

Collaboration for Addiction and Mental Health Care: Best Advice

The Issue

Mental health concerns, substance use issues and physical problems often occur together.^{1,2} However, very few people seek help from specialized services.^{3,4} Many of those who do, receive multiple services from different programs that often do not communicate with one another.⁵ An emerging body of literature is showing that collaboration among addiction and mental health treatment providers, as well as with primary care, can improve the delivery of services and support to those in need.

To build support for collaboration for addiction and mental health care, the Canadian Centre on Substance Abuse, the Canadian Executive Council on Addictions and the Mental Health Commission of Canada brought together a scientific advisory committee with expertise in addiction, concurrent disorders, community mental health and collaborative mental health care to review the research literature related to collaboration. Stakeholders including researchers, administrators, treatment providers and individuals with lived experience participated in a Leaders' Forum in May 2013 where major themes from the research were discussed and validated or expanded upon. The literature review and the discussions at the Leaders' Forum informed the development of the full report.⁶

The report discusses multiple models of collaboration, all of which touch on the need for meaningful linkages based on trust and exchange among participants and the involvement of multiple sectors to address all levels of client need. However, the evidence on how to achieve effective collaboration between addiction and mental health services is not as robust as could be hoped. There is little information on guidelines for evaluating collaboration among these services and its impact on client outcome. The report attempts to fill this gap by providing, based on the existing literature, an overview of key considerations for successful collaboration at the service level. The report also includes illustrative examples of the application of collaborative principles in the delivery of treatment for those affected by both substance use and mental health issues.

Key Findings

Benefits from Collaboration

Collaboration among mental health, addiction and primary care providers can benefit individual's seeking help by ensuring that no matter which service they access they will be connected to all the services they need in a coordinated and seamless way. Coordination among services will add clinical value by allowing for multiple health concerns to be addressed at once and ensuring that care will continue throughout transitions between services and through to recovery. Transitions among these services could be aided by linkage managers or system navigators to prevent clients from getting bounced around or lost in the system. Collaboration will also allow for any service provider to engage in screening to detect concerns early,^{7,8} allowing for any door into the treatment system to be the right door for an individual to access help. Collaborative efforts will increase healthcare consumers' satisfaction with the services they receive and lead to better outcomes.



Collaboration is also beneficial for those providing services as it allows for a greater capacity to treat individuals with complex conditions. Furthermore, it can facilitate cross training and skill development through opportunities to observe and mentor individuals in other related practices. Collaboration can lead to improved policies and practices across the care continuum that enable clients to receive faster and more comprehensive services, which can ultimately result in reduced readmissions and overall costs to the healthcare system.⁹ Indeed, individuals living with concurrent mental illness and substance use disorders were more likely to have longer stays and be readmitted to the hospital, as compared to individuals living with mental illness only.¹⁰

Considerations for Action

A key consideration in any collaborative initiative is the inclusion of the client and his or her family in planning the client's care. The views of those with lived experience, if incorporated at all levels, including design, delivery and evaluation, will ensure that treatment is client-centred and responsive to the needs of this population. The following sections present six other key considerations for action to support collaborative work.

Supporting Change

Collaboration among services can require changes at different levels of an organization, which can be difficult for everyone involved. An organization can improve the success of its implementation by adopting a formal change management strategy that addresses barriers and readiness for change at multiple levels of a system.¹¹ A change strategy should include a vision for collaboration that is shared by all members and allow time for those involved to adapt to the change. Leadership, clear roles and responsibilities, and shared information systems are some of the supports that can make transitions easier. Regulations and payment mechanisms might also need to be altered to facilitate collaborative efforts among service providers. For example, consultations among multidisciplinary team members and other communication activities among providers are not usually reimbursed under typical fee-for-service care structures.

Engagement and Relationship Building

Multidisciplinary team members need to share trusting and meaningful relationships to work together on improving patient outcomes. Relationships among service providers and across sectors are fundamental to successful collaborations and should be fostered by finding opportunities to build connections among the key stakeholders in the initiative.¹² Providers can encourage the engagement of individuals with lived experience, as well as those supporting their journey to recovery, in planning their care. Funders and policy makers should give priority to initiatives that seek to develop relationships across multiple sectors and jurisdictions, including service providers, individuals with lived experience and community members.

Screening and Assessment

As individuals living with addiction and mental health concerns often turn to community and primary care providers when they seek help,^{13,14} it is important that educators, primary healthcare providers and health professionals in the hospital, and the social and justice sectors are aware of the co-occurrence of these health issues. These professionals should be able to perform screening, brief intervention and referral (SBIR) to more appropriate services and to respond effectively to the complex needs of their clients. Alternatively, addiction or mental health professionals can be located in primary and community settings such as hospital emergency departments^{15,16,17} and schools,^{18,19} so that they can perform screening and assessments when necessary. The capacity to perform SBIR can lead to earlier detection



of problems, more immediate interventions and improved health outcomes for the individuals, which can save costs for the health and judicial systems, and society at large.

Treatment and Recovery

To achieve better outcomes for those suffering with addiction and mental health concerns, services from primary to specialized care work together to improve the health and functioning of the whole person. A comprehensive view can put clients on a personal journey to recovery where they can make healthy changes in their lives, respond to their own needs and establish their own goals. Treatment is most effective when approached holistically with multiple collaborating experts. Clients should be able to direct their own treatment (person-directed), which should be based around their strengths and needs (client-centred).^{20,21,22} This design for treatment recognizes that outcomes are critically dependent on client participation.^{23,24}

Beyond collaborating with clients, treatment providers must collaborate with one another throughout the integrated care pathway, which outlines the anticipated course of care. These pathways provide guidance on the roles and responsibilities of all team members and the appropriate time for services to be offered to meet standards of care while also allowing additional care to be offered to clients who need more support. Recovery is dependent on multiple services to ensure that all client needs are addressed. A system navigator can help connect the client to other services, including housing, employment, education, nutrition and peer support. Providers must clearly understand their roles at each point to enable the goals of the collaborative pathway to be met. Opportunities for reflection and evaluation of the pathway are important so there can be continuous improvement and so that all doors to treatment and support are the right doors.

Building Capacity for Collaboration

Collaboration requires increased capacity in both human resources and technology. Service providers might require specific knowledge and skills not commonly provided in training curricula.^{25,26} Gaps in knowledge and skills could be addressed by increasing cross-disciplinary education and by engaging professional groups to support changes in the addiction and mental health care scope of practice to encompass collaboration and training in both fields.

Technology can benefit clients by allowing for alternative delivery methods for primary care and providing access to services where there are shortages of healthcare professionals.¹² Telemedicine allows consultations to be provided to underserved jurisdictions. Web-based self-management tools and communication through telephone, text and email enable clients to receive support through technology as an alternative or supplement to face-to-face visits. Technology also enhances collaboration among service providers by allowing for the efficient flow of information. Electronic records enable the management and sharing of client information, although this ability raises privacy concerns.

Evaluation

There have been some evaluations that support the benefit of collaboration for mental health and primary care, as well as addictions consulting and SBIR. However, additional evaluations are needed to gather evidence of the efficacy of collaborative efforts in addiction care and support, and to provide an opportunity for on-going improvement. Evaluations may also be able to provide information on the cost-offset, cost-effectiveness and cost-benefit analysis of collaboration among mental health and addictions sectors. The results of collaboration evaluations need to be shared widely to contribute to the body of evidence and to inform future collaborative efforts of the factors critical for success and of those factors that impede success.



Call to Action

The Canadian Centre on Substance Abuse, the Canadian Executive Council on Addictions and the Mental Health Commission of Canada are committed to continuing with this initiative to enable collaboration between addiction and mental health services and will promote this report at the pan-Canadian level. Uptake of the report and the advice it contains will be encouraged through outreach activities and conference presentations, as well as by developing knowledge exchange resources, such as a speaking toolkit, and an online repository of information and case examples. Government ministries, health professional associations, healthcare organizations, and consumer and family advocacy groups also share a responsibility to promote this document and to advocate for enhanced collaboration.

Individuals and families with lived experience are encouraged to share this document with their service providers and impress upon them the need for a more collaborative environment to improve their outcomes and overall recovery. Service providers can share this document with other team members to assist in discussions of strategies to incorporate more collaborative practices in the delivery of services to those with co-occurring addiction and mental health issues.

Viewing the care pathway from the perspective of a client will help determine if mental health, addiction and other health needs are being addressed by the service, and if clients can feel they have turned to the correct source for help. This client walk-through of services could also be informed by collecting and reviewing client stories from other services. Furthermore, service providers can emphasize to their professional associations the importance of collaboration by sharing this report and they can encourage discussions of support for collaboration at the jurisdictional level.

Ultimately, more information is needed on systematically developing and evaluating collaborative efforts to implement effective strategies that improve health outcomes. This document addresses the knowledge gap by providing advice both from the literature and from those with practical experience to be considered when implementing collaborative practices in the addiction and mental health sectors. A continued commitment from professionals across sectors and levels to support and advocate for collaboration at the client level amongst mental health and addiction services will ensure that individuals dealing with these concerns obtain the best outcomes possible and in a more comprehensive and timely manner.

Additional Resources

- A Systems Approach to Substance Use in Canada
- Systems Approach Workbook
- Competencies for Canada's Substance Abuse Workforce

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The Canadian Centre on Substance Abuse changes lives by bringing people and knowledge together to reduce the harm of alcohol and other drugs on society. We partner with public, private and non-governmental organizations to improve the health and safety of Canadians.

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