

CITY OF HAMILTON

PUBLIC HEALTH SERVICES Clinical and Preventive Services Division

TO:	Mayor and Members Board of Health			
COMMITTEE DATE:	October 17, 2016			
SUBJECT/REPORT NO:	Alcohol, Drug & Gambling Services – Community Mental Health Promotion Program Budget 2016-2017 (BOH16052) (City Wide)			
WARD(S) AFFECTED:	City Wide			
PREPARED BY:	Susan Boyd (905) 546-2424, Ext. 2888			
SUBMITTED BY & SIGNATURES:	Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department Glenda McArthur Director, Clinical & Proventive Services			
	Director, Clinical & Preventive Services Public Health Services Department			

RECOMMENDATION

- (a) That the 2016-2017 Alcohol, Drug & Gambling Services Hamilton Niagara Haldimand Brant, Local Health Integration Network budget; 100% funded by the Hamilton Niagara Haldimand Brant, Local Health Integration Network, with a 0.24 FTE decrease, be approved;
- (b) That the 2016-2017 Community Mental Health Promotion Program Hamilton Niagara Haldimand Brant, Local Health Integration Network budget; 100% funded by the Hamilton Niagara Haldimand Brant, Local Health Integration Network, be approved; and
- (c) That the Medical Officer of Health or delegate be authorized and directed to receive, utilize and report on the use of these funds.

EXECUTIVE SUMMARY

Alcohol, Drug & Gambling Services (ADGS) is a 100% provincially funded program that provides comprehensive assessments, outpatient counselling, referrals for treatment, and collaborative service delivery with other agencies in the community. The Community Mental Health Promotion Program (CMHPP) is a 100% provincially funded program that provides mental health case management and outreach services to the Hamilton community.

There continues to be no increase to base budget for either program, resulting in eroding operating budget lines to cover increases to staffing costs. There has also been continued eroding of staffing hours, with the ADGS program having a further 0.24 FTE reduction in this year's budget. This reduction has been accommodated through decreasing part-time staffing hours. Continued efforts have been made to implement continuous improvement initiatives, to meet targets and service demands. However, it is becoming very difficult to find efficiencies to meet service needs.

Alternatives for Consideration – See Page 4

FINANCIAL – STAFFING – LEGAL IMPLICATIONS (for recommendation(s) only)

Financial: There continues to be no increase to base budget in the HNHB – LHIN budgets. The table below outlines the reduction in FTE as an impact of no increase to budget for years 2015-2016 and 2016-2017.

Community Mental Health Promotion Program, and Alcohol, Drug & Gambling Services Budget

Funding Source	Annual Budget 2016-2017	Annual Budget 2015-2016	FTE 2016- 2017	FTE 2015-2016	Change in FTE
HNHB – LHIN*; Community Mental Health Promotion Program	\$684,140**	\$681,982	5.6	5.6	No change
HNHB – LHIN*; Substance Use	\$712,691	\$712,691	6.7	6.84	0.14
HNHB – LHIN*; Problem Gambling	\$307,591	\$307,591	2.6	2.7	0.10
Total FTE	\$1,704,422**	\$1,702,264	14.9	15.14	0.24

^{*}Hamilton Niagara Haldimand Brant - Local Health Integration Network

^{**}This increase is for targeted funding for psychiatric consultation, not base budget.

Staffing: Staffing changes are as summarized in the above chart.

Legal: No new legal implications for these programs.

HISTORICAL BACKGROUND (Chronology of events)

Both ADGS and the CMHPP are entering the sixth year of no increase to base budget from the HNHB – LHIN. Both programs are engaged in continuous quality improvement initiatives in an effort to meet the needs of individuals who are accessing services. Historically, a staff person is shared between ADGS and the CMHPP to help address issues related to concurrent disorders. This has been continued within the 2016-2017 budgets to enhance the quality of direct services provided to individuals accessing services.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The HNHB – LHIN policy requires all funded programs, including ADGS and the CMHPP to submit a balanced budget, meet agreed upon targets, and implement a Quality Plan.

RELEVANT CONSULTATION

Finance and Administration was consulted to review the budget numbers.

ANALYSIS AND RATIONALE FOR RECOMMENDATION (Include Performance Measurement/Benchmarking Data if applicable)

Both ADGS and the CMHPP continue to provide assessment, case management, treatment, and outreach services within the community. The programs continue to meet established service level targets within the range set by accountability agreements. However, the reduction in FTE will result in needing to make changes to service provision and this could lead to service targets dropping below the minimum targets established by MOHLTC. Losing a 0.24 FTE can result in having approximately 200 less appointments available to individuals seeking service.

ADGS and CMHPP continue to engage in quality improvement initiatives to directly impact the quality of care provided to individuals accessing our services. It is important that quality improvement initiatives continue to be developed to meet the complex needs that individuals experience, and to aim to provide services in a timely manner. It is also important that each program be able to continue to provide service, as our services are an important part of the addictions, homelessness, and mental health system in Hamilton.

ALTERNATIVES FOR CONSIDERATION

(Include Financial, Staffing, Legal and Policy Implications and Pros and Cons for each alternative)

The Board of Health could decide to fund the shortfall from the municipal levy.

Pros: ADGS and CMHPP could continue to offer the same level of services for people with mental health and addictions

Cons: Municipal net levy financial impact to mitigate a program funded by MOHLTC.

Financial: The budget amount needed to offset a 0.24 FTE Social Worker would be \$23,010.

Staffing: 0.24 FTE Social Worker

ALIGNMENT TO THE 2016 - 2025 STRATEGIC PLAN

Healthy and Safe Communities

Hamilton is a safe and supportive city where people are active, healthy, and have a high quality of life.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable