Provincial Mental Health and Addictions Advisory Council

Activity Plan

April 1, 2011-March 31, 2014
MESSAGE FROM THE CHAIRPERSON

Dear Minister Kennedy:

Pursuant to the Transparency and Accountability Act, the Provincial Mental Health and Addictions Advisory Council will plan as a Category three (3) government entity. I am pleased to provide the Activity Plan for the period of April 2011 – March 2014.

This Activity Plan also provides an overview of the Provincial Mental Health and Addictions Advisory Council and identifies key objectives to be accomplished for this planning period.

The Council, since its appointment in July 2010, is very pleased with the strong support and interest shown by you as Minister, and by staff in the Department of Health and Community Services in our work. It has provided the motivation required by Council to commit to significant activity within the Mental Health and Addictions policy and program.

In the development of this plan careful consideration was given to the strategic directions of government. My signature below is indicative of the the Provincial Mental Health and Addictions Advisory Council's accountability for the preparation of this plan and the achievement of specific objectives contained in the plan.

Sincerely,

Vincent Withers, Chairperson
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# Overview

Provincial Mental Health and Addictions Advisory Council Activity Plan 2011-2014
The Provincial Mental Health and Addictions Advisory 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.

**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. Specifically 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 NL.

**Membership**

The Provincial Mental Health and Addictions Advisory Council is an 11 member group representing persons/families affected by mental illness/addictions; service representation within regional health authorities and non-government organizations; and community agencies (see Appendix B). Membership is voluntary and appointments are made by the Minister of Health and Community Services.

**Funding**
The work of the Provincial Mental Health and Addictions Advisory Council is supported and funded by the Mental Health and Addictions Division, Department of Health and Community Services. The Mental Health and Addictions Advisory Council held its first meeting in July 2010. Meetings are scheduled every two months or as required. From July 2010 to April 2011 meetings were held monthly.

The Mental Health and Addictions Advisory Council does not maintain a separate office; support and secretariat services are provided by the Mental Health and Addictions Division, 1st floor West Block, Confederation Building, St. John's.

**Primary Client**

The primary client of the Provincial Mental Health and Addictions Advisory Committee 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.

**Vision**

The Provincial Mental Health and Addictions Advisory Council supports the following vision of the Department of Health and Community Services:

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

The Advisory Council contributes to achieving the Department’s vision by providing advice, and at times, participating in the review of the existing policy framework, to ensure the optimal mental health and well being of the population.
Values

The Mental Health and Addictions Advisory Council has chosen to adopt the following values of the Department of Health and Community Service, which are incorporated in daily activities and are present in the overall organizational climate.

**Professionalism**
Each person is qualified and competent, and supported in their work through a culture that encourages continuing education and employee development.

**Excellence**
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.

**Transparency and Accountability**
Each person takes their responsibility to their clients seriously and contributes to a culture of openness and transparency in decision-making and reporting.

**Collaboration**
Each person engages others, both within and external to the department, in a positive manner, respectful of others and their different perspectives.

**Privacy**
Each person manages and protects information related to persons/families/organizations/communities and the department appropriately.
Mission

The Provincial Mental Health and Addictions Advisory Council supports the Department of Health and Community Services’ Strategic Plan 2011-2017 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 contributes to the above mission through the provision of advice and the collaborative efforts that are made individually and collectively by members to further positive mental health and well being. The Council’s contribution to achieving the mission will be limited to providing advice due to its advisory mandate.

Note: For a complete version of the Department’s strategic plan and mission statement, please contact the Department of Health and Community Services Tel: 709-729-4984 or email: healthinfo@gov.nl.ca or visit [http://www.health.gov.nl.ca/health/](http://www.health.gov.nl.ca/health/).
Goals and Objectives 2011-2014

Issue 1: Provincial Policy Framework

*Working Together for Mental Health* (2005) 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. In 2005 the policy directions were:

- Prevention and Early Intervention;
- Consumers and Significant Others;
- Bridges for Better Access;
- Quality Mental Health and Addiction Services;
- Accountability and Measuring Progress.

Under this policy framework, over $25 million has been invested to support addiction and mental health services throughout the province, including mental health promotion and addiction prevention services through to early intervention, treatment and recovery.

In order to have continued benefits from these investments, ensuring that the Advisory Council remains current and relevant is necessary. In light of Government’s 2011-12 budget commitment of $8.7 million for mental health and addictions initiatives, the Council views the coming fiscal year as a time of renewed commitment to mental health and addictions. The Council will fulfill its role in providing advice to the Minister by reviewing the existing policy framework, *Working Together for Mental Health* (2005). The work of the Advisory Council will not only recognize the strengths and positive achievements to date, but will also identify areas for possible change and revision. This will include a focus on aboriginal health, a recovery orientation for the management of chronic mental health and addictions issues, and access to and awareness of services.

This work supports the strategic direction of “Population Health” by specifically addressing the health promotion and prevention needs of the entire population; more specifically those dealing with mental health and addictions. The strategic direction of “Access to Priority Services” is also supported as ways of becoming more responsive to clients and service providers over time and across the continuum of health services will be identified.
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.

Measure: Reviewed the existing provincial policy framework

Indicators:

- Reviewed existing policy framework (2005)
- Identified Advisory Council specific involvement
  - Provided ministerial advice on the content for suggested revisions
- Participated in related meetings, discussion forums
- Identified impact on policy directions

Annual Objectives

By March 31, 2012, the Provincial Mental Health and Addictions Advisory Council will have engaged stakeholders in reviewing the provincial policy framework for addictions and mental health.

Measure: Engaged stakeholders

Indicators:

- Provided a focal point for stakeholder input
- Advised on the policy directions and stakeholder engagement
- Provided documentation, such as reports, meeting minutes, and ministerial correspondence

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

By March 31, 2014, the Provincial Mental Health and Addictions Advisory Council will have continued to provide advice for select improvements/revisions to the Policy Framework.
Issue 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. Thirty eight percent (38%) of Canadian parents would not tell anyone if their child had a mental illness. Many people living with mental health issues say the stigma of the disease is often worse than the illness itself. Furthermore, by 2020, depression will be second, after heart disease, as a leading cause of disability world wide, especially in high income countries.

The council has identified this issue because it directly addresses its mandate respecting how to increase public awareness and education of addictions and mental health issues in NL. In Budget 2011, the Provincial Government announced it will create a public awareness campaign to decrease stigma and discrimination attached to mental illness and addictions and increase understanding of how and when to seek help. A total of $1 million was invested to launch a provincial awareness campaign and to develop an interactive e-mental health service to enhance telehealth services for people in remote and rural regions of the province.

This issue supports the strategic direction of “Access to Priority Services” by directly dealing with stigma, one of the most difficult barriers to overcome and one that prevents individuals from receiving the necessary support and service throughout the province.

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.

Measure: Participated in the development and implementation of a provincial awareness campaign

Indicators:

- Met with consultants on scoping the problem
- Provided input into all planning stages and key messaging
- Solicited feedback from community groups on campaign
- Advised on evaluative criteria
- Provided input into changes to the campaign
- Recommended changes for the future.
Objectives:

By March 31, 2012, the Provincial Mental Health and Addictions Advisory Council will have provided input into all planning stages of the campaign.

Measure: Provided input

Indicators:

- Submitted consultant reports
- Forwarded correspondence to the Minister and decision makers
- Recorded progress in meeting minutes

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

By March 31, 2014, the Provincial Mental Health and Addictions Advisory Council will have informed the evaluation of the campaign.
**Issue 3: Accessibility of Services for Youth and in Rural Areas**

Despite the gains that have been made in the recruitment of mental health professionals, problems with accessibility and gaps in service delivery remain. Innovative methods of service delivery, such as the use of web-based mental health 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 youth, where our traditional services are not engaging them and with aboriginal populations, where cultural barriers and remote geography continue to prevent access to help.

Internet based applications have been shown to be effective in reducing depressive symptoms. Accessing mental health services online has met with success in the United Kingdom, Australia and New Zealand. Funding has been provided in Budget 2011 to strengthen telemental health services and develop an interactive website that will provide some online services. The Department of Health and Community Services has worked with a New Zealand based group to inform what a NL initiative might entail. The Advisory Council has been actively involved in the consultation process that the New Zealand group conducted. The Council met as a group with this consultant group and several members met individually with them. Advice has been provided on stakeholders that should be included into the future, as well as on the importance of grassroots community involvement to ensure the needs of rural, remote and aboriginal populations are met.

This issue supports the strategic direction of “Access to Priority Services”. Council’s mandate is to advise the Minister how government can best develop policy to improve and/or prevent mental health and addictions problems, as well as advise on the development of evolving programs, services and support infrastructures. The identified innovative ways of reaching youth and rural areas are expected to positively impact access to services.

**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.

**Measure:** Advised on the implementation

**Indicators:**

- Meetings held
- Informed the provision of advice with consultant reports
- Submitted ministerial correspondence
Objectives:

By March 31, 2012, the Provincial Mental Health and Addictions Advisory Council will have participated in the planning of web based mental health and addiction services.

Measure: Participated in the planning of web based services

Indicators:

- Advised project coordinators
- Advised external consultants
- Provided advice to decision makers related to this initiative

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.

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.
Appendix A: STRATEGIC DIRECTIONS

Strategic directions are the articulation of desired physical, social, or economic outcomes and normally require action by or involvement of, more than one government entity. They summarize the outcomes desired for the health sector and are communicated to entities that plan and report in collaboration with the Department.

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 many of the illnesses that currently 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.
### The Population Health Strategic Direction is Addressed by the Provincial Mental Health and Addictions Advisory Council’s Focus Areas of the Strategic Direction 2011-2017

<table>
<thead>
<tr>
<th>Focus Areas of the Strategic Direction 2011-2017</th>
<th>Activity plan</th>
<th>Operational plan</th>
<th>Work plan</th>
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<tr>
<td>Wellness</td>
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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:

<table>
<thead>
<tr>
<th>Focus Areas of the Strategic Direction 2011-2017</th>
<th>The Strategic Direction Access to Priority Services is Addressed by Provincial Mental Health and Addictions Advisory Council’s</th>
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<td>Mental Health And Addictions Services</td>
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## Appendix B: PROVINCIAL MENTAL HEALTH AND ADDICTIONS ADVISORY COUNCIL MEMBERSHIP 2010-2011

<table>
<thead>
<tr>
<th>Name</th>
<th>Current Experience</th>
<th>Full Contact Information</th>
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</table>
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<thead>
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<th>Contact Information</th>
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</table>
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