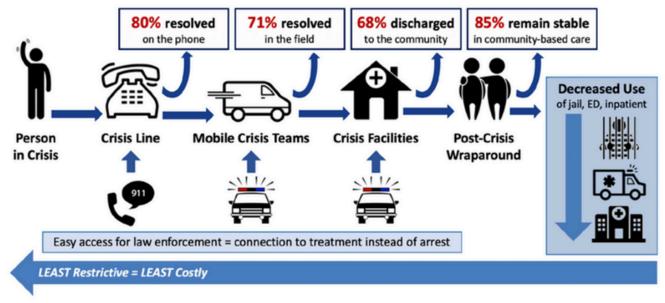
# Components of a comprehensive mental health and substance use crisis care system



In Ontario, individuals experiencing mental health and substance use (MHSU) crises do not have access to a consistent, comprehensive system of supports. The Supporting Transformation through Research, Evidence, and Action in Mental health (STREAM) Lab at the Waypoint Centre for Mental Health Care conducted a rapid review of academic literature and published reports to explore components of a comprehensive MHSU system. Based on 29 reviews, one evidence synthesis product, and eight multi-component approaches to crisis care we identified through the jurisdictional scan, we highlight key findings and considerations that may be relevant to decision-makers supporting MHSU systems planning in Ontario.

We did not identify any academic reviews that systematically describe a comprehensive MHSU crisis care system. However, we found three relevant American frameworks that each describe a continuum of care, from entry via a crisis line, to mobile outreach, through to community-based and hospital-based crisis services (see **Figure 1**). These frameworks were developed based on research and expert opinion, but have not yet been fully implemented or evaluated.

Figure 1. Continuum of crisis care from Balfour et al. (2020), as presented in Minkoff et al. (2021)



Based on the academic literature and jurisdictional scan, we identified five categories of crisis care, with correspond roughly with the components of the framework above. Findings from the literature are summarized below.



## Crisis lines and mobile applications

- High user satisfaction
- Reduced distress following a call among those with suicidal ideation
- Diverse populations may experience barriers to use



#### Mobile outreach

- May reduce hospital admissions or length of stay
- Clients prefer coresponder or nonpolice models compared to police-only models



#### Community bedbased services

- Limited evidence
- Higher satisfaction and improved experiences compared to hospital-based care



#### Other communitybased services

• Limited evidence



## Hospital-based services

- Negative experiences reported
- Innovative models in these settings may improve experiences and reduce admissions

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#### There are several limitations to the evidence presented:

- Our rapid review captured limited evidence addressing...
  - how different components work together in a comprehensive system.
  - health outcomes of any of the identified components of care.
  - substance use-specific crisis care.
  - o culturally-specific models of crisis care that cater to the needs of diverse populations.



#### Considerations for decision-makers:

## Draw on existing comprehensive frameworks.

Frameworks may integrate crisis lines, mobile outreach approaches, community-based approaches, and hospital-based innovations. Decision-makers may also draw on promising multi-component initiatives in Ontario.



## Approaches should be adapted to address regional variation and distinct population needs.

Considerations may include population size and geographic distribution; the complement of existing crisis-related resources; inter-organizational communication needs; and the needs of populations in the region, including Indigenous and Francophone communities, and other underserved populations.

## Strengthened integration across existing resources can support the development of a full continuum of care.

Coordination of existing services, infrastructure, human resources, and information technology will be critical for a seamless, comprehensive crisis system. Development of new initiatives to fill specific gaps in the continua of care may also be required.



## Efforts should include rigorous and ongoing evaluation, given the limited evidence.

A rapid-learning approach may enable ongoing data collection, analysis, and adaptation throughout the implementation process. Evaluation should consider the outcomes of diverse populations.



### References

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### **About STREAM Lab**

Supporting Transformation through Research, Evidence, and Action in Mental Health (STREAM) Lab is dedicated to meeting the evidence needs of mental health and addictions decision–makers in Ontario and beyond. STREAM products focus on evidence related to health systems, delivering actionable insights that can inform planning and decision–making. STREAM is based at the Waypoint Centre for Mental Health Care. The findings in this product should not be taken to represent the views of Waypoint or our funders.

