

All-Party Committee on Mental Health, Substance Use, and Addictions Meeting Minutes

Date: October 30, 2024

Time: 9:30 a.m. – 10:45 a.m.

Attendees:

Committee Members: John Abbott, John Hogan, Paul Pike, Joedy Wall, Jim McKenna, Perry Trimper, Jordan Brown

Officials: John McGrath, Gillian Sweeney, Niki Legge, Tara Power, David Coffin, Stephanie Wold, Bradley George

1. Presentation – Endeavor Family Practice Network (Endeavor) provided a brief overview of the roles and challenges of family physicians caring for patients with mental illness. Several physicians presented on behalf of Endeavor, noting:
 - In Canada, approximately 40% of patients seeking mental health support receive care exclusively from family physicians (Canadian Family Physician [CFP]);
 - Family physicians remain the most common source of support for people seeking professional help for mental health (CFP);
 - Family physicians are often the first point of contact in mental health care (Mental Health Commission of Canada); and
 - Treatments include Social Workers, Mental Health Nurses, Systems Navigator, Psychologist, Recreational Therapy, Occupational Therapy, Guided Exercise, Medications, with family doctors only able to treat with medication.

They advised that while family physicians can provide medications to patients, they do not have training in all areas of patient needs for mental health. As a result, because of long wait times for psychiatrists, family physicians end up looking after many patients with mental health needs, taking up additional time in their practices. This can lead to burnout and caretaker fatigue as well as a risk of not being able to provide the appropriate care for patients.

Endeavor shared that they currently have a pilot project in place embedding two Social Workers and two Registered Nurses in three clinics for 17,000 patients. They noted that this has been very successful in managing their workloads and ensuring that those patients seeking mental health help are able to be referred to the right provider in a timely manner. They are now better able to provide the right care at the right time. As well, it also reduces stigma as patients are coming to the same clinic that is already familiar to them. There is also higher job satisfaction for participating physicians as well as decreased burnout.

The pilot has been positively received by patients. It was acknowledged that while Family-Care Teams are an important new tool to providing care, they are not helping all family physicians right now. Adding additional Social Workers and Registered Nurses to family practices in the province would help more physicians stay in their practices, reduce burnout and also help patients to receive better care.

Recommendations to the Committee:

- Continued expansion of collaborative team-based care that is:
 - co-designed by all team members;
 - co-implemented;
 - co-governed; and
 - co-located, removing barriers to access.

2. Action Items

- Secretariat to provide a copy of the presentation to members.