
CLINICAL NAVIGATION AT BLUE HILLS CHILD & FAMILY CENTRE

Journey Towards Partnering
with Families to Provide
Meaningful Services as They
Need Them

Stacey MacNeil, Clinical Manager
Lisa Chotowetz, Quality Assurance Coordinator

Simone Shindler, Clinical Supervisor
Samantha Cohen, Clinical Navigator

Today's Presentation

Who We Are:

Blue Hills Child and Family Centre

Today we will walk through our vision and journey toward a bold new service initiative to support families accessing a range of meaningful services in a more timely way.

Agenda: What Blue Hills' Clinical work is based in, organizational service-redesign, program development, early implementation, our learning journey

What's your Vision?

Foundations that Form all of What we do at Blue Hills



We are value-based and driven organization that aims to live the following daily:

Inclusivity, Integrity, Dignity, strength-based, ethical, transparent and self-reflective practices

With each family that we serve we consider the following theoretical constructs and they support our collaborative formulation and treatment planning:

Trauma Theory, Child Development, Neurobiology, Attachment, Systems Theory, Family Systems, Milieu Theory, Group Process Theory, Psycho-Education and Cultural Competence and Sensitivity

Impetus for change of Service Flow and Structure

- Wait for Counselling and Therapy up to 3 years for some families
- Two significant waitlists - for Brief Therapy and for Counselling and Therapy
- Adding services like Single Session Therapy and Groups to families waiting did not have a significant impact on the waitlists
- Desire to continue to build better services based on research indicating Brief and Goal-oriented services have significant impact on problems families come to seek counselling for
- Paradigm shift away from ongoing counselling as the “golden nugget” balanced with recognition of the level of need we serve

Family Experience of Previous Service



Organizational Service Redesign

Aim:

“To partner with our families and enable them to access and choose from a continuum of quality mental health services when and as they need them.”

Goals:

1. Increase the engagement and participation of families in all aspects of service and policy
2. Improve the service experience of families seeking mental health services
3. Provide a continuum of quality, evidence-informed services and programs that family can access and choose for them and their children
4. Re-position long term therapy as one of a suite of value-based services for children, youth, and their families
5. Improve accessibility to services as they are needed while reducing the wait times

Timeline of Program Development

- February 2015, broad agency visioning day
- Development of Design Teams July 2015
- Recommendations and prioritizations January 2016
- Navigator Working Group formed -Feb/March 2016
- Clinical Navigators hired through participatory process - May 2016
- Family feedback on Clinical Navigation Service - Summer 2016
- Launch -September 2016

Goal of Clinical Navigation Program

IF WE →

Co-develop collaborative helping maps throughout service experience

Refer and support access to right service at the right time

Establish a therapeutic alliance

Monitor progress in relation to service plan

WE EXPECT →

Families have a clear idea of their desired outcome of service

Wide variety of services will be accessed

Clients will be engaged

Clients will be supported throughout their service experience

Time in active service will be goal focused

Service accessed will match need

SO THAT →

More responsive programming

Families report the vision is achieved/ on the right track

System flow is efficient

Families feel empowered

Outcomes are positive

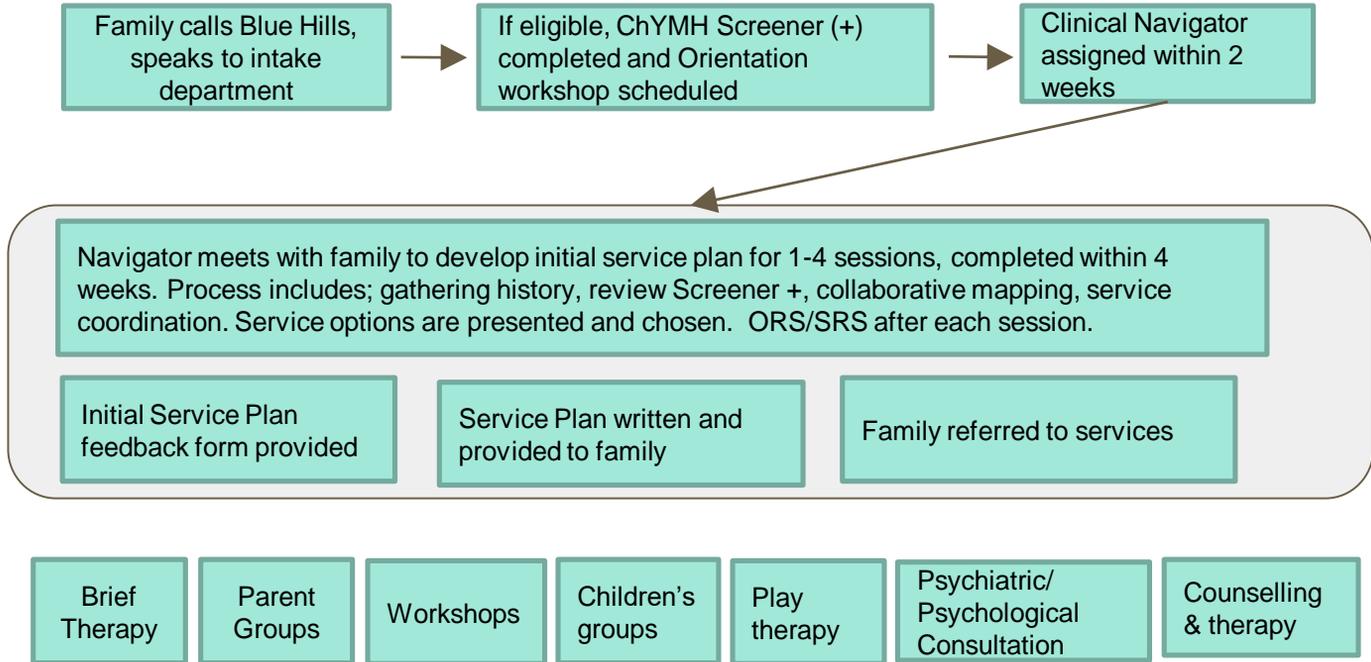
Services provided are the right fit

Families report collaboration





Initial Stages of Service



A Navigator's Experience of the Initial Stages



A Place to Start



Collaborative Engagement

William (Bill) Madsen Mattering - Agency wide training on collaborative engagement, cornerstone of the navigation process - travelling with families as they journey through the system as planning partners.

Mattering is a process of interacting with others in a way that they feel welcomed and honoured and experience themselves as active participants with influence over our work together.

Relational Stance of an Appreciative Ally - the heart of our work

Shift from “expert” repairing dysfunction to “ally” helping families envision and develop preferred directions in life.

Families experiencing helpers as in their corner, on their side or standing in solidarity with them

Respect, Connection, Curiosity, and Hope

“I think families feel a sense of relief when they meet with the Clinical Navigator knowing that there is going to be someone walking with them on their journey, who is going to help them navigate.”

Clinical Navigator

Future House



Where do you hope to be one year from now?

What needs to happen for you to move one step closer to your future house?

Where were you at the very beginning of this process?

What's already happening to get you this far along the path?

Collaborative Helping Map is used during service planning as a way to guide thinking around challenging situations. The map helps families, along with their Clinical Navigator, to think their way through complex situations, helping families draw on developing abilities, skills and wisdom to pursue preferred directions in life.

Collaborative Helping Map

Vision

- Where would you like your family to be headed in your life?
- How will you/we know you are on track towards reaching your preferred vision?

Obstacles

- What gets in the way of that?

Supports

- What contributes to that?

Plan

- What needs to happen next?
- What services to access at Blue Hills?
- External services/supports?
- Things the family can do/keep doing at home

Vision

- To embrace our own mistakes and learn from them. To embrace the values of forgiveness and acceptance.
- **How will they know they are on track?** It will be more peaceful at home and people would be happier, there will be fewer arguments.

Obstacles

- Child shared that there are several arguments between her parents that upset her.
- Parents share that there are often disagreements between them about the way to parent and teach their daughter, sometimes this is based on their differing cultural values.
- Mom shared that she believes her daughter has learned how to cope by observing some the ways her parents interact with each other

Supports

- Family has strong Christian values that they try to teach; honesty, forgiveness, love, kindness.
- Family enjoys spending time together doing fun activities when able (i.e. movie nights, completing puzzles).
- The whole family demonstrates a lot of care for one another
- Parents are attending marriage counselling
- Parents support child to openly communicate with them and the child will go to them when she is struggling

Plan

- The family will participate in the Brief Therapy program to explore different communication tools and strategies with the hope to reduce conflict between them.
- For the parents to continue attending marriage counselling
- The family have shared that they would like to increase the number of opportunities to engage in play together in an effort to focus more on positive interactions with one another

Experience of the Mapping Process



A Family's Vision



“To be honest, I am not really sure what my exact vision was. I knew my son was struggling. I knew our family was really just at the point where we didn't know what to do for my son. So my goal was just call an organization; can you help me, what services do you have available on anxiety because we met with psychiatrist, who just thought medication was the right route, and that didn't sit well for me. I didn't think that we are at that point. and I really want to work through the issue from a more cognitive approach. so I didn't really know , so I love that Blue Hills helped me figured out by just listening to me.”

The Journey Forward From the Vision



Service After Initial Menu Options Accessed

Connect with family after service activity – review collaborative map and families response to service (within 2 weeks of service ending)

Continue to monitor risk, offer support when needed. Minimum monthly check-in if waiting for active service

ChYMH Screener+ completed after service plan and/or if wait for services reaches 3 months

Collaborative decision for further service or discharge from Blue Hills. Further service includes revision of service plan

Discharge process includes referral to other services if applicable, 2 month follow up after transition out of service

In Service

Menu Options

Brief Therapy, MIM, Booster Clinic, Goal Focused Counselling and Therapy, Play Therapy, Theraplay, Psychiatric Consult, Psychological Assessment, Groups and Workshops

Warm transfers - external referrals

In Service Process

Monthly or as needed formal “check-ins”

Service Plan review at the close of recommended services, or at a minimum every 3 months

Revise Service Plans as needed

Attend case conferences, systems meetings as needed



Slowing Down to Speed Up

- Supporting the family to step into mental health services in a different way- impact of the clinical approach used.
- Supporting the system – lower wait-times



Tools Used to Support the Navigation Process

The Child and Youth Mental Health Screener (ChYMH Screener+) is a standardized tool that provides a summary of your needs and strengths which in turn supports decision making and choice about what services at Blue Hills may best meet the needs of your family. The tool itself supports the gathering of important information across multiple domains or areas of functioning.

Session Rating Scale (SRS) is completed at the end of a session to assess your overall therapy experience. The SRS allows you and your therapist to have ongoing discussions of the helpfulness of the therapeutic interventions used, and to address any concerns as they may arise.

The Outcome Rating Scale (ORS) is an outcome measure that allows for the tracking of where you are at, how you are doing, and whether things are changing or if they are not. It allows us to determine whether the navigation or counselling is being helpful, so that we can do something different if it's not helping. It also is a way to make sure that your perspective stays central and that we are addressing what you think is most important.

Navigation Documentation

Initial Service Plan - developed within 4 weeks of first meeting the family, service decisions stemming from the Collaborative Helping Map and assessment tools.

Revised Service Plan - revisions occur anytime a new service is added, changed, external resources are part of recommendations.

Transition Out of Service Plan - Service closure - referrals, recommendations.

2 month follow up phone call check in template - Has the family continued to maintain their preferred vision, have they maintained and made connections that support their vision, and are there any challenges that they are continuing to work through - **Closure or refer back into service**, internal or external.

Evaluation of Clinical Navigator Role

Process Evaluation, focusing on “are we doing what we said we would be doing”

How will we know we are on the right track?

- Vision will be identified and plan outlined collaboratively
- Outcomes indicate an increase in overall functioning
- Variety of services are used
- Partnership developed with families
- Increased access to services - short waitlist (no longer than 4 months)
- Families have a choice

Some Early Results

- Average wait for Clinical Navigation is 19 days.
- Average wait for brief is 35 days.
- 2 months for ongoing counselling and therapy. During this wait many clients accessed workshops
- Average duration of those closed is 115 days
- 50% referred to brief therapy (3-6 sessions only)
- 60% received multiple services – i.e. brief, workshop, group
- 30% referred to ongoing counselling and therapy
- 83 % of families report that the initial service plan was completed collaboratively
- 82% of families report that the process felt collaborative

Obstacles That We Have Experienced Along the Way

Agency has been through significant change

Continual new learning (incorporating the new with the previous)

Staff worries - transitioning people out of previous work

Role clarity

Work with other teams within the agency, transitions, and communication with wider community

Building as we go

Systems - communication to stakeholders “buy in”

Model fidelity

Supports We Have Experienced Along the Way

Senior leadership vision and full agency support throughout

Course correction - flexibility

Collaborative work together - Parent volunteer feedback

Training

Strong clinical supervision

Connections with other teams

Our outcomes demonstrate the effectiveness of the service model

Continue Building based on feedback received directly from families

Many of the key processes in the MOMH framework are supported through
Clinical Navigation

A Youth's Perspective



Stories from field



“As a Clinical Navigator, it’s a privilege to facilitate these kinds of discussions among families where we encourage them to think about more than the problem and look beyond the challenges they are facing”

Lessons Learned

1. Clarity of role -Intentionality and grounded Vision
2. Written , documented service flow and procedures
3. Connections across teams (honouring principles of transition)
4. Time, effort and attention to process when collaboratively developing a new program
5. Data gathering has been instrumental in moving the program forward
6. Communication, communication, communication (internally and externally)!

Continued Learning

1. Continued steps towards increased clarity
2. Model fidelity
3. Grounding in the vision and the goals
4. Communication with stakeholders (including parents)
5. Increased attention clinically to the process while in service and transitioning out
6. Tracking outcomes and consideration of new evaluation questions

Family Reflection on Value Added



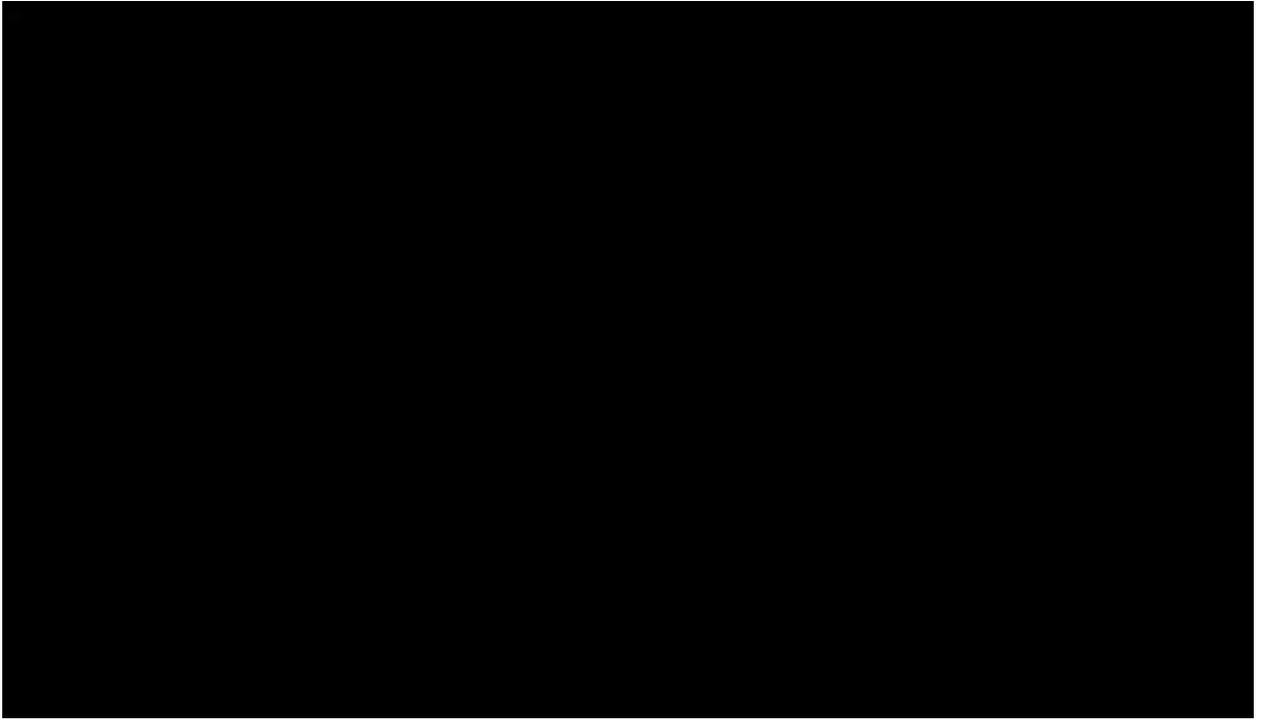
Vision Achieved?

Review the vision for today

Have we met this?

Questions?





**Thank you for coming on this journey with us
this morning!**

