

Subject: South West LHIN Peer Support Strategy Update

To: **South West LHIN Municipal and Provincial Elected Officials**

From: Michael Barrett, CEO, South West LHIN

cc: Lori Van Opstal, Interim Board Chair, South West LHIN

Date Prepared: March 31, 2017

Purpose

The purpose of this briefing note is to provide a status update on the implementation of the South West LHIN Peer Support Strategy. The South West LHIN recognizes peer support as an essential and valued component of a client-centered, recovery oriented system of Mental Health and Addictions (MH&A) care.

Background

The Peer Support Strategy vision is to create a connected, seamless system that provides consistent and equitable peer support built on the best available evidence across the South West LHIN. There is a pressing need to better integrate existing Consumer Survivor Initiatives (CSIs)/Peer Support programs with community MH&A services to improve client access to a coordinated range of peer services and supports, and ensure that individuals with mental health and addiction challenges are able to access high quality peer support programs into the future. Integration will also address identified risks and challenges related to governance, financial controls and human resources, and will enable individuals with lived experience to focus on peer support programming and the delivery of peer services, while relieving the challenges associated with sustaining a separate organization.

Currently, the South West LHIN provides funding (just over \$1M) to six CSIs organizations/Peer Support programs:

1. Phoenix Survivors Perth County
2. Psychiatric Survivors Network of Elgin
3. Oxford Self Help Network
4. Can-Voice (London Middlesex)
5. Consumer/Survivor Development Project provided by Hope Grey Bruce Mental Health & Addiction Services
6. Peer Support program provided by Canadian Mental Health Association (CMHA) Huron Perth

CONNECT for Mental Health is a non-LHIN funded peer support program providing community and hospital based programs and services in London. Peer support is associated with a reduction in hospitalization for mental illness, reduction in length of hospital stays, improved social supports and quality of life. In 2016, the Ministry of Health and Long-Term Care committed one-time funding to support hospital-based peer support. These one-time funds were allocated directly to CMHA Middlesex, who used them to purchase services from CONNECT for Mental Health for 2016/17 to provide hospital-based peer support in London.

Strengthening Peer Support Services

The need for changes to the current peer support system have been highlighted by the LHIN since 2011. Work on the overall South West LHIN Peer Support Strategy began in 2014. Through the South West LHIN Peer Support Strategy, the LHIN began working with the leadership and governance of CSIs/Peer Support programs and MH&A providers in December 2015 with a focus on enhancing peer support, through integration, at the sub-region level (Grey Bruce, Huron Perth, London Middlesex, Oxford and Elgin).

The peer support model for the South West LHIN (referenced in the table below) was agreed to by both peer support and MH&A providers in September 2016. Following agreement on the model, work began at a sub-region level to identify integration opportunities between peer support and lead MH&A providers, building upon the strengths of the existing peer support programs.

The rationale for integrating peer support programs into lead MH&A organizations in each sub-region is to improve access to services and provide a better experience for clients with MH&A concerns by strengthening peer support services across the South West LHIN. The following table outlines how peer support services will be improved for clients as a result of integration into lead MH&A organizations:

Current State	Future State
Inequitable and inconsistent peer support program delivery between sub-regions	→ Availability of peer support wherever individuals are in their recovery journey including locations such as the community, hospital, outpatients, work and school, as well as wherever they live - urban, rural or remote locations across the South West LHIN; Defined peer support program standards
Disconnect and lack of referrals to and from other MH&A health service providers	→ Peer support will no longer be provided by stand-alone grass roots organizations; Coordinated services and resources between peer support and other MH&A health providers
Variance in peer support roles and lack of formal training	→ Defined peer support roles and formalized training standards and resources based on promising practices; Provision of continuous training opportunities
Inconsistent application of governance standards by CSI Board of Directors	→ MH&A Lead Agency Board of Directors will be accountable for the newly integrated peer support program; Boards to include members with lived experience. Opportunity for peer members to participate in peer program advisory structures to provide advice and support to the Peer Manager

Current State	Future State
Small, marginalized CSIs/Peer Support programs; Inadequate monitoring and evaluation	→ Stabilized peer support services embedded in the MH&A continuum of care and within sustainable peer support hubs and organizations; Monitoring and evaluation of peer support services; Implementation of client satisfaction tools
CSI Executive Directors are accountable for administrative and back office functions reducing focus on peer programming	→ Administrative cost savings to be reinvested to expand programs and services for peer members as a result of integration into the lead MH&A agency; Lead agency implementation of marketing and communications plan

Progress to Date by Sub-Region

Huron Perth Sub-Region

A Formal Notice of Intended Voluntary Integration was submitted to the South West LHIN by Choices for Change (CFC) and Phoenix Survivors Perth County on December 16, 2016. Pending the integration with Phoenix, CFC will provide peer support services within Perth County and Phoenix will cease to operate as an independent organization. CMHA Huron Perth will continue to provide peer support services within Huron County. Although CMHA Huron Perth is not a formal partner within the integration submission, they have been and will continue to work with CFC and Phoenix to ensure service coordination within the sub-region. On April 1, 2017, Peer Support program accountability previously held by Phoenix will be integrated with existing programs and services of CFC in Perth County.

Oxford Sub-Region

A Formal Notice of Intended Voluntary Integration was submitted to the South West LHIN by CMHA Oxford and the Oxford Self Help Network (OSHN) on December 20, 2016. The integration will result in the dissolution of OSHN as a separate entity and the Peer Support program will merge into CMHA Oxford which serves as the lead MH&A organization for the Oxford sub-region. On April 1, 2017 Peer Support program accountability previously held by OSHN will be integrated with existing programs and services of CMHA Oxford.

Grey Bruce Sub-Region

Peer support programming within the Grey Bruce area is provided by Hope Grey Bruce Mental Health and Addiction Services. The existing model within the Grey Bruce area has served as a best practice example within the South West. While the peer support program has not been offered through a stand-alone peer run agency, there has been significant peer leadership and support to enable an effective grass roots approach that has been well received by consumers of mental health and addiction services. The South West LHIN continues to explore opportunities to strengthen programming within this already integrated model of service delivery. Hope Grey Bruce Mental Health and Addiction Services remains the MH&A lead agency for this sub-region.

London Middlesex Sub-Region

Planning discussions continue in London Middlesex where there has been a number of challenges associated with facilitating the integration of Can-Voice peer support services into CMHA Middlesex, which has been identified as the MH&A lead for this sub-region. A Board to Board engagement session facilitated by South West LHIN Board members was held with Can-Voice Board representatives on December 19, 2016. The engagement session was productive

and specific next steps were identified to continue to advance integration plans. On January 16, 2017, a meeting facilitated by South West LHIN Board representatives was held with Can-Voice and CMHA Middlesex Board members to continue integration planning. Two scheduled February meetings were cancelled by Can-Voice. On March 6, 2017, the South West LHIN Board representatives met with Can-Voice Board representatives to present a proposed approach to the integration of Can-Voice into CMHA Middlesex and to discuss next steps. On March 17, 2017, Can-Voice notified the South West LHIN that they do not wish to proceed with a voluntary integration with CMHA Middlesex.

Elgin Sub-Region

Initial planning discussions continue in Elgin. Psychiatric Survivors Network (PSNE) currently provides peer support services and CMHA Elgin has been identified as the MH&A lead for this sub-region. Board to Board engagement sessions facilitated by South West LHIN Board members were held with the Psychiatric Survivors Network of Elgin (PSNE) on December 19, 2016. The engagement sessions were productive and specific next steps were identified to continue to advance integration plans. Four scheduled meetings occurred from January to March 2017. Another meeting will be scheduled for mid-April to continue integration planning with PSNE and CMHA Elgin.

Next Steps

The South West LHIN is committed to working with CSIs on implementing the Peer Support Strategy within each sub-region as this will provide an opportunity to offer integrated and accessible peer support services to support the ongoing recovery and well-being of people with lived experience. Standardized peer support training will be provided for all organizations by the end of March 2017 and ongoing joint education opportunities will continue as part of a regional peer network. Implementation of the new model will begin in Oxford, Huron Perth and Grey Bruce as of April 1, 2017.

It is anticipated that decisions will be required from the LHIN Board of Directors regarding the London Middlesex and Elgin peer support integrations in either April or May 2017. It is further expected that the integrations in London Middlesex and Elgin will be complete by the end of June 2017 or shortly thereafter. If integration agreement cannot be reached in London Middlesex and/or Elgin, the LHIN may exercise our funding responsibility and terminate the Can-Voice and/or PSNE Service Accountability Agreement sometime in fiscal 2017/18 and move funding to the identified lead agency to provide peer support services. Both organizations would have the option to fundraise and seek out other funding sources to continue to provide their current programs without LHIN funding.

Resources

Please visit the South West LHIN Website for additional information on peer support
<http://www.southwestlhin.on.ca/goalsandachievements/Programs/MentalHealthAddictions.aspx>

For additional information please contact:

Kelly Simpson
System Design and Integration Lead
South West LHIN
Kelly.simpson@lhins.on.ca
519-672-0445

For media inquiries please contact:

Ashley Jackson

South West Local Health Integration Network

Ashley.jackson@lhins.on.ca

519-640-2604 (cell: 519-854-8808)