

# Promising Practices

December 2017

Innovative practices & initiatives from around Ontario



## holistic crisis planning

The Region of Peel (Brampton, Caledon and Mississauga) is the most ethnically and culturally diverse region in the GTA; however, this diversity is not reflected in those using mainstream mental health and addictions services.

The Peel Service Collaborative was a group of service providers and system planners, representing over 60 organizations, dedicated to making urgent care pathways more effective. They observed that many racialized youth were not using formal mental health and substance use services, despite their need for them. These youth were also over-represented in hospital emergency departments, as well as justice and child welfare systems.

Diverse youth in Peel were consulted and identified that mainstream services could be more culturally appropriate, inclusive, or client-centered. The youth surveyed also indicated that they often rely on informal supports such as faith leaders when experiencing crisis; however, these supports indicated that they needed to build their skills and knowledge to better understand mental health issues and help youth seeking assistance.

With help from the Provincial System Support Program at the Centre for Addiction and Mental Health, the Peel Service Collaborative designed an intervention that implemented multiple initiatives in Peel. The combination of these initiatives were intended to bridge the gap between formal and informal supports in Peel region and build a system that better serves the needs of the diverse population in the region.

### Our approach

To address the challenges identified with mainstream services, the Service Collaborative implemented Holistic Crisis Planning (HCP) across the region. HCP aims to reduce unsafe situations for, and the likelihood of harm to individuals experiencing mental health and addiction issues, and their families. To the degree that was not commonly practiced, HCP intends to create a deliberate shift to a person/family-centered approach to safety planning. HCP was originally developed by Kappy Madenwald of Madenwald Consulting, and was adapted to meet the unique needs of the Peel community.

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The approach is ecological and encourages the provider to collaborate with families to ensure their voice and choice is authentically reflected in the plan. An individual or family's preference of formal versus informal supports is carefully gauged and incorporated. Informal supports are understood as a potential key factor in wellness and recovery.

The Holistic Crisis Planning approach tends to think about risk a bit differently than some of the other crisis planning approaches. The focus is not on reducing the risk from the perspective of the service provider (e.g. "I feel better that they have signed a contract saying they won't harm themselves") but rather the focus is on what will actually help to support the individual in staying safer by creating an environment wherein the individuals' expertise

can flourish. This is accomplished through a strength-based, self-reflexive approach to service provision that enables the provider to create rapport and build reciprocal trust.

Since February 2014, over 400 service providers in the Peel Region have received HCP training. These service providers are now using this approach to create Holistic Crisis Plans with individuals of all ages and their families in a variety of settings, including schools, emergency departments, day hospitals, mental health and addiction agencies, and other local community service agencies. The majority of providers have reported increased self-awareness in relation to their biases and worldviews, with 81% indicating that the HCP has helped improve their relationships with clients and families.

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## What works and why?

**Family engagement** is a strong component of HCP implementation. Engaging families in crisis planning is particularly relevant given the cultures represented in the region.

The incorporation of **informal supports** enhanced the emphasis on client-centredness, which contributes to a broadening of the definition of mental health support to include the existing, relevant things in clients' lives.

*"Service users choose what works for them and feel validated ... It is empowering for them to see they have the tools to manage challenging situations/interactions." – Service Provider*

Embedding **critical reflection** in the training has strengthened the approach by prompting providers to reflect regularly on their worldview and biases. As well, there were explicit efforts to enhance capacity for challenging conversations related to this.

*"We may be unaware of some of the biases that we may be placing on these select demographics and working as a small group we were able to expose a lot of that. I imagine some people felt uncomfortable because it was one of those hard discussions but having those conversations was definitely helpful." – Service Provider*

Making HCP a **standing agenda** item in organizations is part of the agency action plan, which supported the sustainability of the approach within agencies.

Co-Creation of a **breadth of resources** for providers and champions (guides, templates, train the trainer materials) helped to support implementation.

Using the **Train-the-Trainer** model supports internal sustainability and also provides opportunity for customized trainings specific to sector/agencies.

## Learnings and challenges

**Sustainability** within agencies has at times been a challenge when agencies have endured staff turnover and transitions.

*"We need someone to lead and own it; I think that's all that's needed to sustain it. The buy-in is there, people see the importance of it." – Service Provider*

**System leadership** has posed a challenge to sustainability, given that the organization initially supporting the broader cross-sectoral efforts had a limited time to support the initiative. It has proven difficult to provide a sustainable forum for cross-sectoral connections, like the Community of Interest that emerged from the HCP SCIT (Service Collaborative Implementation Team).

**Client feedback** has been a challenge for agencies. Many implementing staff have reported that attempting to gather in the moment can feel counterproductive to the approach. At the same time, asking for feedback in a more formalized evaluation about the process would yield low response rates and not necessarily be specific to the engagement in the interaction with staff implementing the approach. There was no clear decision about how best to capture client experiences.

Not all providers had opportunities for regular connection with family members. So often, **incorporating families in crisis planning across sectors** was challenging as the relationships and context for them varied.

In some settings, **bureaucratic processes paused the process of replacing old templates and forms** for crisis plans. Despite that, the process of engaging clients through those mandated items shifted for many providers.

**Conflicting system priorities** limited the potential to scale and spread the approach in the region. Many providers, particularly in adult-serving settings who were trained in the approach were not able to fully implement because of other system priorities.

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## System-level perspective

The Holistic Crisis Planning initiative fits within the larger mandate of service collaborative work by improving access to mental health and addiction support for children, youth, and families and fostering collaboration across sectors.

What stands out about this project is that it exemplifies a system improvement that was shaped with a strong focus on equity. Connecting the realities of systemic disproportionality with evidence for the effectiveness of person- and family-centred care in crisis planning has allowed this project to better meet the needs of all community members in the Region of Peel.

If an accountable leadership structure emerges with a commitment to sustainability, and an openness to thinking differently about what mental health and addiction supports; this initiative could be expanded to other services by building on existing resources and collaborating with informal supports in the community that are relevant to the target population.

## Our community partners

The partners listed below implemented HCP within their organizations and contributed to the creation of project materials.

### *Current Community of Interest Members*

Associated Youth Services of Peel  
Canadian Mental Health Association Peel  
Hope247  
Peel Children's Centre  
Peel Crisis Capacity Network  
Peel District School Board  
Punjabi Community Health Services  
Rapport Youth and Family Services  
Region of Peel  
Services & Housing In the Province  
William Osler Health System

### *Previous Community of Interest Members*

Elizabeth Frye Peel  
India Rainbow/Indus Community Services  
Peel Addiction Assessment & Research Centre



Evidence Exchange Network  
for Mental Health and Addictions