

# BACKGROUND

## E-Mental Health Demonstration Project

### Quick Facts About e-Mental Health

- In 2016, 32 million adults in Canada (89 per cent) were routinely accessing the Internet and spending upwards of 877 minutes per week online using their mobile devices.
- With more than 90 per cent of youth using the Internet, e-mental health has been identified in the literature as a promising tool for reaching this age group.
- Integrated properly, e-mental health is proving to be just as effective as face-to-face services.
- Studies show that e-mental health services cost the same or are less expensive than traditional services.
- The development of e-mental health in Canada lags behind other jurisdictions like New Zealand, Australia and the United Kingdom.

### What is e-Mental Health?

e-Mental health uses the Internet and related technologies, like phone apps, to let patients receive mental health care when and where they need it most, regardless of how close they live to their care provider.

### Benefits of e-Mental Health

- Shortens wait times
- Improves accessibility in rural/remote areas and under-served communities
- Reaches across time zones; can be accessible 24/7
- Makes it easier to get service in your language
- Is a cost-effective means of service delivery
- Tailors services to people's needs and preferences
- Is more easily scalable

### The MHCC e-Mental Health Demonstration Project

#### What is Stepped Care?

A stepped care model is a way to organize the delivery of health care so that patients receive the least intensive treatment with the greatest likelihood of improvement. Patients are continually monitored and treatment intensity can be stepped up or down depending on the level of patient distress or need.

#### The Stepped Care 2.0 © Model at the Memorial University of Newfoundland

Students at the Memorial University of Newfoundland (MUN) receive mental health care through the Stepped Care 2.0 © model for mental health. This is an integrated primary health care model that blends the stepped care model for organizing programs with e-mental health solutions for monitoring patient progress and delivering care.

Stepped Care 2.0 © provides rapid, same day, flexible access to wellness and mental health resources. The approach is aimed at empowering patients to maximize and manage their own health to the best of their ability. Patients making a first visit are seen on a walk-in basis, usually within an hour. This rapid access is important since early intervention is key to preventing more serious health and mental health conditions.

Patients are presented with the most effective and least resource-intensive options first. These can be administered in a clinic or community setting, and may include e-mental health apps or online self-help services, as well as behaviour prescriptions (for example, directing patients to volunteer for therapeutic benefit). Providers monitor patient progress with the Behavioural Health Measure-20, an electronic 20-question survey. If a person is not responding to treatment, they are escalated to the next level of care.

There are nine steps in the model—from initial consultation or single-therapy session, to online self-help resources and coaching, to intensive therapy and psychiatric consultation, ending at system navigation (where providers connect patients with suitable resources) or with a referral for specialized services.

Stepped Care 2.0 © has allowed MUN’s student mental health services to increase its capacity to serve students by more than 15 per cent while maintaining high levels of service user satisfaction.

#### **How will Stepped Care 2.0 © be implemented in community primary care clinics?**

The MHCC will work closely with Dr. Cornish and the Government of Newfoundland and Labrador to implement and evaluate various e-mental health interventions through a stepped care model in 15 community primary health care clinics. These sites include:

- Bonavista
- Centre City Team
- Clarenville
- East End Team
- Harbour Grace
- West End / CBS Team
- Grandfalls Windsor
- Lewisport
- Springdale
- Corner Brook
- Deer Lake
- Stephenville
- Curtis Memorial Hospital – St. Anthony
- Labrador Health Centre
- Labrador West Health Centre

The implementation team includes MHCC Project Lead, MaryAnn Notarianni, lead researcher, Dr. Peter Cornish, and representatives from the province’s four health regions as well as the Mental Health and Addictions Branch of the Department of Health and Community Services. An advisory committee, including researchers and people with lived experience, will provide input and guidance throughout the implementation and evaluation.

The MHCC e-mental health demonstration project will scale up the use of Stepped Care 2.0 © beyond the university setting, extending it to multi-disciplinary teams of physicians, social workers and nurses and to a diverse group of patients of varying social and economic backgrounds from both urban and rural settings. The teams will be supported and prepared to use e-mental health programming as part of routine practice as an alternative, or in addition to, treatment with medication or referrals to specialists.

The demonstration project will introduce the following e-mental health interventions:

- Mindwell
- Therapist-Assisted Online self-managed treatment
- Therapist-Assisted Online-provider assisted treatment

It will also incorporate the following interventions which are currently available through the public health system of Newfoundland and Labrador:

- Breathing Room
- Bridge the Gap
- Strongest Families

### **Evaluation**

The final evaluation report of the e-mental health demonstration project, to be distributed nationally, will:

- Examine the effectiveness of the e-mental health interventions and the Stepped Care 2.0 model, including patient outcomes and cost-effectiveness.
- Assess how effectively the Stepped Care 2.0 model reduces wait times and expands access to service.
- Identify the elements needed to successfully scale-up and integrate e-mental health interventions into the public health system, providing guidance to other jurisdictions that want to implement e-mental health programs and/or similar models of service delivery to improve care.

### **A Partnership with the Government of Newfoundland and Labrador**

The government is providing the licensing and resources to support the roll-out of Therapist-Assisted Online (TAO) as part of its action plan, *Towards Recovery: The Mental Health and Addictions Action Plan for Newfoundland and Labrador*. It is also funding the participation of staff at the 15 primary care clinics, representatives from each of the four health authorities and an e-mental health manager from the Department of Health and Community Services who will play a lead role in supporting the project.

### **Other MHCC Work on e-Mental Health**

*Changing Directions, Changing Lives: The Mental Health Strategy for Canada* recommends using technology to increase access to services and engage people in managing their mental health problems and illnesses. The strategy also recommends expanding e-mental health. The e-mental health demonstration project is the MHCC's latest initiative in this area. Previous work includes:

- An updated literature review, [RE-AIMing e-Mental Health: A Rapid Review of Current Literature \(2017\)](#), points to the opportunities and gaps in the current research literature.
- An environmental scan of current e-mental health initiatives in Canada, [Advancing the Evolution: Insights into the State of e-Mental Health Services in Canada \(2017\)](#), demonstrates the challenges in the implementation of e-mental health, identifying opportunities to build on existing strengths.
- "[Mental Health, Technology and You](#)" (2017), a resource for individuals and carers about how to use technology to access services and supports, co-created by people with lived experience of mental illness and mental health problems and service providers.

- In the last year the MHCC hosted two roundtables to raise awareness about e-mental health, share promising practices and dialogue about barriers and opportunities—one with health care leaders and service providers and another with provincial/territorial policy-makers, national mental health and health care organizations and people with lived experience. [Links to e-mental health roundtable reports.](#)
- A steering committee of experts and thought leaders from across the country was convened to direct, guide, and advise on e-mental health in Canada, resulting in the report, [E-Mental Health in Canada: Transforming the Mental Health System Using Technology \(2014\)](#) was published.

## Other MHCC Work with Memorial University

### The Inquiring Mind Pilot Project

Memorial University is one of seven university and college campuses taking part in a pilot of The Inquiring Mind (TIM) training program which teaches students how to better understand and manage their mental health. TIM is adapted from existing evidence-based training programs, [The Working Mind](#), aimed at managers and employees, and the [Road to Mental Readiness](#), aimed at first responders.

Delivered in a three-hour workshop format, TIM covers three main components: stigma reduction, resiliency skills, and the Mental Health Continuum Model. This model reconceptualises how one thinks and talks about mental health by categorizing signs and indicators of good to poor mental health under a four-colour continuum: green (healthy), yellow (reacting), orange (injured), and red (ill).



[More information on The Inquiring Mind pilot project.](#)

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