



NEWS RELEASE

Mental Health Service Purchase Agreement Review Recommendations Released Implementation team well underway

July 30, 2014 – The review of the service purchase agreement (SPA) between the Canadian Mental Health Association – Thompson (CMHA) and the Northern Health Region (NHR) containing 19 recommendations has been received by the Northern Health Region, chief executive officer Helga Bryant, and Canadian Mental Health Association Executive Director Paulette Simkins. .

“The clients we serve will be the ultimate beneficiaries of this report and its recommendation as we better define a process to close any gaps between their needs and the services we are providing,” said Bryant. “We value the partnership we have with CMHA and look forward to continuing our professional relationship going forward.”

The review was conducted by respected health care expert Reg Toews and included on-site visits, a document review, and interviews with clients receiving the services, family members, staff from CMHA, and staff from the Region. The recommendation are grouped into five key areas which include:

- Program Services Review;
- SPA(s) Development;
- Finance and Monitoring;
- Governance and Oversight; and
- Staff Development.

“The partnership we have with the health region is integral to our ability to deliver vital mental health services in Thompson,” CMHA Board Chair Dan Murphy said. “These recommendation will strengthen that relationship by building trust, clarifying roles and ensuring the needs of our clients are met, both now and in the future.”

A joint implementation team, headed by Dr. Shelley Rhyno, the Region’s Director of Behavioural Health and the CMHA Thompson Executive Director Paulette Simkins has developed a plan to move forward with timely implementation of the recommendations. Their work is expected to continue throughout the summer and into the fall.

“Both partners committed to adopting the recommendations at the outset,” Bryant concluded. “The implementation committee is meeting bi-weekly to move that work forward to ensure we are providing the quality, accessible and compassionate health services these consumers need and expect.”

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Attachment: Review Recommendations

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Mental Health Service Purchase Agreement Review Recommendations

Where the recommendations do not clearly identify which partner is to take the lead or a joint response is required the partners should decide together on who will take the lead. If the partners cannot resolve who will take the lead or an action is not initiated as indicated in the recommendation it will be the responsibility of the NRHA to resolve any impasse with CMHA and/or take the lead.

Program Review

- CMHA and NRHA complete a joint review of the Hope House program including, but not limited to, establishing the dividing line between the HH program and the Transitional Housing program, clarifying the number of beds at HH, assessing the quality of the services provided and determining whether changes are required in the HH program itself.
- CMHA and NRHA complete a joint review of the Supported Housing program with a particular, but not exclusive, focus on whether it should be expanded beyond the current commitment of resources to the program.
- CMHA and NRHA complete a joint review of the Connections Clubhouse program including, but not limited to, an assessment of whether this service continues to operate in a manner consistent with the clubhouse model particularly as it applies to the voluntary nature of membership including member choice and the participation of the members in the daily operation of the CC. It may be helpful in this process to visit other clubhouse programs.

Service Purchase Agreement(s) Development

- NRHA and CMHA each agree to fulfill their respective obligations as outlined in the Service Purchase Agreement (SPA) and to jointly develop a plan to systematically implement these SPA requirements.
- The NRHA representative (to be appointed) and the CMHA Executive Director Initiate the concern management process as outlined in the SPA.
- NRHA and CMHA replace the current SPA which includes the three funded programs with a separate SPA for each program funded by the NRHA.
- CMHA and NRHA clarify the respective role and responsibilities of the CMHA Hope House Program Coordinator and Peer Support Workers and NRHA Mental Health Program Community Health Workers and Proctor. The two organizations should work at this as partners.
- CMHA and NRHA, working together, implement the shared care/treatment processes and procedures as referenced in the SPA including: case conferencing,

primary case management, case plan for client, case manager, report of critical incidents, client centered case perspective and others.

- NRHA and CMHA work together to develop a precise description of the parameters and services of each of the currently funded SPA programs. This description should provide future guidelines for determining the funding level to be provided by the NRHA.
- The NRHA complete the criteria to be used by CMHA in the reporting of critical incidents and CMHA implement this reporting requirement as soon as the NRHA provides these criteria.
- The NRHA, in consultation with CMHA, develop the forms/templates to be used by CMHA in its reporting to the RHA.

Finance and Monitoring

- Effective immediately the CMHA submit to the NRHA any outstanding reports required by the SPA and ensure that all future reports are submitted on the schedule laid out in the SPA. This includes, but is not limited to, audited financial reports, quarterly reports on each program, yearly summary of program activities, statistical reports, challenges faced and other reports identified in Schedule C.
- The NRHA complete the annual financial and program deliverables review as provided for in the SPA. This is to include a review of the current allocation of NRHA funds to each of the three programs. Outside expertise may be engaged if required.
- The NRHA fulfill the monitoring requirements of the SPA and together with CMHA develop and implement the necessary steps and procedures to ensure that both organizations are held accountable.

Governance and Oversight

- The CEO of the NRHA and the CMHA board chair, working in concert, explore the reasons/causes for the breakdown in communication and develop and implement a plan to restore effective communication between the two organizations. The CMHA chair and NRHA CEO may decide to create a small committee composed of staff and/or board members and engage outside resources to assist in this task.
- The boards and senior leadership of the NRHA and CMHA agree to develop and implement a joint plan to create an effective partnership between the two organizations in the interest of better client programs and services.
- Effective immediately the CMHA submit to the NRHA any outstanding reports required by the SPA and ensure that all future reports are submitted on the schedule laid out in the SPA. This includes, but is not limited to, audited financial

reports, quarterly reports on each program, yearly summary of program activities, statistical reports, challenges faced and other reports identified in Schedule C.

- The NRHA complete the annual financial and program deliverables review as provided for in the SPA. This is to include a review of the current allocation of NRHA funds to each of the three programs. Outside expertise may be engaged if required.
- The NRHA fulfill the monitoring requirements of the SPA and together with CMHA develop and implement the necessary steps and procedures to ensure that both organizations are held accountable.
- The CMHA carry out its responsibilities to coordinate supports and services for clients with other service providers. This includes, but is not limited to, CMHA participating in team meetings with other service providers, involving the primary Case Manager/Referral Agent when required by the client and upon invitation from the NRHA participating in a portion of the quarterly NRHA management meetings. For CMHA to fulfil this responsibility will require the input of the NRHA.

Staff Development

- CMHA review the current training program for HH personnel and implement any changes that would enhance the training of the Peer Support Workers. CMHA and NRHA should work at this as partners.
- The CMHA complete a review of its current recruitment activity and strategies and implement identified changes that could enlarge the pool of qualified candidates. The NRHA should be invited to provide input.