



Concurrent Capable Program Review Recommendations List

Creating welcoming, trauma-informed, recovery-oriented, and concurrent capable services for individuals and families experiencing addiction and mental health concerns.

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AMH Practice Supports have prepared this guide as part of Provincial Addiction Mental Health.

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Contact





















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How to Use the Recommendations List

After the Concurrent Capable Program Review (CCPR), use this recommendations list to support your team's identified quality improvement areas. This list is only meant as suggestions; other options may be available or suitable to your needs.

| Review Sections | Recommendations |
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| | <ul style="list-style-type: none">  Team Training, Collaboration, Meetings, Working Groups  Link to Resource  Computer Course  Link to Book, Chapter, Curriculum  Handout, Worksheets  Create a Document, Policy  Video |
| Welcoming and Engaging | <ul style="list-style-type: none">  Form a working group to improve your program welcoming environments, i.e., waiting room improvements, welcoming signs, telephone and greeting key messages.  MyLearningLink Courses: <ul style="list-style-type: none"> • PACES Learning Pathway • LGBTQ2S+ Basics: Creating Safer and More Welcoming Care • Communicating Effectively • Working with English Learners and Interpreters  Online reference Mental Health Commission of Canada Guidelines for Recovery-Oriented Practice  AHS Patient and Family-Centred Care Resources Shared Commitments Alberta Health Services Patient & Family Centred Care Resource Kit  Accreditation Canada: Focus on Client & Family Centred Care  NOD & Nametag 1-Pager  How to Rebuild Trust When Patients Experience Emotional Harm  The Wheel of Engagement Patient surveys and feedback <ul style="list-style-type: none">  Using Patient Feedback  Fueling Improvements Using Patient Experience Data  Policy Harm Reduction for Psychoactive Substance Use (includes policy) |
| Standardized Screening | <ul style="list-style-type: none">  Crisis resources Brainstorm crisis resources for your area and have pamphlets and contact information available. i.e., housing or shelters, employment, detox services, mobile crisis team (where available), food security services, and transportation.  Primary care access Confirm all new people accessing services have a primary care physician and/or know how and where to access a walk-in clinic. |

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| | <p>☞ Have local primary care network and walk-in medical clinic pamphlets available.</p> <p>✍ Warm handoff process – create a guideline about the expectations for how warm handoffs between services occur.</p> <p>📄 Screen for Concurrent Disorders with Global Appraisal of Individual Need Short Screener (GAIN-SS) is embedded in Connect Care. GAIN-SS training – online access</p> <p>📄 MyLearningLink Courses:</p> <ul style="list-style-type: none"> • PACES Learning Pathway • GAIN-SS: Global Appraisal of Individual Needs - Short Screener Training • SPRAM Module 4 - Initial Screening for Risk • Universal Screening for Domestic Violence |
| <p>Comprehensive Assessment</p> | <p>☞ Review program intake process: Referrals include warm handoff practices Addiction & Mental Health assessments include:</p> <ul style="list-style-type: none"> • Stage of change for each issue people identify as a concern. • Both mental status and substance use assessment. • People’s goals for a happy, meaningful life. <p>📄 MyLearningLink Courses:</p> <ul style="list-style-type: none"> • PACES Learning Pathway • Recovery Oriented Language • Online Education Suicide Prevention, Risk Assessment & Management (SPRAM) |
| <p>Integrated Treatment/ Recovery Planning</p> | <p>☞ Review documentation of care planning.</p> <ul style="list-style-type: none"> • Identify skills, successes, and strengths, including ways people managed well in the past. • Identify the stage of change people are at for each concern explored. There may be different stages of change for other concerns. Focus on areas people are open to making changes in. • Consider input about substance use, gambling, and mental health concerns to create one recovery plan. <p>Adopt a patient-centred, trauma-informed, recovery-oriented, and strengths-based template for recovery planning and case conferences.</p> |

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| <p>Comprehensive Interventions</p> | <p>🔗 Identify opportunities for Medication Teaching for people using prescribed medication. <u>My Health Alberta</u> is for clients with online access to the library. <u>Medications</u> <u>Medication tracking tool</u></p> <p>🔗 Invite psychiatrists or pharmacists to present on medication regularly at team meetings to promote knowledge exchange.</p> <p>📖 <u>MyLearningLink Courses</u></p> <ul style="list-style-type: none"> • PACES Learning Pathway • Appropriate Use of Antipsychotics (AUA) - Pharmacological Restraints and Behaviour Tracking • Appropriate Use of Antipsychotics (AUA) - Managing Responsive Behaviours • Appropriate Use of Antipsychotics (AUA) - Sleep • Tobacco Cessation Pharmacology <p>🔗 Online reference <u>AMA Choosing Wisely Canada Recommendations</u></p> <p>🔗📄 Online reference <u>Patient Care Handouts (alberta.ca)</u></p> <ul style="list-style-type: none"> • Alcohol, Tobacco, and Drug Use • Medications • Mental Health <p>🔗 Online reference Best Practice for <u>Mood Disorders</u> and Substance Use.</p> <p>🔗 Develop Group programming for a Concurrent Disorders group – drop-in, inclusive, mutual support combined with psychoeducation.</p> |
| <p>Transitions in Care</p> | <p>✍️ Create or review transition guidelines.</p> <ul style="list-style-type: none"> • To ensure a seamless continuum of care (i.e., warm handoff). • Collaboration with the person being transferred and their family members when appropriate. • Develop an integrated plan with AMH healthcare providers and community health and social services partners. • Identify the specific stage of change for each issue that was identified. Check-in regularly as these change over time. • Develop risk management plans and teach people alternate ways to cope. Complete a follow-up wellness check phone call for people who miss appointments or stop services unexpectedly. <p>📖 <u>MyLearningLink Courses</u></p> <ul style="list-style-type: none"> • PACES Learning Pathway <p>🔗 Online reference AMH provincial Policy: <u>Patient Referral, Admission, Assessment, Treatment, Discharge Planning</u></p> <ul style="list-style-type: none"> • <u>Care Transitions policy</u> |

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| | <ul style="list-style-type: none"> • Care Transitions procedure • Care Transitions Algorithm resource • Care Transitions FAQ resource |
| <p>Program Collaboration and Partnership</p> | <p>🗨️ Regularly invite community substance use, gambling and mental health service providers to staff/team meetings to discuss communication, referrals, and emerging trends.</p> |
| <p>Concurrent Capable Competency Development</p> | <p>📄 Clinical Documentation: Practice Wise Presentations</p> <ul style="list-style-type: none"> • Clinical Documentation for More Accountable Care • AHS Clinical Documentation: Very Good...Wait...What? • Interaction & Communication Documentation • Practice Support Documents for Health Professions • Clear & Efficient Clinical Documentation <p>📄 Policy Suite Clinical Documentation</p> <p>📁 AHS AMH</p> <ul style="list-style-type: none"> • Provincial Addiction & Mental Health Curricula & Experiential Skills (PACES) Training • Alberta Opioid Dependency Treatment (ODT) Virtual Training Program Alberta Health Services • Addiction & Mental Health for Professionals Resources • Antipsychotics Safety Monitoring Alberta Health Services • Alcohol & Health Series Alberta Health Services • Enhancing Concurrent Capability (ECC) • Addiction Prevention Toolkit Alberta Health Services • Trauma Training Initiative Alberta Health Services <p>YouTube</p> <ul style="list-style-type: none"> • Addiction & Mental Health Speaker Series Alberta Health Services <p>📁 MyLearningLink Courses</p> <ul style="list-style-type: none"> • Addiction Counsellor Series – Parts 1, 2 and 3 • Mental Status Exam • Recovery Oriented Language • SPRAM modules • Trauma-informed care <p>✂️ Embed recovery-oriented concurrent capable competencies in program documents:</p> <ul style="list-style-type: none"> • In human resource policies • In job descriptions • Written Scope of Practice <p>🗨️ Create a Staff development plan based on team development goals</p> <ul style="list-style-type: none"> • Orientation activities • Clinical supervision • Self-directed learning activities |

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| | <ul style="list-style-type: none">• Formal learning events <p>☞ The Canadian Centre on Substance Use and Addiction (CCSA) competencies for Canada's Substance Use Workforce have been adopted to reflect addiction and mental health clinical knowledge and skill level. Workforce Competencies Canadian Centre on Substance Use and Addiction (ccsa.ca)</p> |
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