

eMental Health

for Youth and Young Adults



October 14, 2021



Project Leadership

Development

- Allison Bichel, previously
SPD AMH & MNCY SCN

- Mandi Newton

Current

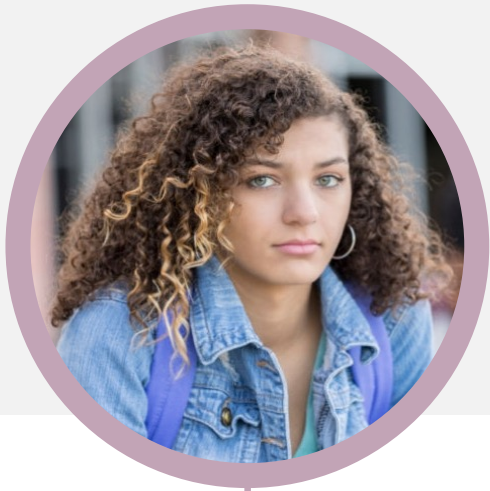
- Gina Dimitropoulos, Co-PI
Faculty Soc Work, U Calgary

- Sara Thomlinson, Director
Strategic Planning, AHS PAMH

Problem

In 2018

Alberta-wide:



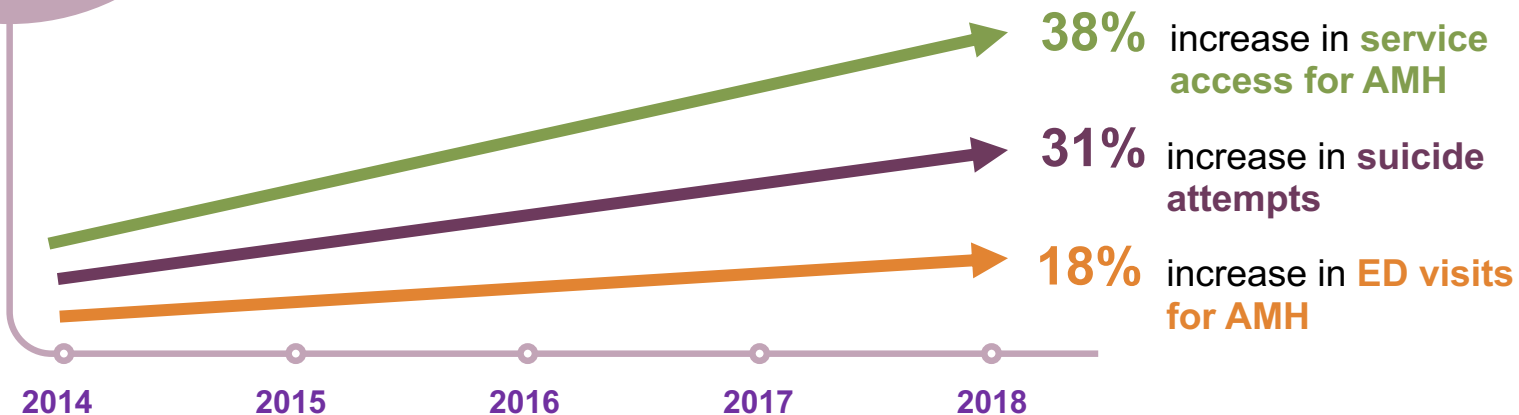
114,000 youth
access services for
AMH



20,439 youth
visit ED

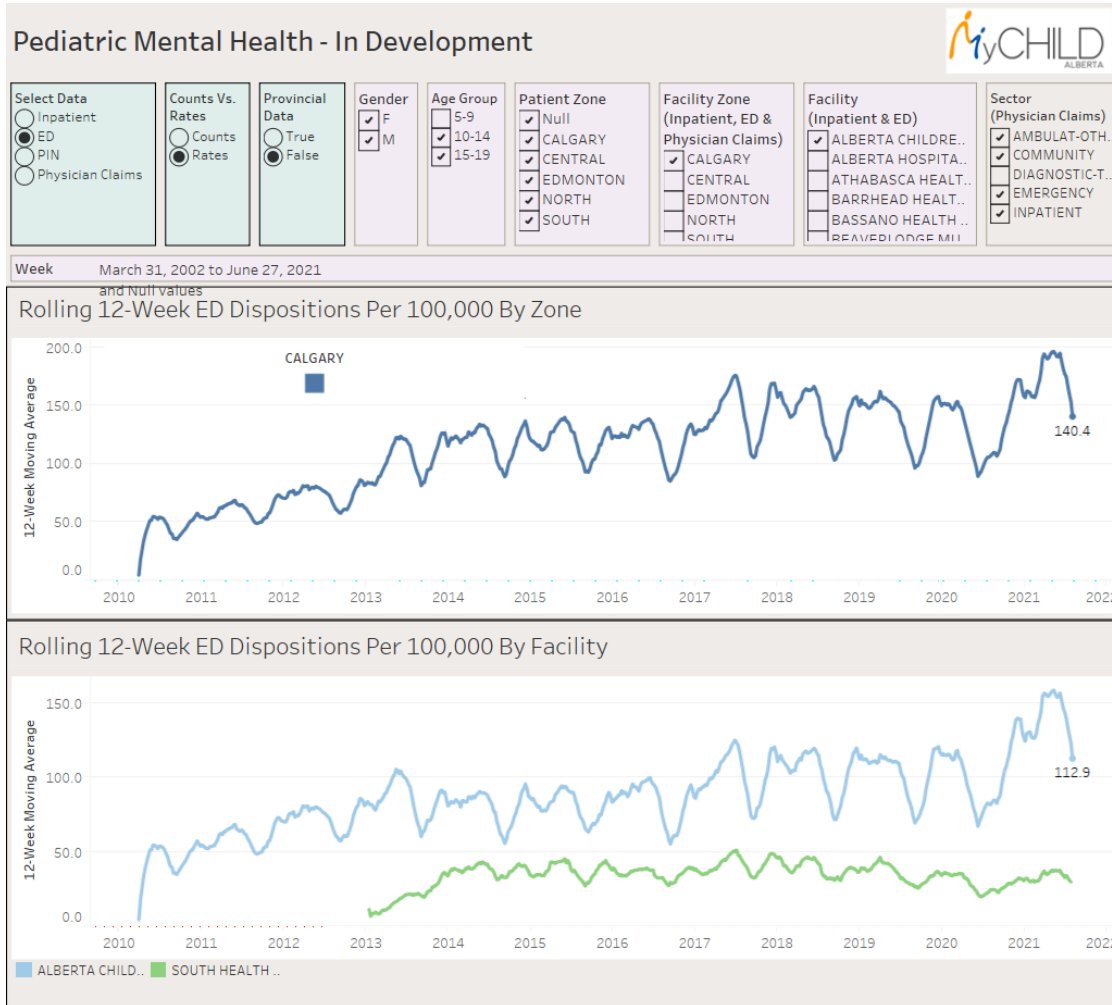


4,820 youth
attempt suicide

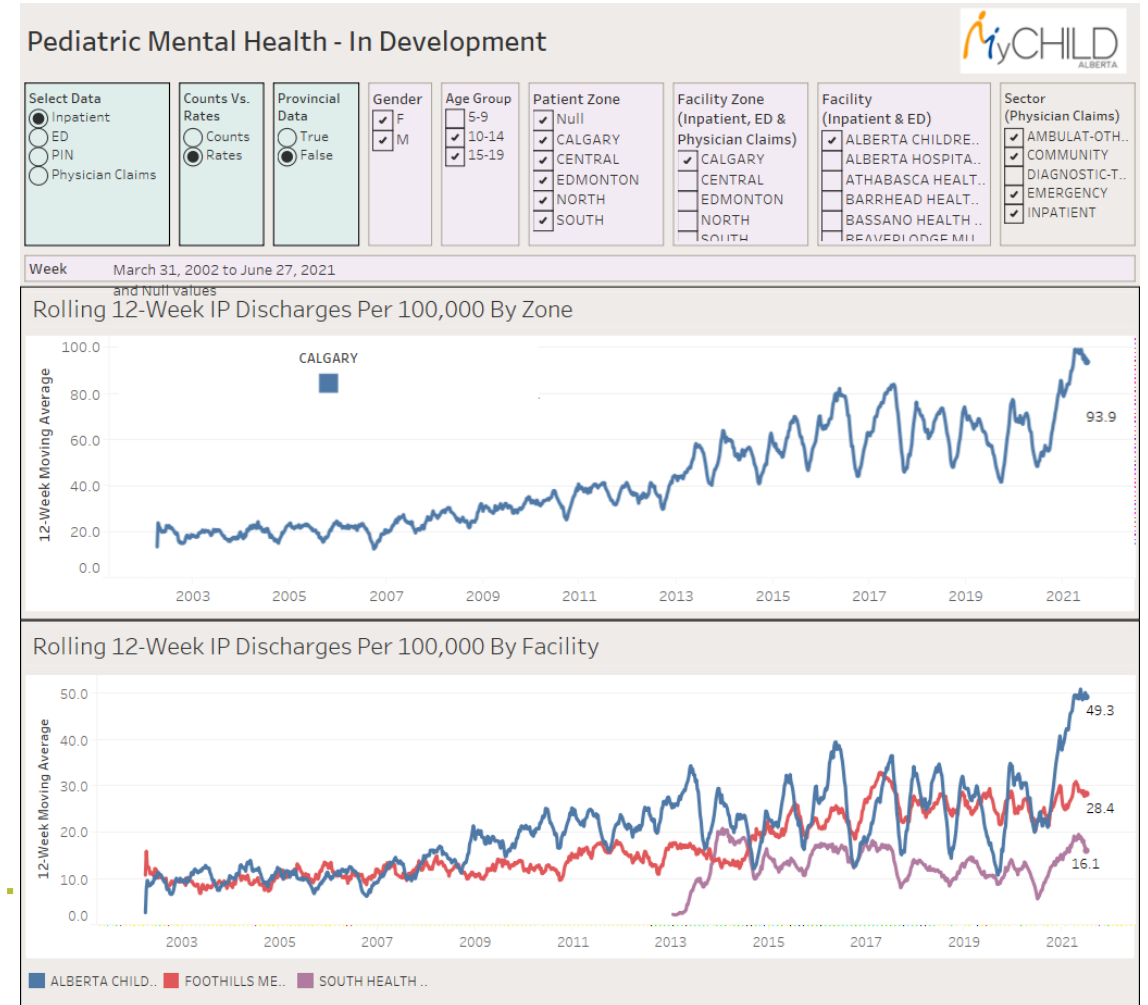


eMental Health for Youth and Young Adults

Calgary Zone ED Visits 12 week rolling average

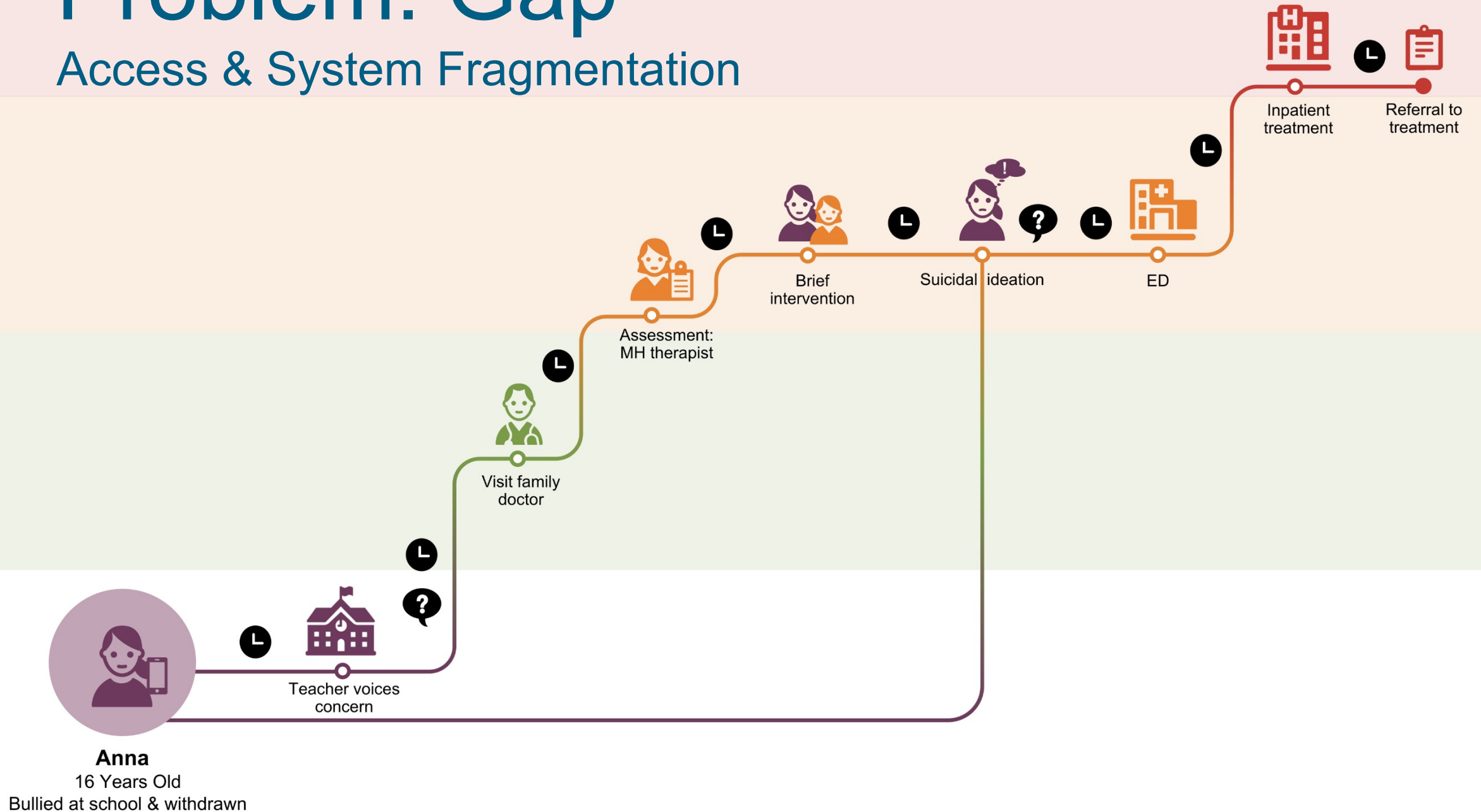


Calgary Zone Hospital Discharges 12 week rolling average



Problem: Gap

Access & System Fragmentation

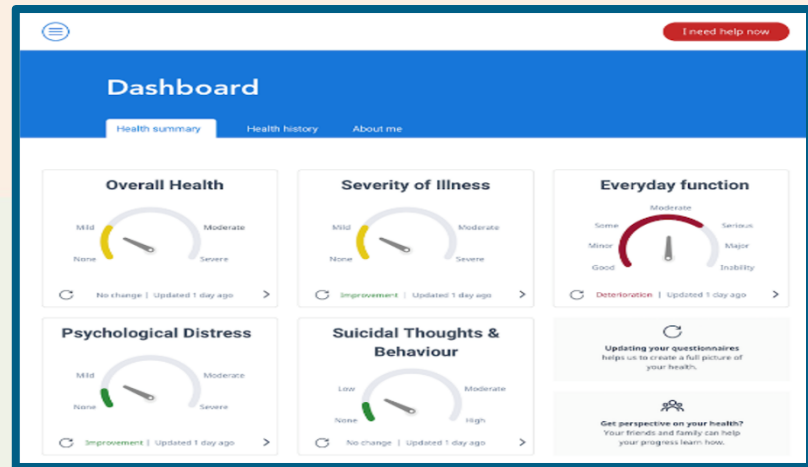


Innowell e mental health platform

- Joint Venture U Sydney & PWC Australia funded by Australian Government
 - Origin: Young & Well Research Centre, Melbourne, 2010s
 - Project Synergy, 2017, Aus\$30M
 - 5 scaled trials underway
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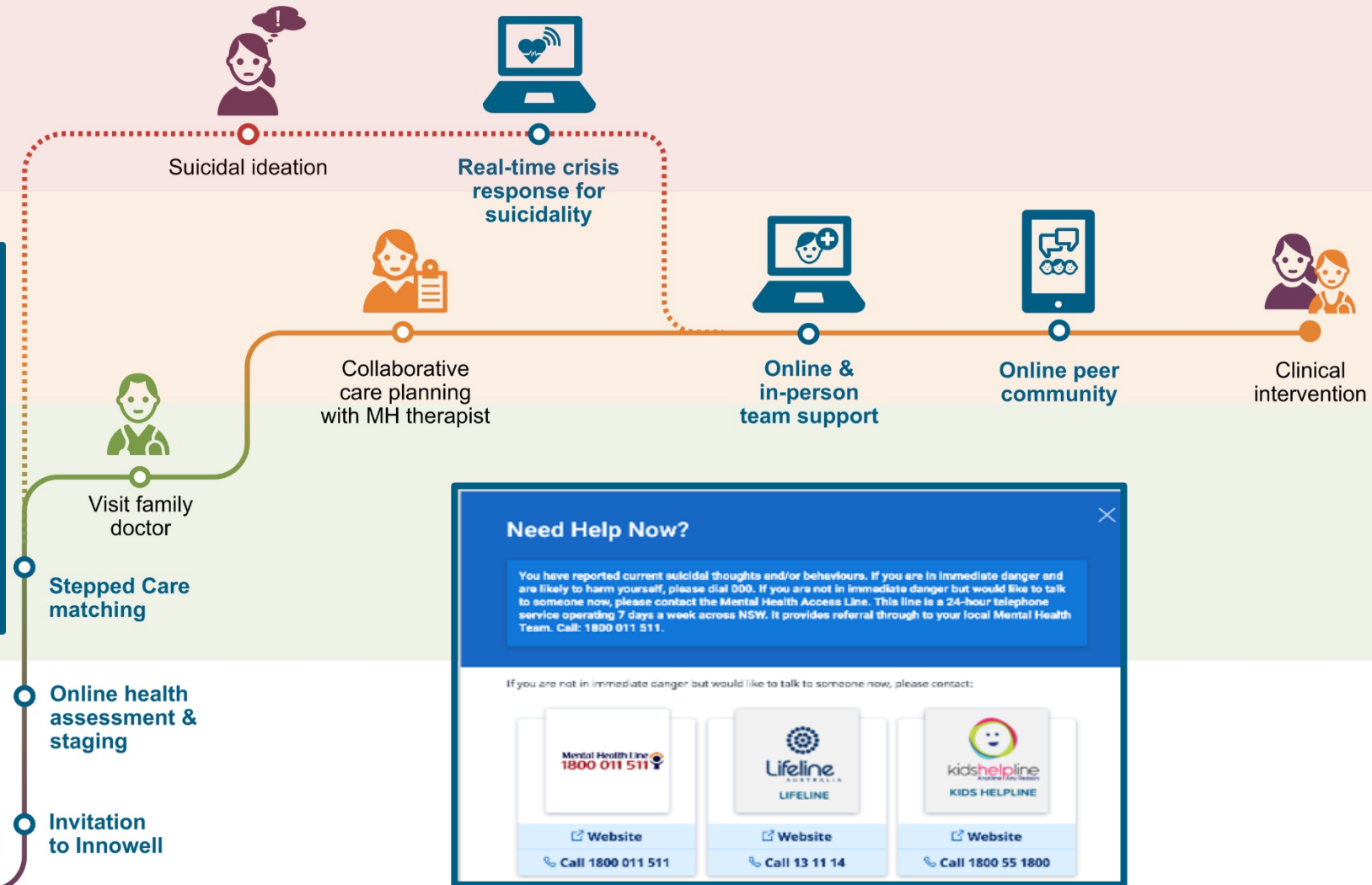
Solution

Stepped Care & eMental Health



Anna
16 Years Old
Bullied at school & withdrawn

Teacher voices concern



Need Help Now?

You have reported current suicidal thoughts and/or behaviours. If you are in immediate danger and are likely to harm yourself, please dial 000. If you are not in immediate danger but would like to talk to someone now, please contact the Mental Health Access Line. This line is a 24-hour telephone service operating 7 days a week across NSW. It provides referral through to your local Mental Health Team. Call: 1800 011 511.

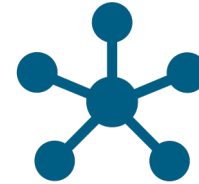
If you are not in immediate danger but would like to talk to someone now, please contact:

<p>Website Call 1800 011 511</p>	<p>Website Call 13 11 14</p>	<p>Website Call 1800 55 1800</p>
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Evidence



eMH intervention effective when delivered online



Stepped, collaborative, chronic care models



Innowell platform:

- Emerging results
- 5 Scaled trials underway



Improved service delivery:

- Collaboration
- Reduced wait times
- Immediate online services
- Increased responsiveness for suicidality

Study Objectives

**Improve AMH
outcomes for youth
& young adults**



**Improve access
and efficiency**



**Explore
indigenous and
LGBTQ-2S needs
eMH service
implications**



**Determine cost-
effectiveness of
eMH**



Patient & Community Engagement

Co-design with youth,
young adults, family
members



Indigenous research
design

LGBTQ2S populations

Study Design



	Baseline Assessment Pre-Study (4 Quarters)	Year 1				Year 2				Year 3			
		Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q 3	Q 4
2 Communities													
2 Communities													
2 Communities													
2 Communities													
2 Communities													

- Pre-intervention phase in Intervention Communities
- Post-intervention phase in Intervention Communities
- Data retrieval, cleaning, and study analyses

Outcome Measurement & Analysis



Service Utilization

- Access to AMH services
- ED utilization for AMH
- Suicide attempts



Mental Health Outcomes

- SOFAS
- QOL
- Suicidality score
- Depression score
- Substance misuse score



Qualitative Outcomes

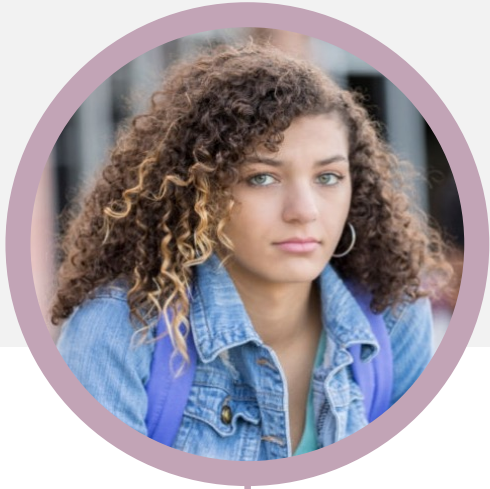
- Barriers & facilitators in each community
- Understand eMH planning & implementation process
- Understand the 'how & why' of change
- Document Canadian adaptations of Innowell platform
- Document eMH platform roll-out issues
- Perceptions & experiences of eMH platform

1) Multiple baseline study design

2) Community cohort –eMH vs standard care -- Use Propensity Weighting

Expected Impact

10 Communities:



\$1.2M

inpatient cost savings



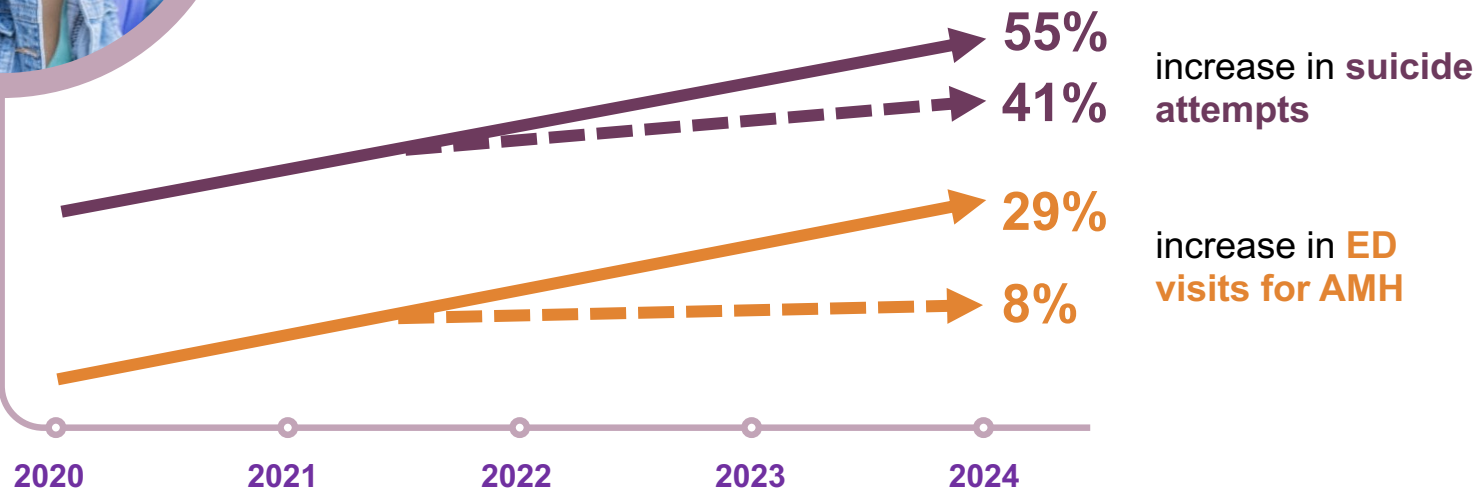
\$1M

ED visit cost savings

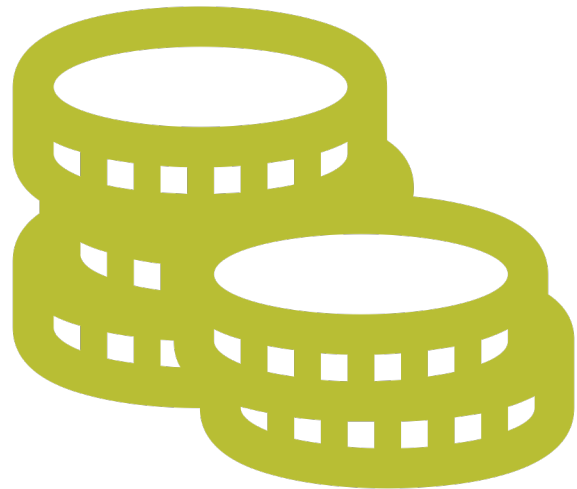


283

fewer suicide attempts



Funding

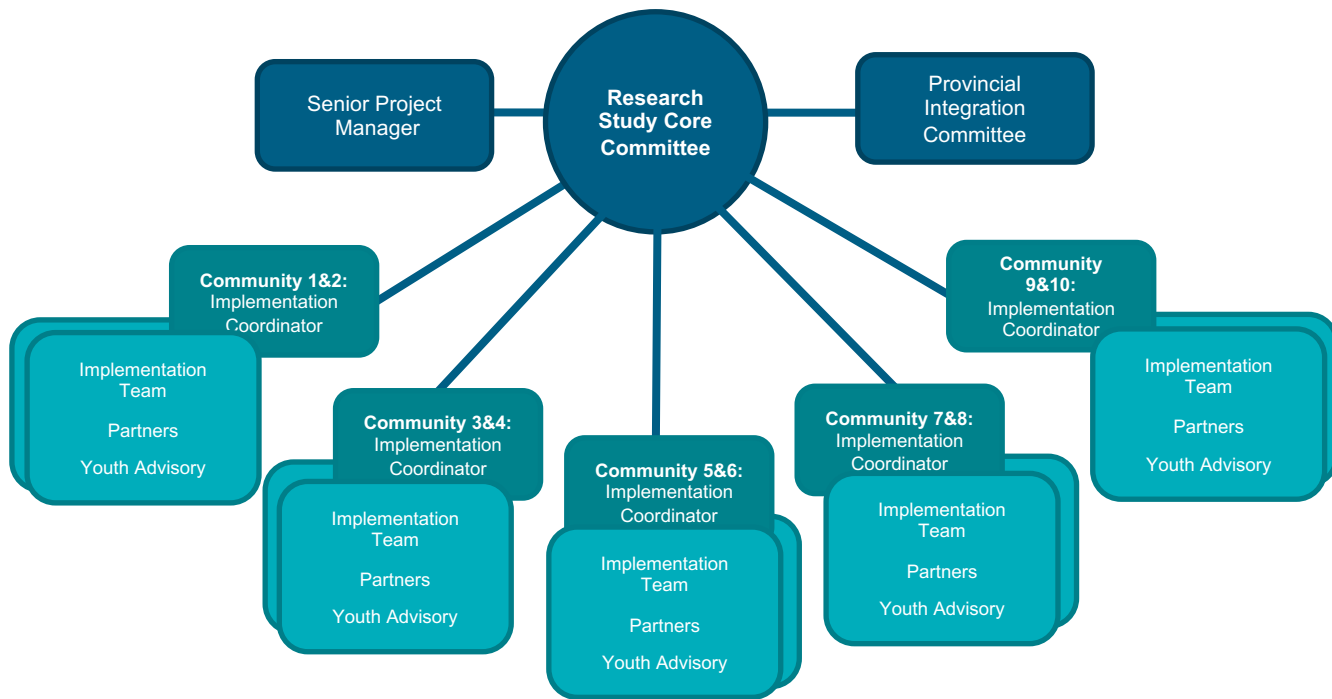


\$1M PRIHS

+

\$3.8M ACHF/Alberta Health

Project Team & Organization



Challenges to Date

Two communities have begun enrolling

- Legal agreements between many partners
 - Clinicians concern about potential legal risk
 - Slow enrollment to date
-

Questions & Discussion

