



Addiction & Mental Health Services | Kingston Frontenac Lennox & Addington  
WELLNESS ACCEPTANCE BELONGING

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# Agency Overview

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DECEMBER 2019



Addiction & Mental Health Services | services de lutte contre les dépendances et de santé mentale  
Kingston Frontenac Lennox & Addington

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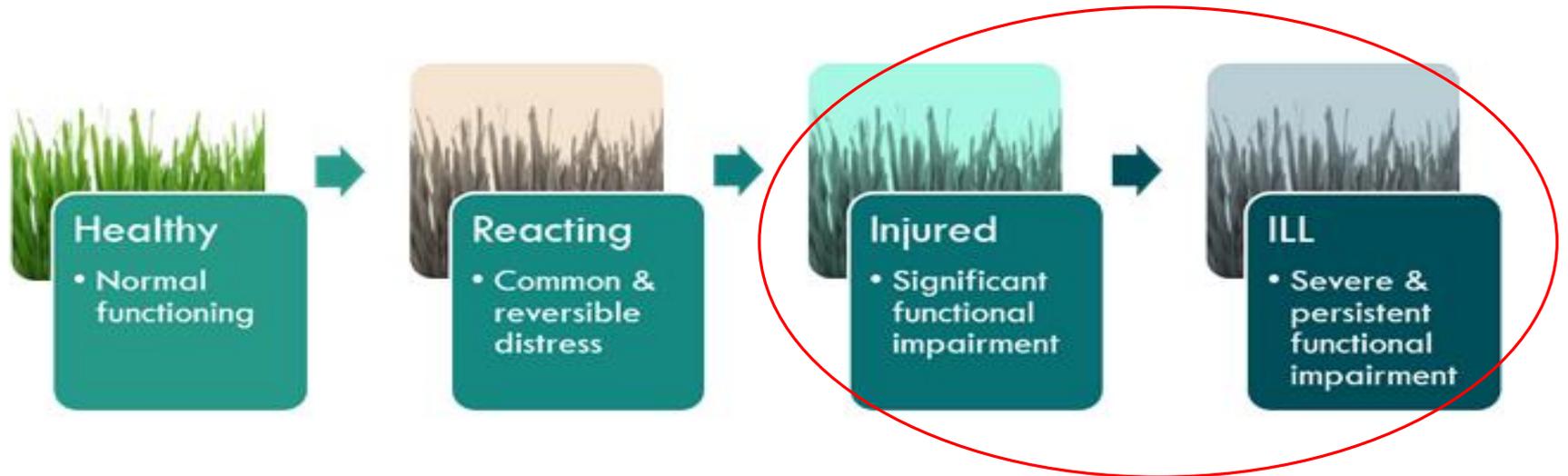
## **Our Vision**

A community where people have wellness, acceptance and a sense of belonging.

## **Our Mission**

As a leading, transformative and collaborative organization, AMHS-KFLA's mission is to provide responsive, high-quality, community-based addiction and mental health services that empower the people it serves to be well and achieve their full potential.

# Who We Serve



*AMHS-KFLA provides a range of programs and services with a mandate to provide responsive, confidential, non-judgmental, community-based addiction and mental health services to nearly 8,000 individuals in Kingston, Frontenac, Lennox and Addington who are experiencing serious mental health illness and addictions.*

*Crisis services are accessible to anyone experiencing a mental health and/or addictions crisis.*

# Agency-wide Initiatives

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The following Agency initiatives have been informed and led by staff engaged through focus groups:

- We are working on leveraging community psychiatry resources to increase access to clients and program support.
- Discipline-specific committees are emerging.
- Staff are deployed across KFLA to increase rural access to services.
- A client-led policy and procedure committee has been implemented.
- A Lived Experience Specialist will be developing a Client and Family Advisory Committee.
- Transformation Completion - recruitment is 95% complete.
- Addition of new roles and Agency-wide teams.

# Expanded Staff Roles

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The Agency has incorporated the following new roles to support a cohesive and coordinated approach to care through interdisciplinary practice and in alignment to our value of lived experience knowledge.

**Advanced Practice Lead (APL):** This lead functions as a consultant and resource to direct service staff and program leadership with respect to recovery-oriented practice within an inter-professional team environment.

The APL guides clinical education internally and externally and leads the development of AMHS-KFLA policies and procedures.

# Expanded Staff Roles

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**Quality Improvement Lead (QI):** This lead is responsible for fostering a culture of continuous quality improvement across the Agency.

As a member of the Senior Management Team, the QI lead will facilitate process improvements, management and metric setting, and will contribute to creating corporate Agency standards and oversight tools.

The QI lead is also responsible for developing the annual QI plan and fostering partner collaboration to ensure end-to-end system performance.

# Expanded Staff Roles

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**Nurse Practitioner:** The NP role is a member of interprofessional teams that are responsible for carrying out treatment, rehabilitation and support functions to facilitate community living and recovery within the ACT model of care, CI Housing program and Case Management.

Within the CI Housing program, the NP participates in comprehensive assessment and treatment planning and client medication management.

Within Case Management, the NP provides direct assistance client symptom management, medication interventions, crisis support, education and interventions directed at reducing hospitalizations.

The NP manages pharmaceutical and medical supplies and assessments under the direction of the team psychiatrist and in collaboration with nursing staff.

# Expanded Staff Roles

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**Team Lead:** The Team Lead is a current team member who is responsible for assisting the Program Manager to fulfill administrative duties associated with program service provision, day-to-day clinical support, mentoring and coaching.

The role includes the administration of the Agency's policies and procedures, coordination of daily staff assignments, scheduling and emergency/crisis response. Duties are assumed in addition to maintaining a reduced caseload.

Staff Team Leads have demonstrated advanced clinical reasoning and decision-making skills with the ability to assess complex needs, determine interventions, prioritize services required and implement solutions.

These positions are embedded in ACTT, CI Housing, Crisis, Addictions and Counselling & Treatment.

# Expanded Staff Roles

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**Peer Navigator:** Three Peer Navigators have been hired and are located in the main reception area of three office sites as the first point of in-person contact for clients and their families.

They use their lived experience as a recipient of services for those with serious mental illness to assist them in accessing AMHS-KFLA services.

Peer Navigators direct individuals to the correct services and support transitions between care providers in keeping with the Agency's recovery-oriented model of care.

The Peer Navigators also provide administrative support and functions as a member of the Peer Navigator Team and as such may be called upon to provide support at any of the Agency's sites.

# New Innovative Youth Team

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## **Youth Case Management – Kingston area**

Supports individuals aged 16-24 in learning skills to manage their mental health while working to stabilize other life areas, including substance use. In providing intensive case management support and working from a harm reduction philosophy, the program targets at-risk youth and can provide assertive outreach to engage transient or pre-contemplative individuals. The program supports youth where they are at and uses a strengths-based approach to help youth identify and work towards their goals.

## **Youth Addictions Counselling – Kingston area**

Offers focused and informed addictions supports to youth in the Kingston area to ensure the most appropriate interventions are accessible to these individuals. Services include addiction education, prevention, consultations, group facilitation and walk-ins. They may also include supportive counseling, treatment planning and transitional case management.

# Youth Team

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## **Youth Gambling/Gaming/Technology Addictions – Kingston, Napanee and Area**

This program is available for young people ages 12 to 30. Referrals can be made based on the nature of the activity, behavior as a result of the activity, and the amount of time spent. Young people can be seen at school, in their homes or at the office. Counselling is confidential, based on best practice and reducing harm. Concerned family members can receive supportive counselling.

## **Youth Addictions Counselling – Lennox & Addington County**

Confidential individual counselling and psychoeducation for youth in secondary schools and community with drug and/or alcohol concerns ranging from early experimenting to showing increased concerns of substance abuse and/or addiction. Services also support youth who may be concerned about a loved one with substance abuse/addiction and are needing support to manage those concerns. The program provides comforting, non-judgmental support to work through harm reduction, safety and promoting change with goals defined by the individual youth.

# Youth Team

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## **LGBT2SQ+ Addiction Counselling** - across KFL&A

Supports for individuals aged 16 years and older in learning skills to manage their substance use and/or misuse while working from a harm reduction and anti-oppressive framework. Prevention and treatment supports are offered as well as system navigation and practical supports.

Education and awareness training offered to staff and community partners to ensure best practices for LGBT2SQ+ are delivered as well as active collaboration to ensure that gaps in services are met and duplication of service is avoided.

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AMHS-KFLA is doing business  
differently through the  
implementation of a client-centred  
comprehensive care approach



# Introducing Our New Service Framework

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Jeremiah Bach, Advanced Practice Lead



# Stepped Care/Needs-Based Planning Approach

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Stepped Care is a system of delivering and monitoring treatments, so that the most effective yet least resource intensive, treatment is delivered to clients first; only 'stepping up' to intensive/specialist services as clinically required.

“Having the right service in the right place, at the right time delivered by the right person.”

# Level of Care Evaluation Parameters

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**BASIC SERVICES -**  
Prevention and Health  
Maintenance



**LEVEL ONE - Recovery**  
Maintenance and Health  
Management



**LEVEL TWO - Low**  
Intensity Community  
Based Services



**LEVEL THREE - High**  
Intensity Community  
Based Services



**LEVEL FOUR - Medically**  
Monitored Non-  
Residential Services



**LEVEL FIVE - Medically**  
Monitored Residential  
Services

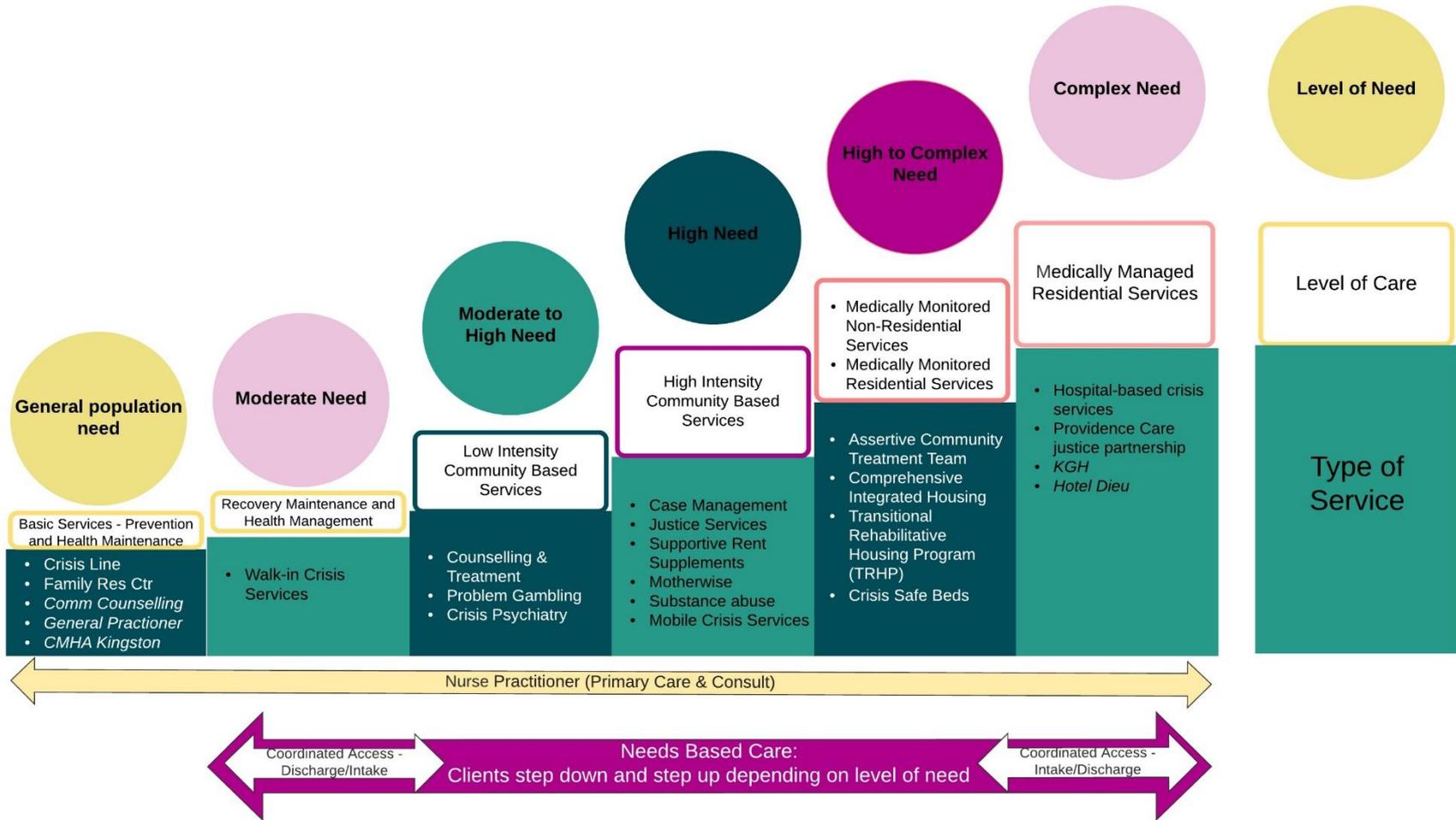


**LEVEL SIX - Medically**  
Managed Residential  
Services



# Service Framework

*\*Italics denote community partners*



# Philosophy and Care Practice

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## **Philosophy:**

- Our services adapt to the ongoing needs of clients to support them where they are at.
- Individuals we support are 'clients of the Agency', not clients of a particular program or service.

## **Care Practice:**

- Is more responsive and focused in alignment with client goals for recovery.
- Clients will experience seamless transitions – internal and external referrals.
- Our care approach continues to foster a therapeutic relationship with clients as they move through different programs and services.
- The implementation of levels of care enable operating efficiencies, and a comprehensive care approach by the Agency.

# Stepped Model of Care

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## **This approach means we are providing:**

- enhanced cross team/program collaboration, communication and care conferencing;
- a client-service approach to support access to multiple services at the same time (as appropriate);
- more timely access to service through greater caseload workflow efficiencies; and
- a comprehensive care practice whereby each service transition is aligned with client needs and goals.

# Implementation

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- Staff are being introduced to the stepped-care model and application at a team/program level.
- Level of Care assessment training will be conducted and program eligibility criteria will be refined.
- This change initiative has started and is projected to be implemented and refined by the end of March 2020.

# Programs Overview

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Central Intake (Access)

Crisis Services

Comprehensive Integrated (CI)  
Housing

Transitional Rehabilitation Housing  
Program (TRHP)

Assertive Community Treatment  
Teams (ACTT)

Case Management (CM)

Justice Services

Rent Supplements with Supports

Housing Case Management (in non-  
supportive housing)

Addiction Services

Counselling and Treatment (C&T)

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# Central Intake (Access)

**Julie Lambert**

Program Manager, Case Management, Access, Justice Services



# Central Intake (Access)

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## **Program Description:**

AMHS-KFLA's Central Intake offers a single point of access for the programs across KFLA.

Service access initiated through referral into Central Intake (except for Court Diversion; Transitional Case Management). Health care providers, community agency staff or other individuals may refer someone to the Agency.

## **Who We Serve:**

- Individuals 16 years and older with addiction and/or serious mental illness who are living in the community.

# Central Intake (Access)

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## **Service Access:**

### Hours & Location

- Kingston, Frontenac, Lennox and Addington
- Available Monday – Friday 8:00 a.m. to 4:30 p.m.

### Referral Pathway:

Health care providers, community agency staff or other individuals may refer someone for Agency services.

Professionals making referrals on behalf of clients can use an online form or download the regional referral form.

Individuals can also complete a self-referral form online and a Central Intake staff member will follow up with them.

# Central Intake (Access)

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## **Staff Model:**

### Staffing

- Enhanced staffing with a Program Support Assistant and Registered Nurse (0.5 FTE)
- 1 Access Worker – Napanee-based
- 1 Access Worker – Kingston-based

### Access and Outreach

- Office-based in Napanee and Kingston servicing all of KFLA.

# Central Intake (Access)

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## **Services we offer:**

AMHS-KFLA's Central Intake offers a single point of entry for the programs across KFLA.

## **Where We Are Heading - Innovation:**

- Implementing a standardized tool across Access and Transitional Case Management (TCM) to enable consistency at either point of entry (expected January roll-out).
- Exploring a regional approach to centralized intake.

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# Crisis Services

**Robin Witzke**

Program Manager, Crisis Services



# Crisis Services

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## **Program Description:**

Crisis Services provide immediate assessment, support and stabilization to individuals in crisis, linking them to community and agency services as appropriate.

There are 7 key services in this program:

- 1. Crisis Phone Line:** 24/7 support by telephone to individuals in crisis. Crisis lines may be accessed by the individual in crisis or by a community member on their behalf.
- 2. Mobile Crisis Services:** Mobile, in-person response in the community as needed to support individuals in crisis.
- 3. Walk-in Crisis Services:** Low-barrier access to in-person supports during business hours at the Napanee and Kingston office sites.

# Crisis Services

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## Services Continued:

4. **Psychiatry:** Crisis psychiatry is available for individuals in crisis with moderate to severe symptoms and is limited to 1-2 visits (not ongoing).
5. **Crisis Safe Bed (6 beds):** Short-term, mental health residential placement for individuals in crisis, with a stay up to 30 days. Individual receive supports and benefits include diversion from unnecessary contact with the justice system and/or hospitalization.
6. **Mobile Crisis Rapid Response Team (MCRTT):** An immediate response team made up of uniformed Kingston Police Officer and Crisis Worker.
7. **Crisis Outreach & Support Team (COAST):** A follow-up support team (a plain clothed police officer & Crisis Worker) in an unmarked vehicle to complete assessment and support in the community (e.g., check-ins, referrals) used in situations where police may be needed or where risk is greater.

# Crisis Services

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## **Who We Serve:**

Crisis provides support to anyone in the community experiencing a mental health and/or addiction Crisis.

## **Service Access:**

### Hours & Location

- Crisis phone line: 24 hours a day/ 7 days a week.
- Mobile services (Kingston & Frontenac): M-F 8 a.m. to midnight, Weekends & holidays 8 a.m. to 8 p.m.
- Mobile services (Napanee and L&A): M-F 8:30 a.m. to 4:30 p.m.; Weekend on-site support at L&A Hospital.
- Walk-in services: 8:30 a.m. to 4:30 p.m., M-F at 552 Princess St., Kingston and 70 Dundas St. E., Napanee.
- Safe Bed Program: 24 hours a day/ 7 days a week.
- Mobile Crisis Rapid Response Team (MCRRT) – M-F 8 a.m. to midnight; weekends noon to midnight; Crisis Outreach and Support Team (COAST) – follow-up outreach as needed.

# Crisis Services

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## Referral Pathway:

- Crisis referrals occur through self-referral, family members and community partners.
- Safe Beds are accessed through Police referral only, individuals are then assessed for eligibility.

# Crisis Services

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## **Staff Model:**

Crisis Workers support the 24/7 crisis phone line, walk-ins and mobile response.

Crisis Safe Bed staff include Crisis Workers, Addictions Counselor. Staff are located at the program bed site.

## **Community Outreach:**

- Safe Beds (6) are regional beds in Kingston supporting all of KFLA.
- Crisis Services support all of KFLA.

# Crisis Services

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## **Where We Are Heading:**

- Creating policies and procedures.
- Service Expansion planning is underway to look at establishing a COAST Program with Frontenac OPP and Lennox & Addington OPP.
- Development of a hub model.

# Crisis Services

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## **Service Innovation:**

Service expansion in Kingston has occurred in partnership with Kingston Police to offer specialized mental health response to vulnerable persons, divert unnecessary hospital visits by police, provide information and service referrals etc., through the Mobile Crisis Rapid Response Team (MCRTT and Crisis Outreach and Support Team (COAST).

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# Comprehensive Integrated (CI) Housing

**Jamie Lalonde**

Program Manager, Housing Support Services



# CI Housing

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## **Program Description:**

The CI Housing program has been designed based on components of the ACT model of care; the intent is similar to ACT in that the clients receive high intensity services from a multi-disciplinary team.

The program serves clients with serious mental illnesses, that are complex and who have very significant functional impairments, that require 24/7 support in a residential setting to maintain safe community living.

Clients served by the program typically have experienced prolonged periods (2+ years) of institutionalization or have been receiving services from an ACT team.

# CI Housing

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## **Who We Serve:**

Individuals 18 years and older with a serious mental illness (schizophrenia, other psychotic disorders, or bipolar disorder/mental illness) that seriously impairs their ability to live in a community setting.

Individuals are unable to independently:

- perform the range of daily living tasks,
- be consistently employed or consistently carry out the home-maker role, and
- maintain a safe living situation.

## **Exclusionary Criteria:**

- Primary diagnosis of Borderline Personality Disorder, Substance Use Disorder or developmental disability.

# CI Housing

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## **Service Access:**

### Hours & Location

- 24/7 on site support in a new, state-of-the-art building in Kingston.

### Referral Pathway:

- Referrals (located on our website) from community hospitals and ACT teams through Central Intake.
- Assessed by team for eligibility based on criteria checklist and collateral received.

# CI Housing

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## **Staff Model:**

Case Managers, Team Leads, Occupational Therapist, Registered Nurse, Peer Specialist, Peer Food Services Worker, Peer Environmental Worker, Peer Navigator, Program Manager, Nurse Practitioner, Psychiatrist.

## **Community Outreach:**

Partnerships with Street Health and KFLA Public Health for education resources and training.

# CI Housing

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## **Services we offer:**

- Intensive Rehabilitative Supports (side by side teaching of activities of daily living or ADLs, cooking programs, community integration, bus training, recreation and leisure programs on and off site, health and wellness programs, medication support and education, primary care)
- Support and Education for Families
- Navigating Community Resources
- Peer Support
- Employment Support
- Addictions Support

# CI Housing

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## **Where We Are Heading:**

- Solidifying programming and waitlist management.
- Psychiatry recruitment.
- Building partnerships with hospital and community ACT Teams.
- Using a stepped-care model of support.
- Being an established leader in KFL&A for transitioning clients with complex needs to community.

## **Service Innovation:**

Specialized rehabilitative program supported by the City of Kingston in an all new, state-of-the-art building.

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# Transitional Rehabilitation Housing Program (TRHP)

**Jamie Lalonde**

Program Manager, Housing Support Services



# TRHP

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## **Program Description:**

The Transitional Rehabilitation Housing Program (TRHP) is a program created by Providence Care Forensics Unit and AMHS-KFLA. The aim of the program is to support forensic clients transitioning from hospital into the community.

This is an 18-month program that offers support in ADLs, relapse prevention, community integration, and mental health support.

Clients are followed by the Ontario Review Board and are expected to follow the recommendations listed on their disposition orders.

# TRHP

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## **Who We Serve:**

Individuals have typically been involved with the justice system and forensic system.

All clients have identified ADL needs, addiction support needs, medication support needs, and struggles with transitioning successfully into the community.

Individuals who have been found by a court to be either:

- Unfit to Stand Trial, or
- Not Criminally Responsible (NCR) on the account of a mental disorder.

# TRHP

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## **Service Access:**

### Hours & Location

- Supported in a 24/7 supervised state-of-the-art building in Kingston.

### Referral Pathway:

- Providence Care Forensic forensics team identifies a patient that meets criteria.
- PC and TRHP team meet to review client once all deem eligible the patient is placed on a wait list. During this waiting period for bed availability, TRHP staff begin engagement with client and then begin transitioning to the program through visits and LOAs.

# TRHP

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## **Staff Model:**

The clients are supported onsite by Case Managers, Occupational Therapist, Transitional Case Management and Social Worker as needed.

## **Access & Outreach**

- TRHP staff support on site - 9 a.m. to Midnight.
- CI Housing staff provide support over night (Midnight to 9 a.m.).
- Located in an all new state-of-the-art building in Kingston.
- Clients have access to Providence Care Hospital Psychiatry Forensic Unit.

# TRHP

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## **Services we offer:**

- Group activities that focus on ADLs, social inclusion, vocational preparedness, recreation and leisure programs and reducing risk factors.
- Community based group programs focusing on rehabilitation and successful community integration (substance abuse, relapse prevention, harm reduction, symptom management).
- Ongoing assessments of client needs.
- Teaching and support for compliance of medication and programming.
- Support future transition into more independent living.

# TRHP

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## **Where We Are Heading:**

- Strengthened community partnerships.
- Further development of programming.

## **Service Innovation:**

- Specialized rehabilitative program supported by the City of Kingston in a state-of the art (high efficiency) building.
- Increased staff support to this client population as they now co-exist in the same apartment complex as CI housing.
- Development of Policies and Procedures with staff and clients in the program currently.

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# Assertive Community Treatment Teams (ACTT)

**Mandy Locke**

Program Manager, ACTT, Supportive Rent Supplements



# ACTT

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## **Program Description:**

ACTT (designed as a hospital without walls) is a client-centered, recovery-oriented mental health service delivery model that facilitates community living and recovery for individuals who have the most serious mental illnesses, have severe symptoms and impairments and have not benefited from traditional out-patient programs.

Individuals may also have co-occurring problems such as substance use disorders, homelessness or involvement with the legal system.

# ACTT

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## **Who We Serve:**

Clients 16 years of age and older with serious mental illnesses (e.g., diagnosis of a psychotic disorder, or bi-polar disorder, and experience significant functional impairment, and who require wrap around high intensity service.

Clients are those who, because of limitations in traditional mental health services, may have gone without appropriate services for some time.

## **Exclusionary Criteria:**

Primary diagnosis of personality disorder, developmental disability, acquired brain injury.

# ACTT

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## **Service Access:**

### Hours & Location

- Services are offered through KFLA, community-based.
- 8 a.m. to 6 p.m. weekdays and 8 a.m. to 4 p.m. weekends – with access to crisis services after hours.
- Office located out of 552 Princess Street, Kingston.

### Referral Pathway:

- Referrals in from community hospitals/physicians.
- Internal teams through Central Intake or rapid re-entry process.
- Assessed by team for eligibility against the ACTT criteria checklist.

# ACTT

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## **Staff Model:**

ACT Teams are multidisciplinary community workers which include:

- 1 Occupational Therapist
- 3 RN
- 1 Social Worker
- 1 Addictions Specialist
- 1 Peer Specialist
- 1 Vocational Specialist
- 1 Case Manager
- Psychiatry

# ACTT

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## **Services we offer:**

- Support and Education for Families
- Navigating Community Resources
- Health Education/Support
- Peer Support
- Occupational Therapy
- Employment Support
- Addictions Support and Education
- Skill Teaching and Housing Supports

# ACTT

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## **Where We Are Heading:**

- Refocus teams to community with the opening and staffing our specialized rehabilitation program (CI Housing).
- Internal fidelity completed, plan to meet high fidelity.
- Implemented new staff structure to align with standards (inclusive of 2 team leads).
- Expanding psychiatry services.
- Review of team geographical coverage.
- Exploring with Home Base Housing the need to work together to better serve and house our concurrent population that ACTT serves in the community.

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# Case Management

**Julie Lambert**

Program Manager, Case Management, Access, Justice Services



# Case Management

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## **Program Description:**

This program provides services to individuals with a serious mental illness who are living in the community.

## **Services:**

The team works in close partnership with acute care hospitals and community service agencies to provide assessment (OCAN), intervention, supportive counselling, treatment planning, service co-ordination, assistance with activities of daily living (ADLs), crisis avoidance and follow-up to adults 16 years of age and older.

There are two streams within the Case Management program:

1. Transitional Case Management (TCM)
  - The TCM stream accepts referrals directly from Hospital, Crisis and Police.
2. Intensive Case Management (ICM)
  - The ICM stream receives their referrals directly from Central Intake or TCM.

# Case Management

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## **Who We Serve:**

Individuals 16 years and older who have a diagnosis of serious mental illness, require support in one or more life domains and do not require in-patient hospitalization or supportive housing.

## **Exclusionary Criteria**

- Diagnosis of acquired brain injury.
- Primary diagnosis of a developmental disability.

# Case Management

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## **Service Access:**

### Hours & Location

- Across KFLA: available Monday – Friday 8:00 a.m. to 4:30 p.m.

### Referral Pathway:

- Transitional Case Management services accepts referrals directly from Kingston Health Sciences Centre ER and Burr 4 (both KGH and HDH sites), as well as from Crisis, Intake and Police.
- AMHS-KFLA's Central Intake offers a single point of entry for all other agency services and programs across KFLA. Health care providers, community agency staff or other individuals may refer someone for Case Management services.
- Rapid re-entry process.

# Case Management

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## **Staff Model:**

- Registered Nurse
- Nurse Practitioner
- Psychiatry
- 10 Kingston Case Management Workers
- 5 Kingston Transitional Case Management Workers
- 4 Lennox and Addington County Case Management Workers
- 4 Rural Frontenac Case Management Workers

# Case Management

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## **Services we offer:**

- Individualized assessment (OCAN)
- Treatment planning
- Supportive counselling
- Service coordination (linking service recipients with services and supports)
- Assistance with activities of daily living, support services, conflict resolution and crisis avoidance
- Systems and landlord advocacy and resource coordination
- Coping skills, including recovery and relapse prevention
- Outreach
- Provide support for individuals on a Community Treatment Order (CTO)

# Case Management

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## **Where We Are Heading - Innovation:**

- Looking at implementing a TCM/Crisis Working in the Frontenac OPP station.
- Implementing standardized screening tools.
- Regional Group Committee (Lennox & Addington County).
- Increase Service in rural Frontenac and Lennox & Addington.
- Improved Partnerships.
- Added a Nurse and Nurse Practitioner.

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# Justice Services

**Julie Lambert**

Program Manager, Case Management, Access, Justice Services



# Justice Services

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## **Program Description:**

### **Court Diversion and Support**

These justice services provide support, referral, and consultation to any individual 16 years of age and older who has a criminal charge (minor offense) before the court and a suspected or diagnosed mental health or addiction issue. If eligible, and the individual agrees to participate in the program, staff will link them to mental health supports and the staff role ends when a client has been sentenced.

### **Release from Custody**

The intent of the Release from Custody program is to support clients with serious mental illness who have been incarcerated and need assistance reintegrating into the community with access to appropriate services supports.

This is a short-term case management type of role.

# Justice Services

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## Who We Serve:

- Individuals 16 years of age and older who has a criminal charge (minor offense) before the court and a suspected or diagnosed mental health or addiction issue.
- The individual is voluntarily seeking this service.
- Clients that are involved or are at risk of being involved with the criminal justice system.
- Clients being released from a provincial detention centre.

# Justice Services

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## **Service Access:**

### Hours & Location

- Kingston and Napanee courts.
- Court Support and Court Diversion are available throughout the KFLA region (when available 8:30 a.m. to 4:30 p.m.).

### Referral Pathway:

- Referrals are received from Quinte Detention, Probation and Parole, Home Base Housing, agency programs, and occasionally other community partners that may have individuals incarcerated or about to be incarcerated, Central Intake, and Court.

# Justice Services

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## **Staff Model:**

### Staffing

- 2 Kingston Court Support Workers
- 1 Napanee Court Support Worker
- 1 Release from Custody Worker (Quinte Detention Centre)
- 1 Release from Custody Community Worker

### Access & Outreach

- Kingston and Napanee courts.
- Available throughout the KFLA region (when available 8:30 a.m. to 4:30 p.m.).

# Justice Services

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## **Services we offer**

**Court Support** assists individuals living with serious mental illness and their caregivers in situations where they come into contact with the Criminal Justice System.

Staff help them navigate and understand the judicial process and may advocate/arrange diversion applications.

Services are provided in Kingston and Napanee courts to assist with the legal process, create linkages to services, and provide supports to clients.

## **Release From Custody**

This program offers transitional case management to individuals with mental and addiction concerns prior to and immediately following release from custody to assist them in reintegrating into the community.

# Justice Services

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## **Where We Are Heading - Innovation:**

- Alignment to Case Management – transitioned the reporting relationship of the Justice Team.
- Memorandum of Understanding signed with the Quinte Detention Centre.
- Review of role/scope and provincial communities of practice.

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# Rent Supplements with Support

**Mandy Locke**

Program Manager, ACTT, Supportive Rent Supplements



# Rent Supplements with Supports

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## **Program Description:**

This program provides financial support with rental costs in privately owned housing, and intensive case management support to assist those with serious mental illness in successfully maintaining safe housing and learn ADLs.

## **Who We Serve:**

- Individuals who are homeless or at risk of homelessness.
- Diagnosis of serious mental illness.
- Requires ongoing and long-term support from service providers.

# Rent Supplements with Supports

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## **Service Access:**

### Hours & Location

- Community based throughout KFLA; 8 a.m. to 4 p.m. Mon-Fri.
- Office located out of 552 Princess St., Kingston.

### Referral Pathway:

- Internal agency referral only.

# Rent Supplements with Supports

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## **Staff Model:**

- 3 Case Managers community based throughout KFLA.
- Work closely with community landlords and Home Base Housing to build partnerships.

## **Where We Are Heading:**

- Review of the program related to referral and discharge criteria for new clients to access rent supplement dollars.

# Rent Supplements with Supports

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## **Services we offer:**

- Assistance with securing safe housing.
- Assistance with maintaining the home (ADLs).
- Symptom Management/support.
- Assistance navigating community resources.

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# Housing Case Management in Non-Supportive Housing

**Mandy Locke**

Program Manager, ACTT, Supportive Rent Supplements



# Housing Case Management

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## **Program Description:**

Housing Case Managers have been supporting the non-supportive homes to assist the clients in maintaining housing and providing support around ADLs.

## **Who We Serve:**

Housing CMs support those with diagnosis of serious mental illness/addiction, residing in our non-supportive homes and do not have any supports.

# Housing Case Management

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## **Service Access:**

### Hours & Location

- 8 a.m. to 4 p.m. within our non-supportive homes throughout Kingston.
- Office is located out of 552 Princess St., Kingston.

### Referral Pathway:

- Needs are identified through presence in the home and through internal staff that may receive a call requiring staff support.

# Housing Case Management

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## **Staff Model:**

- 3 Case Managers

## **Community Outreach:**

- Work is done collaboratively with internal teams and external supports.

# Housing Case Management

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## **Services we offer:**

- Apartment/room/common area cleaning with clients
- Food bank support
- Client move plans
- Income and asset review support
- Facilitating house meetings
- Support clients at appointments
- Symptom management and support
- Support with finding other housing

# Housing Case Management

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## **Where We Are Heading/Innovation:**

- Ongoing referrals being explored for non-supportive housing – staff manage the waitlist.
- Partnering with Street Health and exploring internal collaboration with the Addictions Team.

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# Addiction Services

**Sheila Roewade:** Program Manager, Addictions, Counselling & Treatment



# Addictions Treatment Substance Use Program

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## **Program Description:**

The Program provides community counselling and treatment inclusive of a variety of services.

Sessions are provided as individual, family or group formats and duration is based on client needs and includes relapse prevention, family intervention, follow-up care and aftercare.

Service settings include outreach to a client's home, school, addictions agency or service setting and focuses on early intervention (not prevention) education and public relations.

## **Who We Serve:**

Persons aged 16 and older.

# Addictions Treatment Substance Use Program

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## **Service Access:**

### Hours & Location:

- Kingston 8:30 a.m. to 8:00 p.m. Monday; 8:30 a.m. to 4:30 p.m. Tues-Friday; Napanee and Rural, M-F 8:30 a.m. to 4:30 p.m.
- Extended hours planning underway.
- Staff work out of Kingston, Napanee, Sharbot Lake and Verona and can meet with clients in an office-based setting or the client's home.

### Referral Pathway:

- Through Central Intake, internal referrals, rapid re-entry process.
- Partner agencies we co-locate with can do direct referrals.

# Addictions Treatment Substance Use Program

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## **Staff Model:**

- Addictions Counselors

## **Community Outreach:**

- Staff are based in Kingston, Napanee, Sharbot Lake and Verona in support of access to clients across KFLA. Staff are co-located in partner agencies.

## **Services we offer:**

- Initial and ongoing assessment and treatment planning.
- Case management activities and brief intervention.
- Lifestyle and personal counselling to support client recovery goals.

# Problem Gambling/Gaming

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## **Program Description:**

Services include initial and ongoing assessment and treatment planning, case management activities, brief intervention and lifestyle and personal counselling.

## **Who We Serve:**

- This program provides community counselling and treatment to individuals 12 years and older.

# Problem Gambling/Gaming

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## **Service Access:**

### Hours & Location

Available in KFLA Monday, Noon to 8:00 p.m., Tues to Friday 8:30 a.m. to 4:30 p.m.

Services may be offered through outreach to a client's home, school, other addiction agency or service setting and focus on early intervention, education and public relation activities.

### Referral Pathway:

- ConnexOntario
- Central Intake
- Internal referrals

# Problem Gambling/Gaming

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## **Staff Model:**

There are 3 FTE staff covering KFLA:

- 1 based in Napanee
- 2 based in Kingston

## **Community Outreach:**

- There is emphasis on community outreach with this program with educational institutions and casinos.

# Problem Gambling/Gaming

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## **Services we offer:**

Clients are assisted individually in developing skills to manage gambling, gaming and process addiction. They are also provided support in maintaining and enhancing their treatment goals.

# Motherwise

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## **Program Description and Who We Serve**

Motherwise offers information, support, referrals and addiction counseling within a harm reduction framework for individuals pregnant or parenting children under age 6 who are experiencing addiction issues.

# Motherwise

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## **Service Access:**

### Hours & Location

- Available in Kingston, Napanee and rural KFLA (8:30 a.m. to 4:30 p.m.).

### Referral Pathway:

- No wait list.
- Referrals made directly to program staff.

# Motherwise

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## **Staff Model:**

- 2 Addiction Counselors provide service to clients across KFLA.

## **Community Outreach:**

- Working closely with community partners (e.g., hospitals, Family and Children's Services).

## **Services offered:**

- Services include Case Management and Counselling.

# Overall Addictions Program

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## **Where We Are Heading:**

- Rural service delivery model and colocation opportunities with partners
- Groups
- LGBT2SQ+ programming
- Evening and weekend hours – KFLA resource
- Team Lead addition

## **Service Innovation:**

- LGBT2SQ+ staff support
- Motherwise waitlist eliminated

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# Counselling & Treatment

**Sheila Roewade:** Program Manager, Addictions, Counselling & Treatment



# Counselling & Treatment

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## **Program Description:**

This program offers evidence-based psychotherapy with a focus on recovery and wellness for people with serious mental health concerns.

Counselling & Treatment (C&T) seeks to assist individuals with managing symptoms of psychiatric disorders, working through challenging issue(s) that are significantly impacting on one's mental health, improving communication and relationship skills, and increasing one's capacity to cope with and heal from serious mental health concerns.

C&T helps people with serious mental health concerns to be more successful in day-to-day living, and in achieving goals that will reduce the negative impact of mental health challenges.

Services support individuals in strengthening their long-term capacity to cope independently.

# Counselling & Treatment

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## **Who We Serve:**

Clients are adults 16 years of age or older, referred for, present with, or self-describe a need for psychotherapy to alleviate moderate to severe symptoms, and meet the readiness criteria (e.g., open to engaging in time-limited, goal-focused clinical treatment, etc.).

# Counselling & Treatment

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## **Service Access:**

### Hours & Location:

- Available in Kingston (8:00 a.m. to 4:00 p.m.) and Napanee (8:30 a.m. to 4:30 p.m.).
- Will expand to rural locations that we serve and explore extended hours across KFLA.

### Referral Pathway:

- Referrals are made through Central Intake by community partners or self-referral.
- Referrals can be made internally from other programs.
- Note: AMHS-KFLA began offering services to clients in November.

# Counselling & Treatment

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## **Staff Model:**

Clinical Counsellors deployed to cover KFLA and situated as follows:

- 2 staff based in the Napanee office
- 3 staff based in Kingston
- 1 rural embedded staff in Sharbot Lake/Verona

## **Community Outreach:**

Office-based locations across the region to support access by clients across all of KFLA.

## **Services we offer:**

The Program provides structured and time-limited individual and group therapy with the possibility of extending, and involves trauma-informed care.

# Counselling & Treatment

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## **Where We Are Heading:**

- Broadened Service Area - to Kingston, Sharbot Lake/Verona (new), and re-established in Napanee.
- Model – structured time-limited with possibility of extending, involves trauma-informed care.
- Planning/offering expanded hours.
- Establishing groups.
- Undergoing waitlist management.

## **Service Innovation:**

A complete new service model using evidence-based practice (e.g., cognitive behavioural therapy, brief solution-focused therapy).



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*Our changes support improved clients and family access to a more integrated system of care — one that relies on proven evidence-informed practices and advancements to support the journey to recovery.*