

RAAM Clinics

Providers at RAAM clinics deliver immediate counselling, prescribe appropriate addiction medication and connect patients to community treatment programs and primary care physicians in their community for ongoing care.

Since the clinics opened last year at locations in Winnipeg, Brandon, Selkirk and Thompson, there have been 281 referrals to Addictions Foundation of Manitoba treatment programs and facilities, and a further 216 referrals to other programs/facilities. Others referrals include primary care providers, non-medical withdrawal management services and community mental health services.

Since August 2018, more than 1,100 individuals have received support or treatment through the RAAM clinics. The main substance used by RAAM clinic clients was alcohol (45 per cent), followed by methamphetamine (25 per cent) and opiates (22 per cent).

New investments announced today will increase hours of operation at the Crisis Response Centre and AFM River Point Centre in Winnipeg, as well as the 7th Street Health Access Centre in Brandon. These hours will be dedicated to followup care for returning patients, freeing up time during regular walk-in hours for new patients.

Today's investment will allow for the expansion of staffing resources at all RAAM locations, with additional funding for physicians, nurses, counsellors and administrative supports.

Women's Addiction Treatment Beds

The investment will improve access to care and ensure women have a safe, sober and structured setting to focus on their recovery from dependence on alcohol or drugs.

Twelve beds will be added at the 28-day residential treatment program offered by the Addictions Foundation of Manitoba (AFM) in Winnipeg. The program provides a setting for women to focus on their recovery from dependence on alcohol or drugs.

Four beds will be added to the Behavioural Health Foundation's residential program for women and children. This program provides gender-specific, trauma-informed long-term treatment for four to six months, with some up to one year. Cultural programming is a strong component of treatment, with 80 per cent of patients being Indigenous women.

Demand for services for women has greatly increased over the last few years resulting in a wait-list of up to six months for facility-based addictions treatment. It is estimated the wait-list for treatment will decrease by 25 per cent after additional beds are introduced.

Strongest Families Institute

The Strongest Families Institute uses technology to provide evidence-based coaching services to children, youth and families dealing with mild to moderate mental health issues. The program was introduced in Manitoba earlier this year following successes in other jurisdictions and is now being expanded to help to provide programming for an additional 500 children, youth and their families.

Families can access up to 17 coaching sessions over the telephone, at a time of day/week that is convenient for them, making the program highly accessible. The program fills a gap during the wait time by offering lower level supports intended to prevent further derogation of the individuals' issues prior to entering treatment.

VIRGO Recommendation Implementation

A number of recommendations have been completely or partially addressed to improve access to care through the following initiatives including:

- signing on to Canada's Emergency Treatment Fund to establish flexible-length withdrawal management and stabilization services, including recovery beds, in Winnipeg and Brandon;
- opening a fourth Program of Assertive Community Treatment (PACT) team in Winnipeg to support adults in the community who are experiencing difficulties as a result of living with a mental illness;
- equipping paramedics with olanzapine to treat agitated patients at risk of developing meth psychosis;
- implementing tele-psychiatry in crisis and emergency settings in Winnipeg to reduce unnecessary transfers between emergency departments for psychiatric assessments;
- improving processes on inpatient mental health units to reduce length of stay;
- adding addictions psychiatry consultation services to the RACE (Rapid Access to Consultative Expertise) service;
- enhancing access to addictions medication coverage for suboxone, naltrexone and acamprosate through the Manitoba Pharmacare program;
- partnering with the College of Physicians and Surgeons of Manitoba to increase training for prescribers who can administer opiate replacement therapy;

- signing a memorandum of understanding to enhance security at Eden Mental Health Centre and Boundary Trails Health Centre so that Eden has 24-7 security coverage;
- introducing legislation to enable consent to share information with family members and loved ones;
- using a whole-of-government approach to implementing recommendations and establishing project teams with a strong inter-sectoral, cross-governmental component;
- establishing a Provincial Problematic Substance Use and Harms (PSUH) Co-ordinating Committee within MHSAL to co-ordinate work related to existing and emerging PSUH challenges, such as crystal methamphetamine;
- adding six mental health inpatient beds to support patients with co-occurring mental illness and addiction challenges at Health Sciences Centre;
- increasing the number of psychiatrists practising in Manitoba through additional training opportunities to reduce wait times for psychiatric consultation;
- signing a bilateral agreement with the federal government for funding for home and community care, and mental health and addiction services;
- beginning the process to create a Provincial Mental Health and Addiction Program by transitioning existing mental health and addiction services that have a provincial scope under Shared Health, beginning with Winnipeg Regional Health Authority programs such as PsychHealth Centre, Crisis Response Centre and Crisis Stabilization Unit. The Selkirk Mental Health Centre and MATC may also transition under Shared Health. Once enabling legislation under Bill 10 has passed and is in force, the Addiction Foundation of Manitoba (AFM) will also move under Shared Health to support better integration of MHA services;
- implementing changes recommended in the AFM's internal review to improve occupancy at its residential treatment programs to 99 per cent occupancy in October 2018 from 84 per cent occupancy in April 2017;
- conducting a formal review of the practice and impact of Manitobans being sent out of province for complex substance use and addiction and co-occurring disorders treatment including launching a tendering process to secure appropriate services by a Manitoba-based service provider;
- establishing the VIRGO Implementation Project Team within MHSAL with dedicated staff focused on implementing the VIRGO strategy including those projects/activities that include a strong inter-sectoral, cross-governmental component;
- enhancing the capacity of community-based service providers to support newcomer clients with mental health, and substance-use and addictions issues, including funding for Addictions Foundation of Manitoba, Aurora Family Therapy, NEEDS Centre and Family Dynamics.