

**Provincial
Mental Health and Addictions
Advisory Council**

Activity Plan

April 1, 2017 – March 31, 2020

MESSAGE FROM THE INTERIM CHAIRPERSON

In accordance with the *Transparency and Accountability Act*, I am pleased to present the 2017 – 2020 Activity Plan for the Provincial Mental Health and Addictions Advisory Council (the Council). The Council is a Category three (3) Provincial Government entity under the *Transparency and Accountability Act* and plans and reports under these requirements.

This Activity Plan identifies key objectives to be accomplished during the planning period in an effort to provide sound advice that will inform policies and programs and enhance the understanding of mental health and addictions issues within Newfoundland and Labrador. In the development of this plan, careful consideration has been given to the strategic directions of the Provincial Government in the area of health and community services and the All-Party Committee on mental health and addictions.

As Interim Chairperson, my signature below acknowledges that the Provincial Mental Health and Addictions Advisory Council are accountable for the preparation of this plan and for the achievement of the objectives contained herein.

Sincerely,

A handwritten signature in black ink, appearing to read "Sheldon Pollett". The signature is written in a cursive style with a large initial 'S'.

Mr. Sheldon Pollett, Interim Chairperson
Provincial Mental Health and Addictions Advisory Council

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Overview

The Provincial Mental Health and Addictions Advisory Council (The Council) reports to the Minister of Health and Community Services (HCS). The Council advises on key mental health and addictions matters to formulate effective decision making and policy development; and provides oversight to the implementation of *The Mental Health and Addictions Action Plan for Newfoundland and Labrador*.

Mandate

1. The Council will provide oversight for the implementation of the Action Plan through a set of indicators that will measure process and outcome of the Plan's initiatives.
2. The Council will specifically advise the Minister of HCS on matters related to:
 - the process and outcome of the implementing the Action Plan;
 - the prevention of mental health and substance use problems;
 - public awareness, education and anti-stigma efforts; and
 - emerging priorities requiring immediate attention.

Membership

Membership, including the chairperson and vice-chairperson are appointed by the Minister and consist of no less than 15 members. Council appointment recommendations are made by the Public Service Commission (PSC) in accordance with section 25(a) of the *Independent Appointments Commission Act (the Act)*. The Act requires a merit-based process for appointments and establishes an independent commission to provide recommendations for appointments in accordance with that process.

The current Council is a 19 member group representing diversity in backgrounds, skills and experiences (see Appendix A for membership list). The Council's membership, including the Chairperson and Vice-Chairperson may bring experience from the following sectors:

- Personal Lived Experience / Family Experience
- Regional Health Authorities
- Psychiatry and Family Medicine
- Education
- Health Promotion and Prevention
- Community Organizations
- Memorial University of Newfoundland /College of North Atlantic
- Business Community
- Justice System (Police/Legal Aid/Corrections/Private Bar
- National Organizations
- Indigenous People

Membership should also carefully consider the inclusion of individuals with diverse experiences including, but not limited to, regional representation, age, ethnicity, disability and gender balance. A minimum of 1/3 of Council membership should represent lived / family experience with mental illness and/or addictions issues. A member of the Council shall be appointed for a term of three years.

Funding

The work of the Council is supported and funded by the Mental Health and Addictions Division, Department of Health and Community Services.

Meetings are scheduled every two months or as required. The Council does not maintain a separate office; support and secretariat services are provided by the Mental Health and Addictions Division, 1st floor West Block, Confederation Building, St. John's.

Primary Client

The primary client of the Council is the Minister of Health and Community Services.

Objectives 2017-2020

The Provincial Mental Health and Addictions Advisory Council provide support to the Minister of Health and Community Services in an advisory capacity. As such, the following objective will guide the direction of the Council for the period April 1, 2017 to March 31, 2020 and will be reported on in each year covered by the plan (2017-18, 2018-19 and 2019-20).

Issue: Provide oversight for the implementation of the Mental Health and Addictions Action Plan.

In March 2017, the All-Party Committee on Mental Health and Addictions released *Towards Recovery: A Vision for a Renewed Mental Health and Addictions System*. The report outlined 54 recommendations that address service gaps and support what is currently working well in the mental health and addictions system in the province. System transformation is a high priority for Newfoundlanders and Labradorians and a priority that requires immediate action in order to better meet the needs of residents.

In the *Way Forward, A vision for sustainability and growth in Newfoundland and Labrador*, the Provincial Government committed to responding immediately to the recommendations to address gaps in the mental health and addictions system, strengthen existing programs and services, and break down the barriers of stigma and timely access. In doing so, it committed to developing and publicly releasing an action plan for the report recommendations by June 30, 2017.

The goal of this Action Plan is to guide the implementation of the initiatives outlined in *Towards Recovery*, and provide direction for mental health and addictions policy and programs for the next five years (2017 to 2022). With leadership from the Department of Health and Community Services, guided by the vision for a renewed mental health and addictions system, and with input from multiple partners and oversight by the Provincial Mental Health and Addictions

Advisory Council, a provincial mental health and addictions program will be developed. This comprehensive, integrated, person-centered system that provides the right care, at the right time and in the right place, will be implemented in collaboration between community groups, government departments and the regional health authorities.

The annual objective will stay the same for the duration of the three year planning cycle; however, the indicators will change annually as work progresses on the implementation of the recommendations and priorities emerge.

Annual Objective

By March 31, 2018, the Provincial Mental Health and Addictions Advisory Council will have provided advice and oversight to the Minister of Health and Community Services regarding implementation of the Mental Health and Addictions Action Plan.

Indicators:

- Obtained expert and group member expertise
- Invited community groups and other organizations to present information
- Prioritized advice provided to the Minister
- Made recommendations to government-led mental health and addictions initiatives

Appendix A: Provincial Mental Health and Addictions Advisory Membership 2017-2018

Name	Current Experience
Sheldon Pollett	Interim Chair, Community Service Provider - Youth
Angela Crockwell	Community Service Provider - Youth
Angie Wilmott	Schools Guidance Counsellor/Psychologist
Dave Banko	Community Service Provider
Des Coombs	Psychologist
Dr. Greg Radu	Psychiatrist, START Clinic, Eastern Health
Dr. Ted Callanan	Professor, Discipline of Psychiatry, MUN Psychiatrist, START Clinic, Eastern Health
George Skinner	Social worker, Community Advocate
Lisa Browne	Community Service Provider
Mark Gruchy	Lived Experience, Community Coalition
Mary Walsh	Actor/ Social Activist
Michelle Kinney	Nunatsiavut govt; Northern region
Patrick Hickey	Youth Advocate
Paul Thomey	Executive Director of the Eating Disorder Foundation of NL, Local Business Owner
Paula Corcoran-Jacobs	Lived experience, Community Service Provider
Peter Cornish	University Professor/researcher
Peter Ralph	Lived experience
Rita Notarandrea	National Organization, Canadian Centre on Substance Abuse
Thelma Whelan	Education Consultant; Western region

Strategic directions are the articulation of desired physical, social, or economic outcomes and normally require action by or involvement of, more than one government entity. These directions are generally communicated by government through platform documents, Throne and Budget Speeches, policy documents such as The Way Forward and other communiqués. They summarize the outcomes desired for the health sector and are communicated to entities that plan and report in collaboration with the Department. The directions and focus areas in the area of health and community services related to the work of the Provincial Advisory Council on Mental Health and Addictions for the planning period 2017-2020 are as follows:

Strategic Direction #1: Better value through improvement

Outcome: An improved health and community services system that lowers cost while improving patient outcomes through appropriateness of care and the appropriate utilization of resources.

This outcome will require focus in the following areas:

- E-health (e.g., evidence based decision making, electronic medical record, electronic health record, health analytics,)
- Performance Measurement (e.g., public reporting and accountability, setting meaningful and measurable goals for future improvements)
- Health Workforce Planning
- Policy Development
- Sharing Services (e.g., lab reform)

Strategic Direction #2: Better health for the population

Outcome: Improved health outcomes and well-being for the people of Newfoundland and Labrador.

This outcome supports a healthy population and will require focus in the following areas:

- Cardiovascular Health
- Chronic Disease Prevention and Management
- Mental Health and Addictions (e.g., including mental wellness, all party committee recommendations)
- Primary Healthcare (e.g., expand primary health care teams)
- Public Health (e.g., child health risk assessments for school age children)
- Health in All Policies

Strategic Direction #3 Better Care for Individuals

Outcome: Improved accessibility of health and community programs and services toward better care of the population, including vulnerable persons.

This outcome supports an accessible health and community services system and will require focus in the following areas:

- Wait times (e.g., cardiovascular services)
- Community capacity (e.g., long term care, community supports, home support, ambulance reform, supports for children with disabilities, healthy living assessments for seniors)
- Infrastructure Improvements (Procure the Corner Brook Long Term Care Facility)

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