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**POSTER ABSTRACT****Improving Urgent Mental Health Care Pathways With Patients Rather Than  
For Patients: An Experience Based Co-Design Approach**

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***Introduction***

Urgent psychiatric care programs are hospital- or community-based outpatient services that expedite access to mental health care for high-risk individuals, yet these services are rarely evaluated from the perspectives of clients (Bergmans, Ninkovic, Sunderji (2019)). Currently patients follow a standardized carepath from emergency departments (EDs) to inpatient psychiatry (Form 1) for those in acute mental health (MH) crisis. The process has not significantly changed since 2007. Experience based co-design (EBD), an inclusive approach that meaningfully engages both service recipients and providers, is being used to identify solutions and improve service pathways for those in crisis accessing urgent MH care.

***Aims Objectives Theory or Methods***

By improving the efficiency and efficacy of the existing urgent MH care pathway and reducing inpatient admissions for those who wouldn't require it if there were more timely access to community MH supports we will improve both patient and provider experiences in urgent MH care.

EBD aims to capture and understand perspectives of those with lived experience to identify process issues through a patient lens, in parallel with QI processes that identify issues through a provider lens. Patients and providers then co-design solutions. This initiative will generate solutions/care pathways that bridge system-level gaps between MH crisis services in Simcoe Muskoka.

***Highlights or Results or Key Findings***

This initiative is in progress, and thus outcomes are not yet available. However, the highlights of the process to date includes 6 service recipient interviews conducted by a patient experience leader with lived experience (see Contributions below). The team is still recruiting and interviewing patients to ensure a representative sample from both regions. 12 interviews were conducted with local ED and Crisis Agency leadership staff, 11 ED physicians responded to our survey, and 11 ED leaders and Crisis Response Workers participated in process mapping.

The Improvement Event (September 30th, 2021) is to be attended by providers and patients from both regions. Goals of the event include:

- Validate the current state process and the identified issues, consolidated through interviews (above) (EBD methodology Capture and Understand phases)
- Create a shared understanding of opportunities for improvement, and
- Co-design change ideas and develop plans for prototyping and testing the changes. (EBD methodology Improve Phase)

### ***Conclusions***

Both region's teams will test the changes and measure the ongoing impact (EBD methodology Measure phase), and report to the planning committee on a regular basis. Once targets are achieved for improved efficiency and patient experience, teams will implement sustainability plans, including ongoing feedback loops from providers and patients.

### ***Implications for applicability/transferability sustainability and limitations***

Building on successful change ideas and using the EBD methodology in a range of other projects, we intend to replicate the process throughout Simcoe Muskoka. The systems integration this initiative represents fully aligns with, and is supported by the work of Central Ontario Health Team for Specialized Populations.