

KING STREET CENTRE

A PROJECT IN INTEGRATION

PRESENTED BY:

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What?

WHAT IS KING STREET CENTRE?

- A Mental Health and Substance Use Centre located in Kamloops
- Primary Care – General Practice Medicine located at the site (12 physicians signed to a group contract, doing shifts)
- Psychiatry – 5 days per week of psychiatry available for consultation and referral
- Mental Health & Addiction Team – Intake/Urgent Response, Developmental Disability Mental Health, Early Psychosis Intervention, Case Management & Life Skills
- Chronic Disease Management – Pharmacists, Diabetes Educators
- Promotion & Prevention – Street Nursing Clinic
- Housing Support – Via link with community partners

PURPOSE

- To provide wrap-around care for people with complex health care needs
- Focus on those with significant mental health and substance use issues
- To deliver services through an integrated model of care

Why it
matters

MHSU CLIENTS

In Kamloops, 27% of MHSU patients don't have a family physician

Life expectancy of those with SPMI is 25 years less than average

48% of people with schizophrenia have at least one medical condition

Needs Assessment

WHY IS THIS UNIQUE?

Communication

Processes used to enhance information sharing between MHSU and primary care. Effective for those with mild to moderate MHSU needs.

Collaborative Care

MHSU and primary care working with each other. Effective for those with a range from mild to severe and persistent MHSU issues.

Integrated Care

MHSU and primary care fully integrated with each other. Effective for those with moderate to severe and persistent/complex MHSU needs.

Client Population

- High needs
- Sometimes difficult to serve via mainstream care
- Highly stigmatized



Other models of care

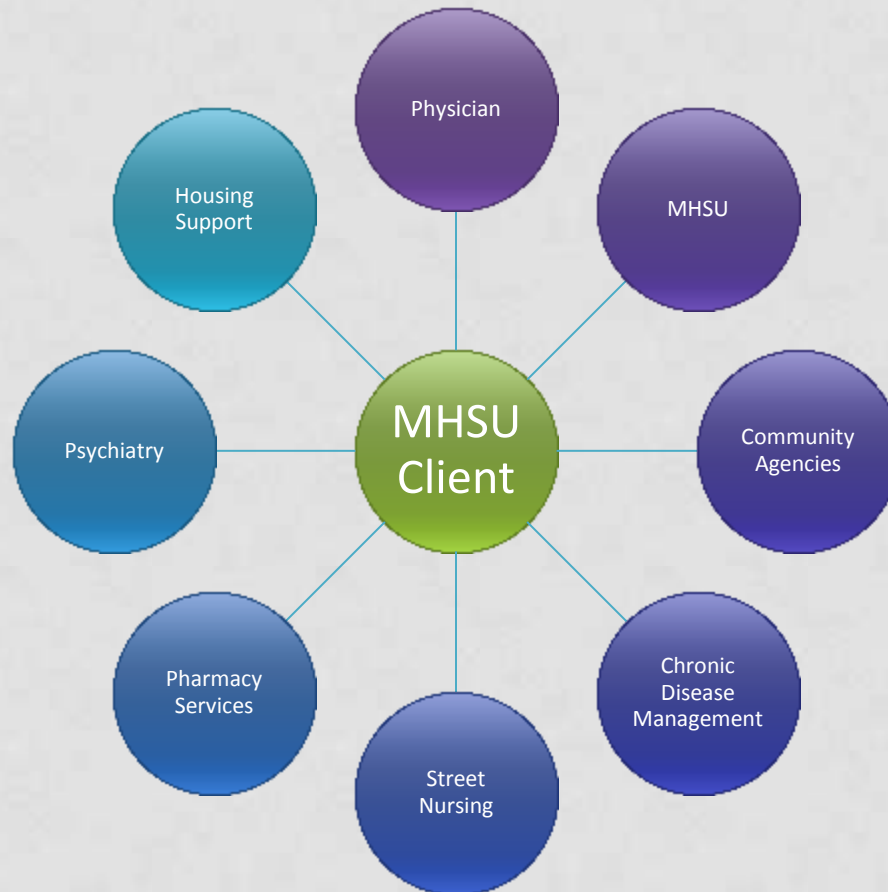
- Resulted in clients getting pushed out of services
- MHSU Services alone are insufficient to meet need



MHSU Client-Centered Model

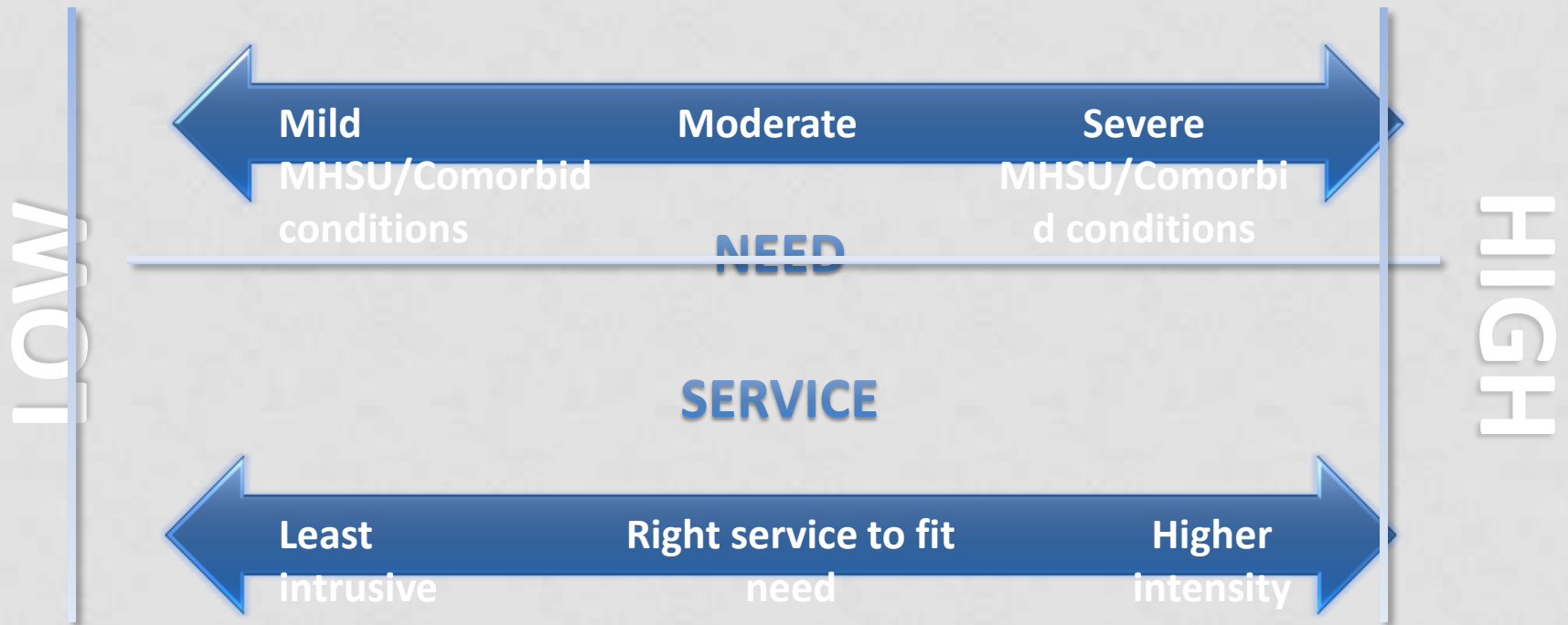
- Establishes logical grouping of services, based on needs

COMPREHENSIVE CARE



Approach

STEPPED CARE



GOALS



Decrease

- Emergency department utilization
- Fragmented care
- Inappropriate use of specialist services
- Length of stay in acute care

Increase

- Opportunities for care
- Health Outcomes
- Number of MHSU patients with access to GP services



Moving
Towards
Integration

The process...

King Street
Centre

January 2011

**Needs Assessment
Completed**

Stakeholders
identified
Client population
emerged

Relationships Formed

MHSU and Thompson
Region Division of Family
Practice
City of Kamloops
Community Partners

Endorsement of Change

MHSU Working Group
endorsed by the
Collaborative Services
Committee, a collaborative
leadership group (IHA,
Division of Family Practice
and the Ministry of Health)

October 2011

Preparation

Presentations made to
various stakeholders
Decision brief written and
endorsed by the Community
Integrated Leadership Table
in Interior Health
Continued work with
community partners and
stakeholders

November 2011
Implementation

Physicians began working
at the Centre to provide
primary care for MHSU
clients

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Process

UNDERSTANDING CONTEXT

- Attitudes
- Culture
- Policies and Procedures
- Infrastructure
- Resources
- Constraints
- Opportunities

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Process

PREPARING FOR CHANGE

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Process

COMMUNICATION & ENGAGEMENT

- Relationships have been at the centre of all of the work pertaining to King Street Centre
- These relationships have been leveraged throughout the process
- Each person played a key role (champions, project manager,) and were essential to the success of the project

IMPLEMENTATION OF CHANGE

“Successful implementation is a function of the relation between the nature of the evidence, the context in which the proposed change is to be implemented, and the mechanisms by which change is facilitated.”

(Kitson, Harvey & McCormack, 1998)

The context for this change began years ago:

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Process

IMPLEMENTING CHANGE

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Process

SUPPORTING CHANGE & DEVELOPMENT

DEVELOPMENTAL EVALUATION APPROACH

- Recognize we are working within a complex system
- There are unintended outcomes which can't be ignored
- We want to use the feedback we receive to continuously improve services, rather than get to a point where we keep things the same for summative evaluation purposes
- We encourage all types of feedback & find that when we receive constructive feedback it speaks to the relationship and gives us things to work on. We can then use these loops to change our practices.

EVALUATION

KEY PRINCIPLES

Improved Patient Experience

Improved Provider Engagement and Experience

Improved Health Outcomes

Sustainability

Improved Access for MHSU Clients

Evaluation

QUESTIONS

Are we meeting our identified purpose?

How are we providing treatment for co-morbid health conditions?

How is the experience for our target population, service providers and stakeholders?

What is working well?

What needs improvement?

Evaluation

METHODOLOGY

Surveys

- Clients
- Service Providers
- Referral Sources

Data Collection

- ER Diversions
- Number of clients seen, co-morbidities

Qualitative

- Story Capture
- Critical Case Examples

Evaluation

SHORT TERM OUTCOME GOALS

Interventions completed on chronic disease conditions

Reduced number of unattached MHSU patients

Increased amount of returning clients and referral of new clients

Increased staff communication, engagement & cooperation

Evaluation

SHORT TERM OUTCOME RESULTS

1633 Patient
Visits

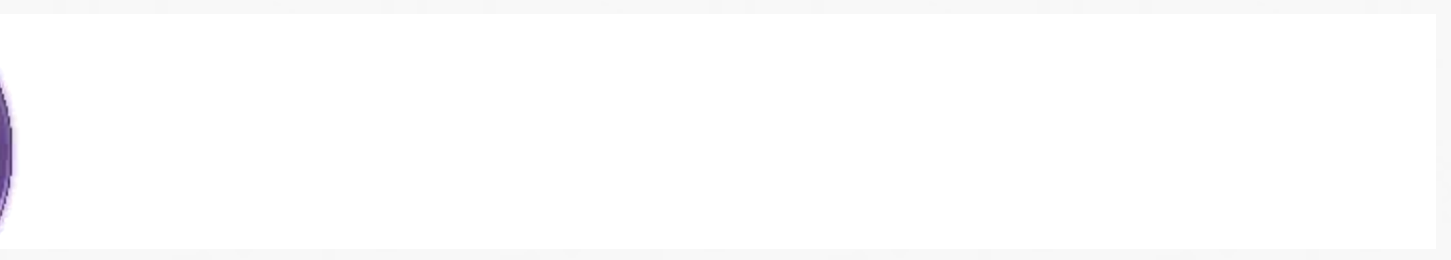
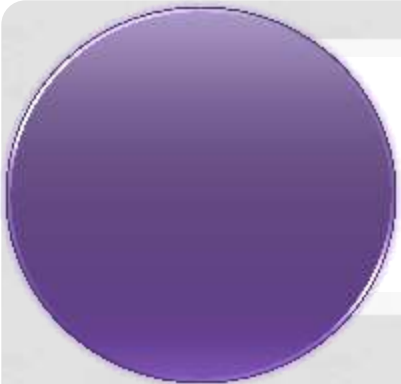
750 Patients
Seen by GP

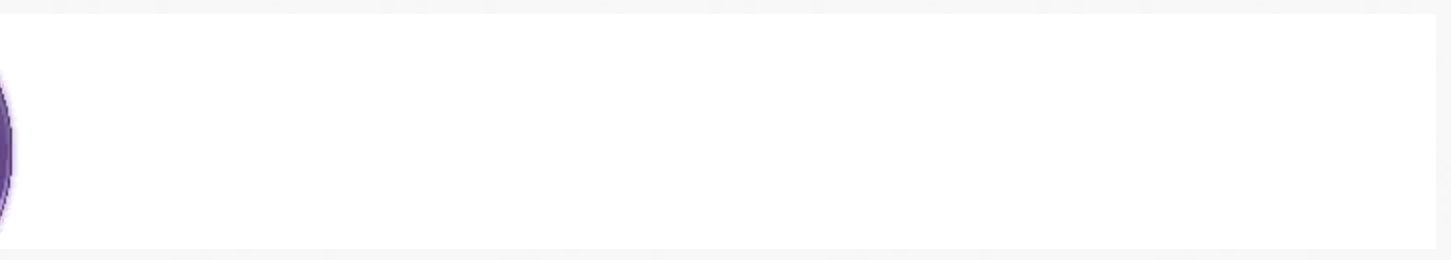
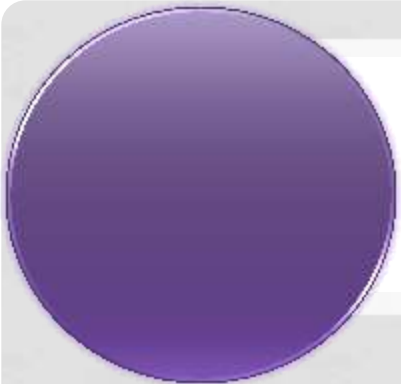
71% of
people seen
more than
once

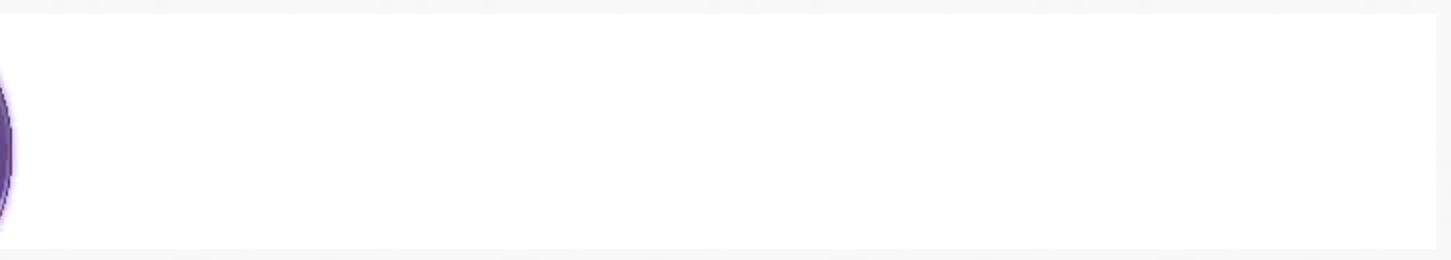
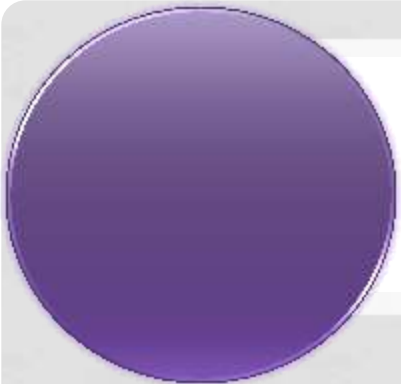
15 New
Referrals per
Week to GPs

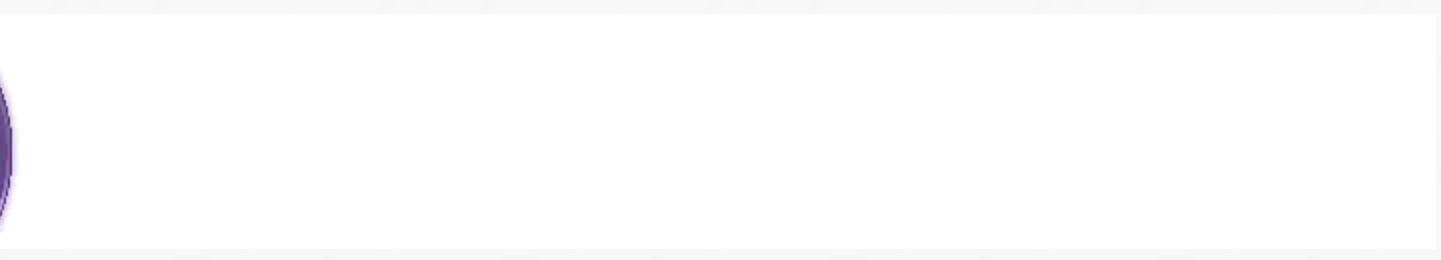
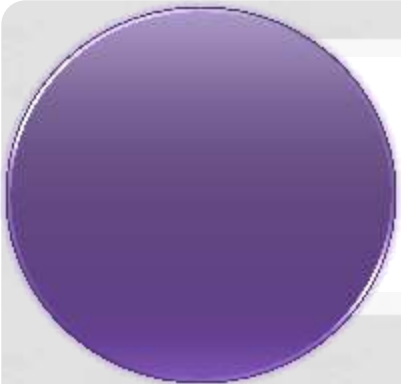
75 Patients
seen by
Diabetes
Educators

45 Pharmacist
Interventions









Evaluation

MEDIUM TERM OUTCOME GOALS

Increase in number and breadth of services offered

Increase in collaboration with community partners and CIHS counterparts

Increase in client and provider satisfaction

Enhancement of access to mainstream services for stabilized clients

Evaluation

MEDIUM TERM OUTCOME RESULTS

Pharmacy
providing
in-reach 2
afternoons
per week

Street
Nursing
Clinic one
afternoon
per week

Diabetes
Education
once per
month

Kitchen
Connections
group in
partnership
with
Interior
Indian
Friendship
Centre &
ASK
Wellness

Outreach
provided by
MHSU staff
at King
Street to
community
partners

NEXT STEPS