

## **Community Action Report – Prince George – February 16, 2015**

### **Introduction:**

David Diamond introduced the play and the process of the interactions between play and audience to the 122 audience members. A shared experience was explored by inviting the audience member to show by hand how many had been personally impacted by the mental health system either through themselves personally or with immediate family members. The result was that over 80% of the audience raised their hands showing the shared and lived experience within the room. David introduced the concept of Human Centered Care and invited the audience to share views on what might increase the possibility of humanization of the system:

- Recognition and honoring of people trying their best (as an accepted premise) regardless of the expectations of the system.
- Focusing our energies on prevention – current system focuses on crisis intervention rather than prevention.
- Getting back to a system that is set up to serve the patient rather than the current process of the patient serving the system.
- Ensuring that care givers are focused on the person (needs, strengths, challenges) rather than protocols of the system.
- Taking good care of the care givers to prevent burnout
- Ensuring that when people begin to improve they are still supported – often when a service is put in place or people begin to show improvement they are dropped and the potential to fall through the cracks is increased.
- Ensuring that basic human rights are adhered to.

### **Recommendations:**

The following are recommendations that arose out of the “Stop” process and interventions that audience members brought to the stage.

1. For the issue related to “Jack” where the removal of his medications on entry into a recovery centre results in a rapid and deep decline the following was advanced:
  - Ensure a process where an individual is allowed to keep a minimum amount of meds to ensure stability until such time as they are medically assessed in the new facility.
  - Ensure an approved doctor/prescription provider is available 24/7 for intake purposes
  - Pre-register for services and be supported on the streets until medications are approved
  - Accept people where they are at and ensure a harm-reduction facility is in place that would support those on prescriptions like oxycodone.
2. People are entitled to care that fits their needs and should not be required to fit into a set prescription in order to get services.
  - People are ending up in the wrong care in order to achieve “safety” – in this case Jack must “fit” a criteria for addiction with “sufficient” oxycodone use in order to have some form of housing/support.
  - Understanding that the street can be viewed as safer than a system where removal of medication can place someone in severe health crisis.
3. Family supports and services and education could benefit from focusing more on the human connection and less on the problem. By assisting families to focus on creating communication and acceptance and reducing the need for control then the individual can relax more and have increased safety. The push towards solutions or uncovering “the elephant in the room” can create barriers that increase anxiety and the need to control.

4. Individual care providers have a responsibility to be clear about their limits within a system that continues to push people past limits and into burnout. “we need to go to our managers and stand up and say I can’t do this anymore. This is the only way the government will step up”.
  - Further recommendations related to the practice of removing medications on entry to a system were to “honor the original physician’s prescription” as well as having a doctor on call 24/7 as well as honoring the expertise of pharmacists.
5. Diagnosis requires ensuring that the individual directly impacted have some control in the process and that a focus on strengths will open up space more than a focus on “the problem”.
  - Ensure the individual has the opportunity for their own voice to be heard and the opportunity for choice.
  - Exploring of other options is not simple but our system can also overly complicate what could be a simpler process
  - Family/supports have important role to play and their anxiety and fears for their loved ones requires support also.
6. Craving and loneliness are powerful human emotions and when left unsatisfied will likely continue to be sought. We can often hope that by blocking an “unsafe decision/option” that we will encourage a return to home or safety but the reverse may actually result. Relationships occur at all levels and have the potential to “open up space” and humanize even when formal interventions do not occur.
7. Need a system that supports and honors and expects the intercommunication between doctors for the benefit of the individual. Doctors heavily impacted by system off-loading with the end result of leaving the profession for some or setting up processes that will protect them but may result in difficulties for their patients.
  - First Nation approaches provide more humanizing experiences and we could benefit by having those processes more a part of the system. This play is presenting the problems that exist and acknowledge that many of the solutions could exist within the first Nation practices.
8. Many unspoken issues within families and again the importance of the theme of helping families and support people to understand that acting on frustrations and fears can result in blockage while not pushing, “softness”, and communicating about person can open up the space required to get to the real connections.
9. As a system we often spend “lots of time explaining” and we could benefit by putting more time into actions and less into explaining – that calming could come from people seeing that we are working on getting needs met rather than expecting them to calm from our words that we will work on getting needs met. In the final scenario “Jack” had already spent a considerable length of time waiting and important to acknowledge the waiting already done that we cannot see.
  - Conflict and aggression can be escalated by taking sides and making assumptions
  - Reduction of conflict and aggression can occur by remaining balanced and not taking sides and clearly showing a desire and action to work on correcting problems and getting needs met.

### **Conclusions**

An overall theme that emerged from the evening was the fact that our mental health care system has evolved to a place where much of the time patients serve the system rather than the system serving patients. There was an overarching theme related to the need to focus on the individual/family and focus needed on addressing the roadblocks in the processes that interfere with steps to health and interfere with the building of relationships.

