

Breaking Down Barriers

How Two Organizations Joined Forces to Improve the Mental Health Needs to Rural Youth



Your Presenters...



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Profile – North Perth FHT

- ▶ Practice leader for rural health in Ontario!
- ▶ One building includes 10 physicians and their staff, as well as FHT allied health
- ▶ FHT Staff include:
 - 3 RN's
 - 4 RPN's
 - 1 Social Worker
 - 1 Mental Health Counsellor
 - 1 Dietitian
 - 1 Pharmacist
 - 2 NP's
 - 1 Youth Addiction Worker



North Perth FHT – Children’s Mental Health

- ▶ Children and Adolescents 18 & under
- ▶ Provides the following services:
 - Individual and family counselling
 - Parent consults
 - Community outreach
 - School case conferences
 - Consultation and education to our local schools
 - Programs and workshops that are offered to all community members



Profile – Huron-Perth Centre

- ▶ Funded by the Ministry of Children and Youth Services and the MCYS Youth Justice
- ▶ Children's Mental Health Agency that provides therapeutic services to children, youth and their families who are experiencing social, emotional, and family problems that interfere with their quality of life.
- ▶ Self referral to any child/youth living within Perth or Huron Counties



Huron-Perth Centre – Services Offered

- ▶ Individual & Family Counselling
- ▶ Treatment Groups
- ▶ Psychological Services
- ▶ Access to Psychiatric Services
- ▶ Intensive Services
- ▶ Youth Justice Services
- ▶ Birth to 6
- ▶ Section 23 Classrooms
- ▶ Treatment Foster Care Partnership
- ▶ School Based Outreach Services
- ▶ Diversion Program
- ▶ Youth Justice Committee
- ▶ Youth Justice Mental Health
- ▶ Specialized Adult Programs



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OUR STORY...





PORTUGUESE



DUTCH



CANADIAN



GERMAN



IRISH





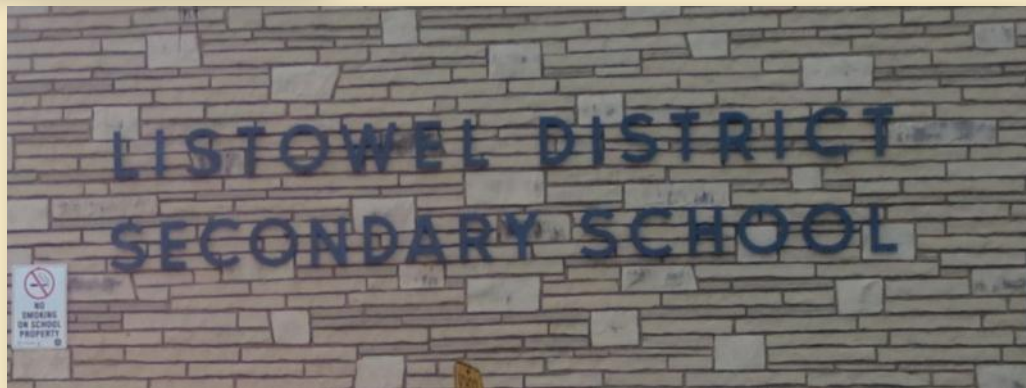






















**HURON-
PERTH
CENTRE** *strengthening individuals
& families since 1977*

**North Perth
Family Health Team**
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Stats and Facts

1 in 5 children in Ontario, between the ages of 3 and 17, have a diagnosable mental health disorder

By 2020, mental health problems among children and youth are predicted to increase by **50%**

Research shows **80%** of all psychiatric disorders emerge in adolescence, and **70%** of cases can be resolved with access to treatment – yet only **1 in 5** children who need help actually get it



History of the Collaboration

- ▶ Born April 2009
- ▶ Two separate agencies providing the same service
- ▶ Opportunity to enhance as opposed to duplicate



Child/Youth with Mental Health Need who is a rostered patient of the NPFHT and lives in Perth/Huron County

Will access either:

Huron-Perth Centre for Children and Youth

Self-Referral from Child/Youth and/or Guardian

Intake form (Demographic & Reason for Referral) Completed by Reception

Intake Assessment completed by Therapist and file triaged (ie. Immediate service or waitlist)

Once file is 'picked-up' (either immediately or after wait-list), on-going service is provided

IF the following occurs during treatment - challenging client situation, uncertainty about services available – supportive team consultation is sought

Once end of treatment is reached, file is closed. A new referral is needed for further service.

NPFHT – Children's Mental Health Services Program

Referral through family doctor, nurse or self-referral

Appointment scheduled by client through clinic reception

Initial Assessment completed by Social Worker

Determine appropriate plan for treatment and follow-up appointments scheduled

IF the following occurs during treatment - challenging client situation, uncertainty about services available - supportive peer consultation is sought

Once end of treatment is reached, no further appointments scheduled, however future appointments can be booked through clinic reception if needed

COLLABORATION IN EFFECT!

Info provided re: HPC wait-list and availability of FHT services

Prioritized as wait-list; client can choose to be seen sooner through NPFHT

Referral deemed more appropriate for HPC

Case consultation and support provided (NOTE: no identifying information shared unless with consent)

Referral can be made to NPFHT for on-going follow-up if requested by client

Referral can be made to HPC if issues appear more chronic and long-term

Final Thoughts

Our hope in developing this collaboration was in part to provide clarification and share our work with our respective colleagues, but also to share what we have done with other communities who may be in a similar situation as us. In our work to strive towards providing better mental health services to **all** children and youth, we welcome the opportunity for others to take our collaborative agreement and apply it to their own community and organization.

Thanks for coming!



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