discussing the project at multiple council meetings throughout the year. Due to a change in program direction, external consultants have not yet been hired to complete the implementation phase of the program.

Annual Objectives 2013-14

By **March 31, 2014**, the Provincial Mental Health and Addictions Advisory Council will have advised on the evaluation of web based mental health and addiction services.

Measure: Advised on the evaluation.

Indicators:

- Advised external consultants.
- Provided input on how the program should be evaluated.

5.0 Challenges and Opportunities for 2013-14

- **Responsiveness to Identified Issues:** In 2013-14, the Advisory Council will continue to inform the Minister of Health and Community Services on significant issues in mental health and addictions. An anticipated challenge is working with partners to support improved access to the mental health and addictions system. The Advisory Council has developed strong working relationships with partners province-wide and therefore sees this challenge as an opportunity to further strengthen these partnerships and work collaboratively to improve system access. The Advisory Council has also had access to the Minister and this provides an opportunity in the 2013-14 year to once again provide timely advice on key issues. The Advisory Council wants to encourage more timely response to critical program and projects and will do what it can to collaboratively support the necessary approval processes.
- **Partnerships:** Partnerships with other organizations and groups provide many opportunities for the Advisory Council to partner, communicate and stay informed about the most pertinent mental health and addiction issues occurring in the province and in turn, provide the best advice possible to the Minister of Health and Community Services. An anticipated challenge is to work more collaboratively with community groups and regional health authorities. The planned stakeholder portal will act as a nucleus for coordination of efforts and building a stronger community of collaboration.

Appendix A: Advisory Council Membership 2012-2013

Name	Affiliation
Vince Withers	Council Chair, Chairperson of Eating Disorder Foundation of Newfoundland and Labrador
Dr. Nizar Ladha	Council Vice Chair, General and Forensic Psychiatrist
Jocelyn Greene	Community Service Provider - Adults
Sheldon Pollett	Community Service Provider – Youth
George Skinner	Provincial Mental Health Advocacy, Community Service Provider
Mary Walsh	Actor/Social Activist
Peter Ralph	Provincial Mental Health Advocacy, Consumer Self Help/Peer Support
Des Coombs	Central; RHA Services Provider and Psychologist
Michelle Kinney	Nunatsiavut Government, Northern Region
Ron Fitzpatrick	Community Service Provider – Adults Involved in Criminal Justice System
Thelma Whalen	Education, Western Region
Paul Thomey	Local Business Owner
Ted Callanan	Professor of Psychiatry, Memorial University of Newfoundland; Psychiatrist, START Clinic, Eastern Health

Advisory council support provided by:

Colleen Simms	Department of Health and Community Services, Director of Mental Health and Addictions Division
Niki Legge	Department of Health and Community Services, Program Manager, Mental Health and Addictions Division

Advisory Council Membership 2012- 2013



Front L-R: Vince Withers (Chair), Dr. Nizar Ladha (Co-Chair)

Back L-R: Desmond Coombs, George Skinner, Ted Callanan, Ron Fitzpartick, and Peter Ralph

Missing from Photo: Jocelyn Greene, Sheldon Pollett, Mary Walsh, Thelma Whalen, Michelle Kinney, and Paul Thomey.

Appendix B: Strategic Directions of the Department of Health and Community Services as Supported by the Mental Health and Addictions Advisory Council

Strategic Direction 1

Title: Population Health

Outcome: Improved Population Health

To achieve “improved population health”, focusing efforts on public health interventions that will; promote healthy lifestyles and reduce health inequalities, prevent acute and chronic illness and injury, and protect people from health hazards, are necessary.

An integrated and collaborative approach, which preserves and promotes health and prevents and controls disease, is needed to:

- reduce the incidence of illnesses that contribute to the burden of illness in Newfoundland and Labrador; and
- prepare the health system for illnesses and threats to health that are expected to emerge as society and the physical environment change.

Activities in these areas will decrease the burden of illness and associated health care and treatment costs, and contribute significantly to a sustainable health system. Focus areas for 2011-2014 are found on the next page. Some are population specific and others are related to health initiatives or programs to improve population health.

Focus areas of the Strategic Direction 2011-2017	The Population Health Strategic Direction is		
	Addressed by the Provincial Mental Health and Addictions Advisory Council		
	Activity Plan	Operational Plan	Work Plan
Aboriginal Health	X		
Chronic Disease Management	X		
Health Emergency Management			X
Wellness			X

Strategic Direction 2

Title: Access to Priority Services

Outcome: Improved accessibility to priority services

In addition to the challenges of geography, climate and a dispersed population, Newfoundland and Labrador is experiencing *population aging*, a process whereby older individuals account for a proportionately larger share of the total population and immigration. We have the highest median age in Canada, that is, over half of the population is aged 43.3 years. In 2010, approximately 199,000 residents of the province were 50 years of age or over (38.8% of the population) and approximately 77,600 people aged 65 years or older made up 15.2 % of the population. We also have one of the highest rates of chronic disease in the country. All persons require access to health services and health providers at some point and the implications for the health system will be significant over the next 6 years.

All services cannot be provided in every community, therefore defining the balance between available resources, what is reasonable and appropriate access within a range of prevention and treatment options, and / or specialty and emergency services is critical. We remain committed to improving access throughout the province by increased review of existing services, referral patterns, utilization, targeted interventions, and engagement of patients and the public. This 6 year planning cycle will focus on reviewing progress to date in previously selected areas, addressing identified gaps and strengthening collaborative approaches with Regional Health Authorities, health providers, community groups and Atlantic partners in the following focus areas:

Focus areas of the Strategic Direction 2011-2017	The Population Health Strategic Direction is		
	Addressed by the Provincial Mental Health and Addictions Advisory Council		
	Activity Plan	Operational Plan	Work Plan
Access Management	X		
Mental Health and Addictions Services	X		

**Provincial Mental Health and Addictions Advisory Council
Secretariat Support and General Inquiries:**

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