



What clients think about mental health services

in the communities of Eeyou Istchee

CONTEXT, RESULTS, ANALYSIS

In June 2014, as a part of the overall Cree Health Board mandate to improve mental health services, the regional mental health department began a service monitoring quality assurance project. This involved gathering feedback from the most important stakeholders in the services: clients and front line workers. The project focused on clients' experience with on-Territory psychology and psychiatry services, and the relationship between these services, the local teams, and referrals to tertiary services provided off-Territory.

BY THE NUMBERS

100

individual interviews were completed (in nine communities)

75%

of interviewees were female. Clients and staff were equally represented.

35-65

age of majority of people interviewed; the youngest was 19, the oldest over 70.



SERVICES CURRENTLY OFFERED

- Psychology services currently consist primarily of **visiting therapists who spend a week in the community, once every 6-8 weeks**. Psychology services focus mostly on individual psychotherapy, though the therapists sometimes see couples, families or provide support/coaching to local teams.
- Psychiatric care is coordinated by three liaison nurses. A psychiatrist from the Douglas Hospital visits the coastal communities. Inland communities refer more often to psychiatry at the Chibougamau Hospital.



WHAT WE HEARD FROM THE CLIENTS

The services are appreciated and we need more of them.

- Need more frequent and consistent services (e.g. more visits, development of staff positions)
- Need to support client choices with their healing paths: choices of therapists, the ability to follow (and go between) a traditional and western healing path, between group and individual support, appointments by telehealth
- Better coordination and communication to avoid being tossed around between departments
- Need for better crisis support and support for caregivers
- Need to address confidentiality as a concern for clients and as a barrier to accessing services

NEXT STEPS, ACTIONS

Areas to invest:

Frequency • Consistency • Options

- Telehealth appointments
- On-call support
- Resident psychologists
- Support groups
- Integration of Cree helping methods and stronger ties to traditional healing

Development • On-Territory services

- Crisis and long term housing
- Day programs for individuals with mental health issues
- More input from users of the services
- Better ways of supporting people in crisis (e.g. suicidal crisis)
- Youth specific resources
- Improve local team capacity and autonomy through training, encouraging young people to study in this field

Communication • Coordination

- Implementing protocols and procedures to help guide clients and local teams
- Improving psychiatry connections (both for adults and children) e.g. Off-Territory transfers, and community reintegration post discharge

CONCLUSION

Most clients interviewed reported that the services are helpful and appreciated. Yet there are many areas to develop and improve.

We would also like to reach those who have more trouble being heard. If you have comments on the mental health services you are receiving, do not hesitate to contact your local CMC, or the regional mental health department: **819.855.9001, x4516.**

For more information, to obtain a copy of the report or to give feedback on the results or recommendations, please contact Leah Dolgoy, PPRO: leah.dolgoy@mail.mcgill.ca.



Conseil Cri de la santé et des services sociaux de la Baie James
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Cree Board of Health and Social Services of James Bay

