



June 15, 2020

Mr. Kaleed Rasheed, MPP Mississauga East – Cooksville
Chair, Standing Committee on the Legislative Assembly
99 Wellesley Street West
Room 1405, Whitney Block, Queen's Park
Toronto, ON M7A 1A2

Dear Mr. Rasheed:

Re: Bill 175 - Connecting People to Home and Community Care Act, 2020

On behalf of the Canadian Mental Health Association (CMHA) Ontario, thank you for this opportunity to present our perspective on Bill 175 - Connecting People to Home and Community Care Act, 2020. Our comments will focus predominantly on Schedule 1 of this Bill, which is focused on updates to the *Connecting Care Act, 2019*.

Founded in 1952, CMHA Ontario and our 28 local branches are part of the community-based mental health and addictions sector, which serves approximately 500,000 Ontarians annually. CMHA Ontario actively contributes to health systems development by recommending policy options to improve the lives of all Ontarians. Through leadership, collaboration and the continual pursuit of excellence in community-based mental health and addiction services, CMHA works to achieve the vision of a society that embraces and invests in the mental health of all people. This perspective informs our comments and recommendations on Bill 175.

Community-Based Mental Health and Addictions Care

Community-based mental health is defined as care provided outside of the hospital setting. It includes services and supports provided across the continuum of care, including health promotion, illness prevention, treatment and recovery. It includes not only treatment and crisis response, but also outreach, case management and related services such as housing and employment supports and court diversion programs. Community-based mental health and substance use care identifies the importance of communities in supporting recovery. This philosophy is supported by the fact that individuals receiving care generally prefer to do so within their community, and that for most individuals, formal mental health services are just one piece of the treatment puzzle.

Community-based mental health and addictions agencies, such as CMHA, are integral components to ending hallway medicine and relieving the pressures on hospital emergency departments and inpatient care, as well as the criminal justice and social services systems. CMHA branches across Ontario offer holistic approaches to care, where clients receive appropriate clinical services as well as supports in areas such as housing and employment to address the social determinants of health. Community mental health and addictions agencies are an essential component of community-based care that must be considered in every health policy decision on community care.

Ontario Health Teams

Many CMHA services are offered in partnership with other service providers and with multiple government ministries. In fact, CMHAs are key partners within 12 of the 24 Ontario Health Teams announced in 2019 and involved in some capacity in 21 of the 24 teams.

A key focus of CMHA's work within Ontario Health Teams is to address the needs of Ontarians living with substance use and addictions conditions, offering harm reduction programs, rapid access to addiction medicine, withdrawal management and other treatments, services and supports.

One significant challenge that CMHAs are facing is the geographic boundaries of the Ontario Health Teams. CMHAs are regional service providers, and as such, each CMHA branch is being asked to be part of multiple Ontario Health Teams. Being a part of multiple Ontario Health Teams may have the unintended consequence of dividing the existing integrated care delivery in each CMHA branch region.

Ontario Health and the new Mental Health and Addictions Centre of Excellence

CMHAs across Ontario commend the provincial government for the new *Foundations for Promoting and Protecting Mental Health and Addictions Services Act, 2019*, which established the Mental Health and Addictions Centre of Excellence within Ontario Health. As was recommended by the Select Committee on Mental Health and Addictions a decade ago, Ontarians deserve provincial leadership and a system-wide approach to receiving connected, accountable and high-quality mental health and addictions care. The proposed aims of the Centre meet these needs well.

CMHAs recommend the upcoming investments for the Centre focus on establishing core mental health and addictions services, a comprehensive data and performance measurement strategy for the sector, and quality improvement supports, especially for community-based agencies.

The immediate objective of the Centre should focus on establishing a core set of provincewide mental health and addictions services that provide seamless programs and support across the lifespan, from children and youth to adults and seniors. All Ontarians should have the same access to the same programs and quality of care regardless of where they live in the province. Another focus should be placed on increasing harm reduction, substance use and addictions treatment programs for Ontarians. Core services will ensure consistent treatment delivery across Ontario, reduce hospital emergency department visits, help individuals navigate the health care system and lead to better health outcomes.

The Centre should also prioritize building data infrastructure in the community mental health and addictions sector. Many community-based agencies lack capacity as well as financial and technical resources for data collection. Without valid, comparable, consistent data, we cannot adequately measure performance. And without robust performance measurement indicators, we cannot fully understand gaps in performance or how to improve quality of care. These metrics are also important for provincial accountability. Local data is instrumental for knowing how we're performing within in a region, but without robust provincial data, we cannot know how we're performing as a provincewide system. Quality improvement initiatives cannot succeed without this necessary data infrastructure. The first step is to invest in a data strategy for the entire community-based mental health and addictions sector; something the Centre is well positioned to lead.

I would welcome the opportunity for further discussion on CMHA's perspective on Bill 175. Please feel free to contact me directly at cquenneville@ontario.cmha.ca

Sincerely,

A handwritten signature in black ink, reading "Camille Quenneville". The signature is fluid and cursive, with the first name "Camille" and last name "Quenneville" clearly distinguishable.

Camille Quenneville
Chief Executive Officer
Canadian Mental Health Association, Ontario

cc Valerie Quioc Lim, Committee Clerk