

GOVERNMENT OF ALBERTA

Mental Health and Addiction

Annual Report
2023-24

Alberta 

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Annual Report

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Note to Readers: Copies of the annual report are available on the Alberta Open Government Portal
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Preface

The Public Accounts of Alberta are prepared in accordance with the *Financial Administration Act* and the *Sustainable Fiscal Planning and Reporting Act*. The Public Accounts consist of the annual report of the Government of Alberta and the annual reports of each ministry.

The 2023-24 Annual Report reflects the 2023-26 Ministry Business Plans, the Government of Alberta Strategic Plan, as well as the ministry's activities and accomplishments during the 2023-24 fiscal year, which ended on March 31, 2024.

The Annual Report of the Government of Alberta contains *Budget 2023* Key Results, the audited Consolidated Financial Statements and Performance Results, which compares actual performance results to desired results set out in the government's strategic plan.

This annual report of the Ministry of Mental Health and Addiction contains the Minister's Accountability Statement, the ministry's Financial Information and Results Analysis, a comparison of actual performance results to desired results set out in the Ministry Business Plan. This ministry annual report also includes:

- other financial information as required by the *Financial Administration Act* and *Sustainable Fiscal Planning and Reporting Act*, as separate reports, to the extent that the ministry has anything to report.

All Ministry Annual Reports should be considered along with the Government of Alberta Annual Report to provide a complete overview of government's commitment to openness, accountability, and fiscal transparency.

Minister's Accountability Statement

The ministry's annual report for the year ended March 31, 2024, was prepared under my direction in accordance with the *Sustainable Fiscal Planning and Reporting Act* and the government's accounting policies. All the government's policy decisions as at June 5, 2024, with material economic or fiscal implications of which I am aware have been considered in the preparation of this report.

[Original signed by]

Dan Williams
Minister of Mental Health and Addiction

Message from the Minister



Over the past year, Alberta's government has remained committed to constructing a comprehensive, recovery-oriented system of care – the Alberta Recovery Model. Our vision is to ensure that anyone facing mental health challenges or suffering from addiction has access to treatment and the opportunity to pursue recovery.

To support this work, Alberta's government is making record investments in mental health and addiction treatment to support more Albertans in their pursuit of recovery. This includes expanding mental health supports, adding more than 10,000 new publicly funded addiction treatment spaces, eliminating user fees for live-in addiction treatment and expanding access to the Virtual Opioid Dependency Program, which offers same-day treatment to life-saving opioid agonist treatment medications using telehealth technology.

Another critical element of Alberta's Recovery Model is to build world-class recovery communities. The Red Deer recovery community was the first to open in May 2023, followed by the Lethbridge Recovery Community in September. Nine more recovery communities are underway across the province, making Alberta a leader in Canada in treatment capacity and long-term support for addiction recovery.

We are continuing to take a fair, firm and compassionate approach towards addressing addiction and mental health issues while keeping communities safe. Through partnership with police services in Edmonton and Calgary, we have connected more people to much-needed supports including through an expansion of Human-centred Engagement and Liaison Partnership teams and Police and Crisis Teams.

We also continued our focus on increasing addiction treatment capacity to ensure care is available when and where it is needed. Working closely with First Nations is vital to removing barriers to comprehensive, culturally appropriate services in Indigenous communities and an important part of strengthening recovery-oriented care across the province.

In 2023, Alberta's government signed three memoranda of understanding with Siksika Nation, Tsuut'ina First Nation and Enoch Cree Nation for the development of a new recovery community with an investment of \$35 in capital grant funding over three years. Each of these new facilities will provide holistic addiction treatment services for up to 300 people every year and are in addition to the recovery community being built in partnership with the Blood Tribe.

Mental health supports continue to be a priority. Through Counselling Alberta, Alberta's government provided funding to expand in-person and virtual mental health services across the province to ensure every Albertan has access to affordable counselling services.

Supporting children and youth who are struggling with mental health is an essential part of Alberta's recovery-oriented system of mental health and addiction care. As part of building Alberta's recovery-oriented systems of care, *Budget 2023* provided \$4 million to expand the Integrated School Support Program so more young Albertans can build resilience and improve their

mental well-being. Additional funding provided through the Canada Health Transfer brought the total investment for the program to \$8.5 million this past year.

In partnership with CASA Mental Health, we invested in critical mental health supports for children and youth. This included funding for new in-patient CASA House sites, expanding youth day treatment programs, and the rollout of new mental health classrooms across Alberta. With this funding, high-intensity services for children and youth can be delivered in community settings, reducing the need for hospital stays.

As we look ahead, all the steps that we have taken this past year provide essential groundwork for a new health agency dedicated to providing mental health and addiction services to Albertans. Moving forward, mental health services provided by Alberta Health Services will transition to Recovery Alberta, allowing us to streamline access to care and ensure individuals receive the support they need.

I am also excited for our Ministry to continue work on creating the Canadian Centre of Recovery Excellence, otherwise known as CoRE, a pioneering initiative to lead the charge in recovery excellence through research, program evaluation and evidence-based policy development. CoRE will not only elevate the standard of care within Alberta but will also support relevant services on a national and international scale.

Though there is a long road ahead, these and other investments will lead to a healthier future for Albertans. As we move forward, we will continue to give mental health and addiction services the urgency, respect, and care they deserve.

[Original signed by]

Dan Williams
Minister of Mental Health and Addiction

Management's Responsibility for Reporting

The executives of the Ministry of Mental Health and Addiction have the primary responsibility and accountability for the ministry. Collectively, the executives ensure the ministry complies with all relevant legislation, regulations and policies.

Ministry Business Plans, annual reports, performance results and the supporting management information are integral to the government's fiscal and strategic plan, annual report, quarterly reports, and other financial and performance reporting.

Responsibility for the integrity and objectivity of the accompanying ministry financial information and performance results for the ministry rests with the Minister of Mental Health and Addiction. Under the direction of the Minister, I oversee the preparation of the ministry's annual report, which includes the financial information, performance results on all objectives and initiatives identified in the Ministry Business Plan, and performance results for all ministry-supported commitments that were included in the 2023-26 Government of Alberta Strategic Plan. The financial information and performance results, out of necessity, include amounts that are based on estimates and judgments. The financial information is prepared using the government's stated accounting policies, which are based on Canadian public sector accounting standards. The performance measures are prepared in accordance with the following criteria:

- **Reliable** – information used in applying performance measure methodologies agrees with the underlying source data for the current and prior years' results.
- **Understandable** – the performance measure methodologies and results are presented clearly.
- **Comparable** – the methodologies for performance measure preparation are applied consistently for the current and prior years' results.
- **Complete** – outcomes, performance measures and related targets match those included in the ministry's *Budget 2023*.

As Deputy Minister, in addition to program responsibilities, I am responsible for the ministry's financial administration and reporting functions. The ministry maintains systems of financial management and internal control which give consideration to costs, benefits and risks that are designed to:

- provide reasonable assurance that transactions are properly authorized, executed in accordance with prescribed legislation and regulations and properly recorded so as to maintain accountability of public money;
- provide information to manage and report on performance;
- safeguard the assets and properties of the province under ministry administration;
- provide Executive Council, the President of Treasury Board and Minister of Finance and the Minister of Mental Health and Addiction the information needed to fulfill their responsibilities; and
- facilitate preparation of Ministry Business Plans and annual reports required under the *Sustainable Fiscal Planning and Reporting Act*.

Introduction

In fulfilling my responsibilities for the ministry, I have relied, as necessary, on the executives within the ministry.

[Original signed by]

Evan Romanow
Deputy Minister of Mental Health and Addiction
June 5, 2024

Results Analysis

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Ministry Overview

The Department of Mental Health and Addiction leads implementation of the Alberta Recovery Model and coordinates all Government of Alberta funding dedicated to delivering mental health and addiction services across the province. The ministry is focused on developing a comprehensive recovery-oriented system of care and expanding the capacity of mental health and addiction support services to increase the community recovery capital available to Albertans pursuing recovery. In collaboration with partner ministries, Mental Health and Addiction provides support to establish integrated, coordinated networks of community-based services to help Albertans experiencing mental health and addiction challenges in their pursuit of recovery and to achieve positive changes in their lives. This recovery-oriented system of care is intended to keep communities safe while preventing and addressing mental health and addiction issues by treating them as health care issues.

In addition to working with provincial government partners and external organizations responsible for service delivery, the ministry works collaboratively with Indigenous communities, academic and research institutions, a range of health professionals and other government jurisdictions to ensure Albertans have access to a continuum of supports spanning prevention, intervention, treatment and recovery, with multiple entry points to the type of assistance needed.

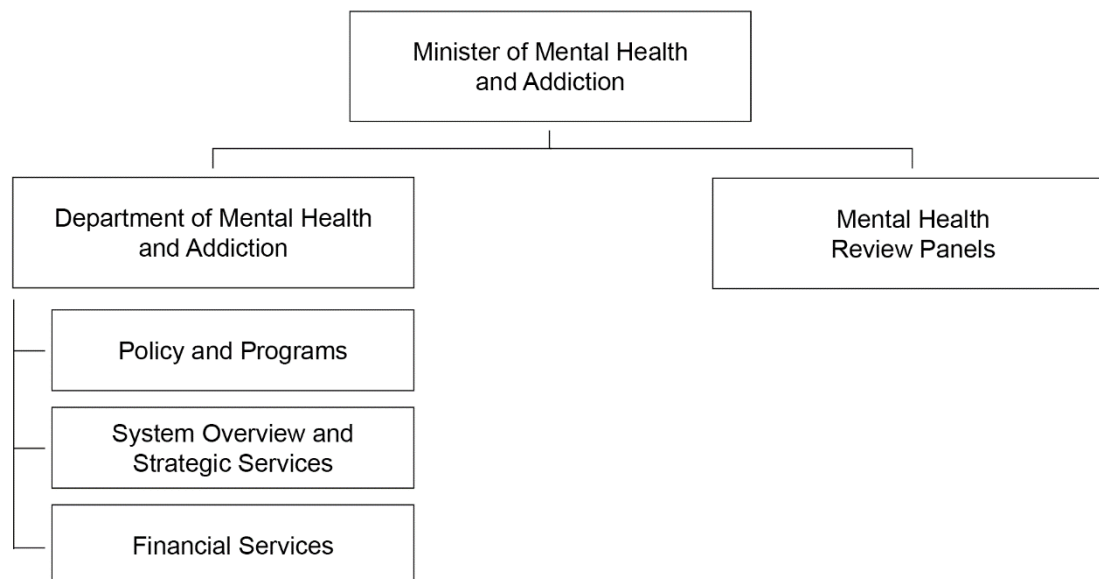
What is Recovery Capital?

Recovery capital is the combination of personal, social and community resources an individual can draw upon to begin and sustain addiction and mental health recovery. Recovery capital can be categorized into eight domains:

- physical and mental health;
- safe housing and healthy environments;
- employment and resolution of legal issues;
- vocational skills and education development;
- safe and meaningful family, social and leisure activities;
- peer-based supports;
- community engagement and cultural supports; and
- (re)discovering meaning and purpose of life.

Organizational Structure

The ministry consists of the Department of Mental Health and Addiction and the Mental Health Review Panels.



The Department of Mental Health and Addiction establishes the Government of Alberta's strategic direction for mental health and addiction, including: providing policy advice and recommendations; drafting legislation and standards; setting policy direction; developing and evaluating programs; licensing and monitoring service providers for regulatory compliance; and providing oversight and ensuring accountability across the mental health and addiction system from prevention and intervention to treatment and recovery.

Mental Health Review Panels (<https://www.alberta.ca/mental-health-review-panel-roster>) are adjudicative bodies that hear applications under the *Mental Health Act* (<https://open.alberta.ca/publications/m13>). Panels play an important role in protecting the rights of patients detained in facilities and individuals subject to community treatment orders under the Act. The Minister of Mental Health and Addiction appoints a roster of members who are called to serve on review panels.

The Mental Health Patient Advocate (MHPA) (<https://www.alberta.ca/alberta-mental-health-advocate>) is an independent body that is not part of a provincial health authority, hospital, clinic or treatment team. The MHPA reports annually through the Minister of Mental Health and Addiction and is responsible for providing support to people who have been involuntarily detained in designated mental health facilities or who are the subject of community treatment orders under the *Mental Health Act*. The MHPA helps Albertans understand their rights under the *Mental Health Act*, navigate the mental health system and investigates complaints.

In November 2023, Alberta's government announced a health care system refocusing initiative intended to improve health outcomes for Albertans and empower health care workers to deliver quality care across the province. In spring 2024, Alberta's government tabled legislation to establish Recovery Alberta, a new mental health and addiction provincial health agency.

Recovery Alberta, expected to be operating in summer 2024, will report to the Minister of Mental Health and Addiction and will be responsible for delivering mental health and addiction services currently provided by Alberta Health Services. In addition, the new Canadian Centre of Recovery Excellence, expected to be established in summer 2024, will support efforts to build recovery-oriented systems of care by researching best practices for recovery from around the world, analyzing data and making evidence-based recommendations.

Operational Overview

In 2023-24, the department updated its organizational structure, establishing a new System Overview and Strategic Services Division to better align strategic objectives and deliver on government's priorities, particularly around health system refocusing.

With direction from the Minister of Mental Health and Addiction, the Deputy Minister is responsible for the daily operations of the Department of Mental Health and Addiction, structured as follows:

Deputy Minister's Office

The Deputy Minister's Office (DMO) supports the Minister in achieving the strategic goals of Alberta's government, the ministry and public service. The DMO provides leadership within the mental health and addiction system to drive innovation and deliver quality programs and services to Albertans. The DMO plays a critical role in building and maintaining collaborative and effective relationships across government ministries and within Alberta's mental health and addiction system to ensure the effective operations of the mental health and addiction system. The DMO provides leadership to the department in issues management and policy coordination, as well as guidance in priority setting, decision-making and coordinating all correspondence for the Minister and Deputy Minister.

Policy and Programs Division

The Policy and Programs Division is responsible for developing and implementing government mental health and addiction legislation and policy as well as administering and overseeing mental health and addiction program funding to support the Alberta Recovery Model. The division is comprised of two branches – Legislation and Community Partnerships and Community Response and Programs – as well as a grant administration support team, all of which work with other government ministries, Alberta Health Services and Recovery Alberta (as of summer 2024), and other relevant stakeholders (e.g., community organizations, police and corrections) to achieve the ministry's mandate. Key initiatives led and supported by the division include developing and overseeing legislation and legislative tools (e.g., compassionate intervention framework, Mental Health Review Panels); child and youth mental health and addiction; Indigenous community partnerships; community-level responses to mental health and addiction issues across the continuum of care; and expanding availability of mental health and addiction supports throughout the province (e.g., establishing 11 new recovery communities across Alberta and therapeutic living units in correctional institutions).

System Overview and Strategic Services Division

The System Overview and Strategic Services Division is responsible for providing leadership that defines and supports the department's strategic direction as well as oversight to ensure safe and high-quality mental health and addiction services. The division is comprised of two branches – Strategic and Corporate Services and Regulatory Compliance and Data Stewardship – that coordinate strategic initiatives and provide advice, evidence-based data and information and regulatory oversight to advance Alberta's recovery-oriented system of care. Programs and initiatives led by the division include mental health and addiction system transformation; policy development and legislative coordination; strategic and corporate planning and reporting; business

continuity and emergency response planning; occupational health and safety; privacy legislation compliance; governance oversight and guidance; procurement and contract management support; oversight of data analytics, performance measurement and business intelligence; and licensing, regulatory enforcement and monitoring for service provider compliance to the *Mental Health Services Protection Act* (MHSPA) (<https://open.alberta.ca/publications/m13p2>).

Financial Services Division

The Financial Services Division is responsible for providing strategic financial advice related to legislation, regulations and policies. The division is comprised of two branches – Capital Projects and Planning and Financial Reporting and Operations. The division develops and manages the ministry's budget and forecasts; monitors the financial activities of the department; oversees financial reporting; and leads capital planning, including mental health and addiction facilities planning, in collaboration with the Ministry of Infrastructure and Indigenous communities.

Communications (Communications and Public Engagement [CPE] – Mental Health and Addiction)

CPE provides Albertans and system partners with information about ministry policies, programs and initiatives. The team offers communications support, such as media relations, issues management, writing and editing services, product development and online communications services. The team also works closely with Alberta Health Services and Recovery Alberta (as of summer 2024) and other reporting entities to coordinate ministry communications.

Human Resources

Human Resources services are provided by the Public Service Commission. The team dedicated to Mental Health and Addiction provides strategic advice, support and expertise in employee and labour relations, occupational health and safety, workforce development and engagement. Human Resources works in partnership with managers and employees to build and sustain workforce capacity and create an environment where employees are respected, valued and heard.

Corporate Services

A Memorandum of Understanding between the Ministry of Mental Health and Addiction and the Ministry of Health ensures ongoing collaboration by providing a framework for consultation and cooperation, as well as the terms and conditions for sharing specified services between the departments, including procurement, records management, research and analytics, finance administration, legal support and legislative planning.

Key Highlights

The Ministry of Mental Health and Addiction focused on accomplishing three outcomes identified in the 2023-26 Ministry Business Plan:

- A recovery-oriented addiction and mental health system that is accountable, transparent and responsive.
- The capacity of communities and families to support individuals in recovery is strengthened.
- Albertans have access to high-quality, person-centred mental health and addiction programs and services.

Key highlights and results achieved by the Ministry of Mental Health and Addiction in 2023-24 include:

Refocusing the health care system	On November 8, 2023, Alberta’s government announced the health care system refocusing initiative to improve patient outcomes and empower health care workers to deliver quality care throughout Alberta. In 2023-24, significant planning work was undertaken to establish Recovery Alberta, a new mental health and addiction provincial health agency, and the Canadian Centre of Recovery Excellence, a new research and evaluation-focused provincial Crown corporation. Both entities are expected to commence operations in 2024-25 (details on pages 17 , 21-22).
Building recovery communities	Opened the first two recovery communities in Red Deer and Lethbridge. As of March 31, 2024, these facilities have served 219 people pursuing recovery. Alberta’s government committed to establish 11 recovery communities across the province, to reduce barriers and improve access to recovery-oriented supports for more people (details on pages 29-30).
Expanding mental health supports in schools	<p>Provided \$30 million to CASA Mental Health to establish more mental health classrooms for students with complex needs. In 2023-24, a total of six classrooms were added and as of March 31, 2024, eight mental health classrooms were operational in schools throughout the province (details on pages 43-44).</p> <p>Provided \$8.5 million to the Calgary Police Youth Foundation to implement the Integrated School Support Program in more schools throughout the province. The program was implemented at 16 schools throughout the year and as of March 31, 2024, a total of 18 high-needs schools in communities across Alberta were operating these programs (details on page 44).</p>
Supporting prevention and early intervention	<p>Continued to fund 211 Alberta to meet existing demand and enhance resources for people seeking assistance with mental health and addiction services. The ministry provided approximately \$4.9 million to support the service which is free and available for any Albertan to access 24/7 (details on page 37).</p> <p>Provided nearly \$3.7 million to Counselling Alberta to support affordable, virtual counselling services that includes counsellor-</p>

	<p>client interaction through video, audio or chat with no wait list. Counselling Alberta also began work to expand in-person services to more locations, including rural areas, to help address the growing need for mental health services in the province. More than 2,150 individuals received services through Counselling Alberta in 2023-24 (details on pages 53-54).</p>
<p>Developing culturally appropriate programs and services for Indigenous communities</p>	<p>Partnered with Indigenous communities to build five recovery communities that will provide culturally safe and community-based services for people pursuing recovery. These five are included as part of the 11 recovery communities being built throughout the province. Alberta's government broke ground on the Blood Tribe Recovery Community, signed memoranda of understanding with the Enoch Cree Nation, Tsuut'ina Nation and Siksika Nation to initiate recovery community development and provided a total of \$14.9 million in capital grant funding for early planning and construction activities (details on pages 31-32).</p> <p>Continued to fund a suite of programs and initiatives that ensure culturally appropriate addiction and mental health community supports are in place for First Nations, Métis and Inuit peoples in Alberta. More than \$4.8 million was provided to support this suite of Indigenous programming, including the Indigenous Continuum of Wellness (details on pages 32-34).</p>
<p>Continuing to implement the My Recovery Plan platform</p>	<p>Provided more than \$790,000 to implement and operate the My Recovery Plan platform in publicly funded treatment and recovery facilities in Alberta. As of March 31, 2024, 23 facilities were onboarded and 10 were in the process of implementation. The tool helps individuals assess, plan, monitor and measure their own recovery capital as they pursue a pathway of recovery that is unique and meaningful to them (details on page 20).</p>
<p>Initiating a compassionate intervention approach</p>	<p>Continued to explore approaches for compassionate intervention, which would establish supports for Albertans who are a harm to themselves or others due to their substance use or addiction and lack the ability to access vital treatment support and receive the care they need (details on page 22).</p>
<p>Enhancing tools for police services to support wellness and recovery</p>	<p>Provided nearly \$740,000 to support the operation and continued implementation of HealthIM. This digital tool provides police officers with evidence-based resources and information to better assess the needs of someone experiencing a mental health crisis and connect them to appropriate supports and services. As of March 31, 2024, HealthIM was in use in nine police services (details on pages 18-19).</p>

The Ministry of Mental Health and Addiction remains committed to regulatory approaches and program delivery that reduces unnecessary government oversight and emphasizes outcomes, to improve access to government services, attract investment, support innovation and competitiveness and grow Alberta businesses.

Discussion and Analysis of Results

Actions that support the priorities of the Government of Alberta Strategic Plan

Key Priority Two:

Standing up for Albertans

Objective Four: Ensuring an accessible and modernized health care system

- Working with municipalities and community-based organizations to improve access to a recovery-oriented systems of care. This approach is based on a comprehensive continuum of person-centred care including prevention, intervention, treatment and recovery supports giving hope to [Albertans] experiencing or at risk of mental health and addiction challenges.

Detailed reporting found on pages [17-20](#) (Key Objective 1.1), [21-22](#) (Key Objective 1.2), [28-29](#) (Key Objective 2.1), [29-31](#) (Key Objective 2.2), [37](#) (Key Objective 3.1), and [52-54](#) (Key Objectives 3.4 and 3.5).

- Expanding access to mental health supports for children and youth in schools by developing an integrated school-based services model, including establishing mental health classroom teams in partnership with CASA Mental Health, giving children and youth the opportunity to seek out mental health supports sooner.

Detailed reporting found on pages [43-44](#) (Key Objective 3.2)

Objective Six: Partnering with Indigenous communities

- Expanding efforts to ensure culturally appropriate addiction and mental health community supports are in place for First Nations, Métis and Inuit peoples in Alberta.

Detailed reporting found on pages [31-34](#) (Key Objective 2.3), [44](#) (Key Objective 3.2), and [51-52](#) (Key Objective 3.3)

Outcome One: A recovery-oriented addiction and mental health system that is accountable, transparent and responsive

Mental Health and Addiction is implementing a comprehensive recovery-oriented system of care to support Albertans in their pursuit of recovery. The department is responsible for oversight of the mental health and addiction system, including coordinating government funding dedicated to delivering mental health and addiction services across the province. The ministry is committed to creating positive outcomes for people experiencing mental health and addiction challenges through its work to reduce barriers and ensure every Albertan has access to high-quality recovery-oriented care to improve their overall well-being and help sustain recovery.

Key Objectives

1.1 Expand access to recovery-oriented supports in the health, justice and social sectors in collaboration with partner ministries to improve care for Albertans affected by addiction or mental health concern.

Refocusing the health care system

On November 8, 2023, Alberta's government announced the health care system refocusing initiative to improve patient outcomes and empower health care workers to deliver quality care throughout the province. The changes will see the creation of a unified health system with four provincial health agencies established throughout 2024-25, including a new mental health and addiction organization – Recovery Alberta (<https://www.recoveryalberta.ca/>) – as the first health sector-specific organization to be stood up in mid-2024. An Integration Council for the health system will be established to ensure the health system is delivering better outcomes and seamless patient care by promoting system alignment, identifying efficiencies and removing barriers to care. The Integration Council will be chaired by the Minister of Health, with support from the Ministers of Mental Health and Addiction, Seniors, Community and Social Services and Technology and Innovation and will include members from each new sector-specific health organization. The transition will not disrupt services to Albertans.

In the refocused system, the department will provide system oversight including system planning, funding, capital planning and service delivery for mental health and addiction services. Recovery Alberta will be the largest provider of mental health and addiction services in the province, responsible for the delivery of services currently delivered by Alberta Health Services, focusing on:

- Supporting every Albertan living with mental illness and/or addiction in their pursuit of recovery.
- Ensuring Albertans can access a full continuum of recovery-oriented supports that help them improve their overall wellbeing and sustain recovery.
- Improving mental health and addiction care for Albertans by further expanding access to treatment and recovery supports across Alberta.

Four engagement sessions for Alberta Health Services staff and service providers were scheduled for early 2024-25 to share more information about Recovery Alberta and provide staff and service providers an opportunity to ask questions.

In addition to Recovery Alberta, a new research-focused agency, the Canadian Centre of Recovery Excellence, will be established in 2024-25 as part of a refocused health care system (see Key Objective 1.2 for more details on the Canadian Centre of Recovery Excellence).

Expenditure review

In 2023-24, the ministry completed a review of mental health and addiction-related expenditures within Alberta Health Services, as directed in the Minister's mandate, that identified the direct costs of Alberta Health Services' provincial addiction and mental health program to inform and support the department's new funding oversight responsibility. Conducting a comprehensive expenditure review is part of government's due diligence to ensure there is adequate system oversight and accountability in responding to the need for mental health and addiction supports. With *Budget 2024*, the department of Mental Health and Addiction will begin overseeing the distribution of an initial amount of \$1.13 billion, transferred from the department of Health, which was informed by the results of the expenditure review. Department accountability to oversee funding, operations and service delivery under Recovery Alberta is expected to help manage costs and improve outcomes for Albertans.

Helping more Albertans access a continuum of recovery-oriented supports

Mental Health and Addiction is leveraging existing partnerships to focus on priority areas within the continuum of care and meet the needs of more Albertans requiring support for mental health or addiction concerns. In 2023-24, the ministry focused on enhancing recovery-oriented services for people in the criminal justice system and providing wrap-around supports to people exiting unsafe urban encampments through a new Navigation and Support Centre in downtown Edmonton. Mental Health and Addiction will continue to work with partner ministries to ensure any Albertan in need has access to programs and services to support them in their pursuit of recovery.

Edmonton Navigation and Support Centre

In November 2023, Alberta's government ordered a cabinet-level response to manage escalating violence in Edmonton homeless encampments. In January 2024, the City of Edmonton, Edmonton Police Service and the ministries of Seniors, Community and Social Services and Mental Health and Addiction established a Navigation and Support Centre for individuals exiting unsafe urban encampments. The centre operates from 9:00 a.m. to 5:00 p.m. on weekdays and provides wrap-around supports, including connections to housing, health services, personal identification documentation, income support, including Assured Income for the Severely Handicapped, and mental health and addiction supports such as opioid agonist treatment on demand through the Virtual opioid Dependency Program (VODP). In late March 2024, Alberta's government announced the Navigation and Support Centre will remain open permanently. In summer 2024, a second centre is expected to be established in Calgary to support more vulnerable Albertans.

In 2023-24, the ministry provided more than \$1 million to help establish the Navigation and Support Centre in Edmonton and bolster the capacity of referred-to treatment and recovery services. As of March 31, 2024, 745 individuals attended the centre and more than 120 people received direct connection or were referred to mental health and addiction services, including 31 who were connected with the VODP. Going forward, the ministry will provide funding to expand the range of available on-site services including social navigators and recovery coaches.

Tools for police services

Launched in 2022 with the Edmonton Police Service, HealthIM is a digital tool that provides police officers with evidence-based resources and information to better assess the needs of someone experiencing a mental health crisis and connect them to appropriate supports and services. Through HealthIM, police services have access to de-escalation techniques, police information about the person in crisis and a mental health risk screening tool that helps officers determine whether transportation under the *Mental Health Act* to a designated health facility may be warranted or if community-based services are more appropriate. In 2023-24, Mental Health and Addiction provided nearly \$740,000 to continue implementing HealthIM in police services

throughout the province in collaboration with Public Safety and Emergency Services. As of March 31, 2024, HealthIM was in use in nine police services:

- Edmonton Police Service;
- Lethbridge Police Service;
- Medicine Hat Police Service;
- Camrose Police Service;
- All four districts of RCMP K Division;
- Lacombe Police Service;
- Tsuut'ina Nation Police Service;
- Lakeshore Regional Police Service; and
- Blood Tribe Police Service.

In 2023-24, HealthIM logged a total of 8,877 mental health calls and the service was used to assist people 7,743 times. In the coming year, Mental Health and Addiction will continue to collaborate with Public Safety and Emergency Services to support further roll out of HealthIM to remaining police services and update the tool to provide greater efficiencies when a police officer chooses to detain an individual under the *Mental Health Act*.

The Provincial Law Enforcement Mental Health Call Line is another resource available to police services to help keep communities safe while managing individuals presenting with mental health challenges, particularly in rural and remote areas. The tool is provided by Alberta Health Services and gives law enforcement access to clinicians to support on-site de-escalation and behaviour management in crisis situations. In 2023-24, the ministry provided more than \$330,000 for continued operation of the call line. While it is intended to support rural law enforcement partners, the call line may be expanded in the future to offer support for larger centres in off hours. In 2024-25, Recovery Alberta and Health Link expect to begin a quality improvement initiative to explore opportunities to enhance support for law enforcement and increase utilization of this resource.

Therapeutic Living Units and Transition Services

As part of the recovery-oriented system of care, Mental Health and Addiction is working with the ministries of Public Safety and Emergency Services and Infrastructure to establish Therapeutic Living Units (TLUs) in provincial correctional facilities. TLUs are specialized units that provide members the opportunity to begin voluntary holistic addiction treatment in a therapeutic community environment adapted for a correctional setting. The TLU program is available to inmates who demonstrate a high need for treatment, meet specific eligibility criteria and are anticipated to be in custody for 90 days or longer. The goal of the program is to protect communities and prevent individuals from reverting to substance use or criminal activity. This is achieved by helping program participants develop recovery capital.

In 2023-24, Mental Health and Addiction and Public Safety and Emergency Services spent a combined total of \$12.5 million to establish TLU spaces in Alberta's correctional facilities. The first TLU opened at the Red Deer Remand Centre in July 2023 and the second opened at the Lethbridge Correctional Centre in October 2023. In February 2024, a third TLU opened at the Fort Saskatchewan Correctional Centre. Since opening and through March 31, 2024, nearly 87 per cent of available TLU spaces have been occupied and a total of 14 individuals have completed in-custody programming. In spring 2024, a fourth TLU is expected to open at the Calgary Correctional Centre. Beginning in 2024, Transition Services, which provide supports for those held in remand who will be returning to the community (e.g., addiction treatment, mental health, education, training,

employment, income and housing), are expected to be established in Calgary, Edmonton, Peace River and Medicine Hat.

1.2 Enhance the capacity and capability to monitor and evaluate addiction and mental health outcomes across health, social and justice systems to ensure evidence-based decision making.

Implementing the My Recovery Plan platform

Establishing recovery capital is foundational to developing a recovery-oriented system of care in Alberta. My Recovery Plan (MRP) (<https://www.myrecoveryplan.ca/>) is a digital platform provided by the Last Door Recover Society that helps individuals assess, plan, monitor and measure their own recovery capital as they pursue a pathway of recovery that is unique and meaningful to them. The tool is currently being implemented in all publicly funded medical withdrawal management facilities and residential addiction treatment and recovery facilities in Alberta and is expected to be rolled out to recovery communities in the future.

2023-24 MRP Client Statistics*

- 38 per cent received addiction treatment services.
- 32 per cent received addiction recovery services.
- 42 per cent received medical withdrawal management services.
- 66 per cent identified as male.
- 29 per cent identified as female.
- 24 per cent identified as Indigenous.
- The client average age is 39.
- 43 per cent improvement in recovery capital from admission to discharge or most recent assessment.
- 2,699 enrollments.

*Service totals do not add up to 100 per cent as some clients used more than one service.

MRP incorporates an assessment of recovery capital that generates a Recovery Capital Index (RCI) score for consenting clients at the time of admission. The assessment is conducted at several points throughout an individual's stay to gauge changes in their recovery capital. Increases in recovery capital are associated with positive outcomes for individuals experiencing addiction and demonstrates improvements in quality and person-centredness of addiction programs and services for individuals pursuing recovery.

In 2023-24, Phase 2 of the MRP rollout was completed and Phase 3 was initiated. More than \$790,000 was spent to implement and operate the MRP platform in publicly funded medical withdrawal management facilities and residential addiction treatment and recovery facilities in Alberta. Over the course of the year, a total of 21 facilities came on board, bringing the overall number of facilities that have implemented MRP to 23. Initially, 27 agencies were slated for MRP implementation in 2023-24, but six agencies experienced delays, including five

Indigenous providers requiring further consultation to ensure the MRP tool appropriately reflects the strengths and values of Indigenous culture. Ten additional facilities were in the process of implementing the platform as of the end of the fiscal year. Since launching in July 2022 and through March 31, 2024, a total of 2,786 individuals had been enrolled in the MRP platform. Of this total, 2,263 individuals had at least one assessment of recovery capital. Mental Health and Addiction will continue to support the MRP roll out throughout 2024-25, including implementation in any newly funded facilities.

The ministry is working collaboratively with Alberta Health Services and the MRP vendor to facilitate smooth implementation and troubleshoot issues as they arise. In future years, this work may include development of a separate, shorter assessment tool for use in low-barrier services, such as with clients accessing withdrawal management services.

MRP Outcome Measurement

In late 2022-23, medical withdrawal management and residential addiction treatment and recovery service providers began collecting individual level recovery capital data through the MRP platform. In 2023-24, Mental Health and Addiction continued to implement the system and establish processes to help the ministry begin to track waitlists, changes to recovery capital, system capacity and service use using de-identified aggregate data. Service providers continue to be onboarded; as more MRP data is generated it is expected to help the ministry identify trends, barriers to recovery and service gaps and provide evidence to help guide the ministry's future policy and funding decisions. Data on program occupancy, client demographics, client needs, length of stay and outcomes will be analyzed to identify trends. Data related to social supports, justice system involvement and vocational and housing needs will enable analysis of barriers to recovery that are more difficult to overcome for specific client groups or service locations. Data on wait times and documented service needs for client groups will be examined to help identify service gaps.

Onboarded service providers have access to their MRP data to help them evaluate their programs and meet reporting requirements more easily. It is important to note the ministry never has access to clients' personal information. All identifying information such as name and contact information is removed prior to the data being shared with government. Work currently underway to advance MRP data quality and usability will continue in 2024-25.

Improving data and evidence for decision making

Mental Health and Addiction is committed to improving the data and evidence base available to the ministry to inform decision making and policy development to advance Alberta's mental health and addiction system. In 2023-24, preliminary work was undertaken to investigate and understand barriers preventing the ministry from accessing and linking health data with data from selected ministries. Mental Health and Addiction continues to prioritize data matching where feasible and within legislative and privacy-based constraints that must be considered and navigated to facilitate comprehensive data matching. The ministry is exploring becoming a full custodian of relevant health administrative data through the *Health Information Act*. This will guarantee consistent data flows to meet the data needs of the ministry. Mental Health and Addiction is also working with stakeholders to expand public access to substance related data. For example, the ministry is exploring other relevant data elements that would be included in the Alberta Substance Use Surveillance System dashboard, to increase public access to other meaningful substance related data that reflects recovery and treatment programs supported by the ministry.

Canadian Centre of Recovery Excellence (CoRE)

In November 2023, Alberta's government announced CoRE (<https://recoveryexcellence.org/>) as part of the health care system refocusing initiative. CoRE will inform best practices in mental health and addiction, conduct research and program evaluation and support the development of evidence-based policies in alignment with the Alberta Recovery Model. By providing data-driven and evidence-based recommendations, CoRE is expected to help transform the mental health and addiction system to one that is person-centred and focused on recovery. CoRE will provide leadership in recovery excellence within Alberta, across Canada and internationally, and ensure Alberta is home to the innovation needed to build a comprehensive, evidence-based recovery-oriented system of care. Beginning in 2024-25, Mental Health and Addiction and CoRE will work collaboratively to continue to fill data and information gaps in evidence. This work is expected to enable the ministry to measure the holistic impact of mental health and addiction policies and programs across systems (e.g., justice and correctional, education and social services systems).

In 2023-24, Mental Health and Addiction completed significant planning work to facilitate CoRE's set up, including drafting legislation to establish CoRE as a Crown corporation. In spring 2024, this legislation was introduced and CoRE is anticipated to begin operating in summer 2024. In 2024-25,

an initial \$5 million is being provided for the purpose of establishing CoRE. The centre's annual operating budget will be determined once it is fully operational.

Alberta Substance Use Surveillance System (ASUSS)

The ASUSS (accessible through <https://www.alberta.ca/substance-use-surveillance-data>) is a publicly available online reporting dashboard containing up-to-date, comprehensive data related to substance use in Alberta, including:

- Opioid and other substance-related deaths (updated monthly);
- Emergency Medical Services responses to opioid-related events (updated weekly);
- Naloxone kit distribution (updated quarterly);
- Hospitalizations and emergency department visits (updated quarterly); and
- High-level details about location of overdose deaths (updated quarterly).

ASUSS data helps the ministry effectively monitor and analyze trends that indicate whether Alberta's government is achieving the outcomes it aims to achieve from a recovery-oriented system of care, such as trends related to use of opioid agonist treatment medications. The trends observed in Alberta are regularly compared with trends observed in other jurisdictions to provide an understanding of addiction challenges on a broader scale. This includes comparison with jurisdictions that are taking a different approach than Alberta to address addiction. Overall, data available through ASUSS provides valuable insight to help inform the ministry's strategic decisions about how best to create a recovery-oriented system of care that supports individuals experiencing addiction.

1.3 Introduce legislation and standards, including implementing oversight for services regulated under the *Mental Health Services Protection Act and Regulation (residential addiction treatment services, supervised consumption services, narcotic transition services and psychedelic assisted therapies)*, to ensure high quality care, safeguard Albertans, improve interventions at various entry points, and protect communities.

Moving toward a compassionate intervention approach

Alberta's government committed to intervening with those whose substance use or addiction causes harm to themselves or others and giving them access to treatment supports to recover, while keeping communities safe. Through a compassionate intervention framework, supports would be established for Albertans who are a harm to themselves or others due to their substance use or addiction and lack the ability to access vital treatment support and receive the care they need.

The ministry is exploring approaches for compassionate intervention in collaboration with community and government partners to ensure the right safeguards will be in place to protect civil liberties and personal rights, while also protecting people at serious harm due to addiction and public safety.

Mental Health and Addiction will consider legislation to establish treatment pathways for Albertans who are a harm to themselves or others as a result of their substance use. The proposed act is intended to address the needs of those who cannot make decisions to protect their own safety or the safety of others due to their substance use or addiction and require serious interventions to mitigate harm. Mental Health and Addiction will also explore options for expanding capacity in facilities for needed services and operations to support potential new legislation.

Regulating counsellors

In March 2024, Alberta's government announced its intent to proceed with the regulation of counsellors through the College of Alberta Psychologists (CAP) to ensure appropriate standards, accountability and oversight are in place to support safe, high-quality patient care. As regulated health professionals, counsellors will be held to professional standards including education, safety and a code of ethics. Counselling professions in Alberta include counselling therapists, addiction counsellors and child and youth care counsellors. In 2024-25, the scope of counsellors to be regulated will be determined. In addition to improving accountability in the profession, regulating counsellors will potentially increase Albertans' access to affordable mental health services. To further improve and define the standards of care, the ministries of Health and Mental Health and Addiction will continue to work with counsellors and CAP.

Assessing medical assistance in dying (MAID) legislation

- In 2023-24, Mental Health and Addiction and Alberta Health worked together to ensure standards of practice (being developed by the College of Physicians and Surgeons of Alberta) and operational guidelines (being developed by Alberta Health Services) are effective in helping prepare for potential MAID expansion.
- In January 2024, the Ministers of Mental Health and Addiction and Health, along with various other provincial and territorial ministers, signed a joint letter requesting federal Health and Justice Ministers put an indefinite pause on MAID expansion to include those with mental disorders.
- On February 29, 2024, the Government of Canada delayed the inclusion of persons suffering solely from a mental illness until March 17, 2027.

Introducing and improving legislation, regulations and standards

In October 2023, Alberta's government introduced amending legislation to help ensure those who contributed to the creation of the opioid addiction crisis are held responsible. The *Opioid Damages and Health Care Costs Recovery Amendment Act, 2023*, further strengthens Alberta's position in current class actions to recover opioid-related health care costs and damages. Alberta's government will invest any future damages awarded back to the province into recovery-oriented supports for those with mental health or addiction challenges.

In 2023-24, policy work was initiated that is expected to inform updates to the MHSPA legislative framework. There is an opportunity to make improvements to programming requirements and strengthen Alberta's recovery-oriented system of care. These improvements are contemplated for spring 2025.

Mental Health Review Panels are adjudicative bodies responsible for protecting the rights of patients detained in facilities and individuals subject to community treatment orders under the *Mental Health Act*. Each panel includes a lawyer, a psychiatrist and a member of the public. Application hearings can occur in person, or by phone or videoconference. In 2023-24, there were **3,516 applications** for review panel hearings and **2,264 hearings** held.

Location	Chairs/Vice Chairs	Psychiatrists	Public Members	Total
Edmonton/North	2 (33%)	11 (46%)	19 (56%)	32 (50%)
Central	2 (33%)	1 (4%)	1 (3%)	4 (6%)
Calgary/South	2 (33%)	12 (50%)	14 (41%)	28 (44%)
Total	6	24	34	64

1.4 Strengthen addiction and mental health knowledge, expertise and workforce capacity across Alberta to enable the recovery-oriented system of care and expand and increase access to services.

Building mental health and addiction workforce capacity

Recovery Training Institute of Alberta (RTIA)

An integral part of developing a recovery-oriented system of care is ensuring there is an available, skilled and knowledgeable workforce to deliver mental health and addiction services to Albertans throughout the province. To meet this need, the ministry is providing support to ROSC Solutions Group Inc. to develop the RTIA. The RTIA is intended to serve as a centralized, province-wide hub where expert personnel will deliver a comprehensive suite of recovery-oriented training programs for Alberta's mental health and addiction workforce; in particular, staff employed in recovery communities, TLUs and Transition Services. Participants will learn how to deliver recovery-oriented addiction support and ensure that recovery communities implement a cohesive model that builds and enhances individual recovery capital. The RTIA will be located within the Lakeview Recovery Community in Gunn. It is expected to open in 2024-25 and commence on-site training shortly after opening. In 2023-24, Mental Health and Addiction provided \$2.9 million to develop and launch workforce development programming as part of the RTIA, including establishing an e-learning environment to provide the inaugural training and certification programs for recovery community, TLU and Transition Services staff. A total of 28 recovery community-related e-courses and two certificate programs for recovery coaches were launched throughout the year.

In 2023-24, two training programs targeting corrections staff (TLU and Transitions Services) were rolled out: the Correction Core Training Program and the Correctional Environment Recovery Service Certificate. The Correction Core Training Program is delivered both on-site at operational TLUs and virtually, while the Correctional Environment Recovery Service Certificate is delivered virtually. As of March 31, 2024, a total of 53 individuals from the Red Deer Remand Centre, Lethbridge Correctional Centre and Fort Saskatchewan Correctional Centre completed training.

Recovery Coaches

Recovery coaches are individuals who are typically in recovery from addiction and have agreed to help others progress in their recovery. Recovery coaches provide non-medical and non-clinical services such as system navigation support for Albertans pursuing recovery and help them build coping skills and maintain sobriety. In Alberta, recovery coaches work in the health care system, substance use treatment programs and facilities and with service agencies that work with people who use substances.

In November 2023, ROSC Solutions Group Inc. began testing the Recovery Coaches of Alberta Training (RCAT) Program. Over the next year, the program is expected to be integrated into the RTIA to help expand the recovery-oriented workforce by offering specialized training and skill development for recovery coaches. In April 2024, the first official cohort of recovery coaches will be trained through RCAT.

In 2023-24, Mental Health and Addiction provided a total of \$1 million to develop the RCAT Program. In addition, the ministry spent more than \$5.2 million to expand recovery coach services to more settings across the province:

- Provided funding to Oxford House for six recovery coaches to support clients in their treatment program. During the year, these coaches facilitated recovery capital assessments, coaching sessions with clients and connected clients to a variety of other support services.

- Provided funding to Our Collective Journey for recovery coach services in Medicine Hat and Calgary. These coaches provide navigation support to clients who are waiting for treatment, and clients who are leaving treatment. In 2023-24, Our Collective Journey Recovery Coaches in Medicine Hat had almost 2,000 connections with clients and engaged 50 community organizations to provide services and supports for their clients.
- In March 2024, Mental Health and Addiction committed \$4.1 million to establish a virtual recovery coach team, job placement supports for trained recovery coaches and recovery coach teams in the current and planned Navigation and Support Centres. This will expand recovery coach supports to recovery communities, other bed-based addiction treatment facilities, TLU and Transitional Services, police teams, Indigenous recovery programs, post-secondary institutions, the construction trades and many other settings.

Investing in training and capacity building

The ministry is continuing to support targeted capacity building programs and projects that will enhance Alberta's recovery-oriented system of care and provide mental health and addiction support to more people in need. In 2023-24, Mental Health and Addiction collaborated with Advanced Education to identify workforce pressures and areas of potential health profession investment. This work aligns with the Advanced Education Minister's mandate letter to add more mental health professional spaces in Alberta's post-secondary institutions.

Addressing gender-based violence

In 2023-24, the ministry provided nearly \$1.1 million to the United Way Alberta Capital Region to increase 211 Alberta's capacity to offer more robust services, resources and supports for individuals experiencing gender-based violence (GBV). Throughout the year, 211 Alberta engaged with organizations serving people impacted by GBV to gain knowledge of leading practices in GBV navigation and to provide support to enhance staff training, processes and tools. New training materials were developed and delivered to 211 Alberta staff and other interested anti-violence sector staff. Updated resources and materials help build awareness of the system of wrap-around supports individuals experiencing GBV may require including shelters, mental health care, health care and legal services. Services are available to all Albertans, including women, young women and girls; Indigenous women and girls; 2SLGBTQIA+ people; women living in Northern, rural and remote communities; and women living with disabilities across Alberta. In 2023-24, 211 Alberta responded to more than 2,800 GBV-related calls, chats and texts and provided more than 31,800 referrals to other supports.

CanREACH training

The Canadian Research and Education for the Advancement of Child Health (CanREACH) (<https://canreach.mhcollab.ca/>) physician training is a six-month targeted continuing education program that helps health care providers from across the province build their mental health knowledge, skills and confidence to diagnose and treat mental health issues in children and youth closer to home. CanREACH programming is delivered by Alberta Health Services and is consistent with the most up-to-date evidence-based information in child mental health. The target audience for the program was broadened to include nurse practitioners and other health care professionals with the goal of expanding providers' capacity to address child and youth mental health concerns in community, particularly as Alberta Health moves to strengthen primary care through nurse practitioner roles. Funding provided by Mental Health and Addiction will support approximately three CanREACH training cohorts per year with approximately 50 registrants per cohort. In January 2024, the first session commenced with a total of 51 registered physicians, nurse practitioners and other health care providers.

Frontline Expert Team (FET)

In 2023-24, the ministry provided almost \$1 million to establish a FET with a specific mandate to provide expert guidance on all aspects of recovery-oriented service delivery within residential and non-residential addiction treatment settings. This includes providing advice related to psychosocial modalities, regulatory compliance, optimal staffing models, peer/recovery navigation, recovery-oriented medicine, leadership/governance and operating standards. In addition, the FET employs a standardized service evaluation tool applicable in multiple bed-based and non-bed-based settings and conducts comprehensive on-site audits to ensure service delivery is high quality and aligned with the recovery-oriented system of care model.

Learning from the Recovery Expert Advisory Panel

In February 2023, the Minister of Mental Health and Addiction appointed a Recovery Expert Advisory Panel to help ensure Alberta continues to build a recovery-oriented system of care that provides effective, compassionate care for individuals pursuing recovery. Panel membership spanned diverse fields of expertise, including frontline specialists, researchers, physicians, Indigenous leaders, policy experts and other respected leaders. Through most of 2023-24, the Recovery Expert Advisory Panel provided ongoing advice to the Minister on:

- best practices for a recovery-oriented system of care;
- leading research and innovation;
- policy and standards development; and
- evaluation and outcomes reporting.

To provide advice more efficiently and to fully leverage panel members' experience, the panel struck two subcommittees: the Compassionate Intervention Subcommittee and the Performance Measurement Subcommittee. Expertise and advice provided through these subcommittees helped inform the compassionate intervention policy and legislative framework as well as the approach and options for effectively measuring recovery-oriented system of care outcomes.

In December 2023, the Recovery Expert Advisory Panel's term ended. Over the course of the term, the panel and subcommittees convened 10 times in person and virtually.

Performance Indicator 1.a:

Albertans receiving care at an appropriate level (under development)

In 2023-24, this performance indicator remained under development. The original intent of the indicator was to demonstrate that investment and cost-avoidance across multiple systems reduces the need for more costly and less effective interventions. This intent has shifted to focus on the clients' interaction with different programs, with a goal of developing metrics to effectively measure the holistic impact of the Alberta Recovery Model.

Significant work was undertaken over the course of the year to explore options for development of a meaningful measure of system impact, leveraging expertise of the Recovery Expert Advisory Panel. While the ministry conducted initial analysis of available data, the results of this analysis are preliminary and limited due to legislative and privacy-based data constraints. In 2023-24, analysis was conducted on the VODP, drug consumption services, residential addiction treatment services and mental health-related hospital admissions; preliminary results are presented on page 27. The methodology and inputs will continue to be refined over the coming year.

Through the process of building a comprehensive system with the establishment of Recovery Alberta and CoRE, barriers to data access are expected to be addressed, allowing for fulsome

analysis of care across the mental health and addiction system. This will help inform decision-making and improve the ministry's understanding of outcomes related to the development and implementation of policies and programs supporting a recovery-oriented system of care. In the future development of this indicator, there is intention that clients' access to and interaction with services will be identified over time to understand the impact of mental health and addiction programs in various areas, including but not limited to, health, justice, education and housing.

In a connected, well-designed system, clients accessing mental health and addiction services would be provided referrals or access to multiple types of recovery-oriented care, resulting in a higher number of clients having opportunities to access the services they need when they need it. Recovery is a personal journey comprising many different pathways and programs. Understanding these pathways is essential for identifying potential opportunities for interventions.

Preliminary results: In 2023-24, 16,098 Albertans received care from one or more of VODP, drug consumption services and residential addiction treatment services. Residential addiction treatment services comprise three distinct services: withdrawal management, residential (intensive) treatment and residential recovery services. In 2023-24, residential addiction treatment services had the most clients, followed by VODP. Of clients enrolled and discharged from VODP, nearly 33 per cent were transitioned to another Opioid Dependency Program (ODP) clinic and/or another prescriber within 30 days of discharge. Data about drug consumption services has some limitations; because Personal Health Number (PHN) disclosure by a client is not required to access these services, clients who do not produce a validated PHN are excluded from the data used for the analysis. Notably, over the course of 2023-24, the monthly rate of clients with a valid PHN on file increased from approximately 50 per cent to approximately 80 per cent. As the percentage of clients providing their PHN increases, data for this indicator is expected to improve.

The *Mental Health Act* enables care for individuals with serious mental health illnesses who are at significant risk. In 2023-24, the proportion of individuals admitted three times or more to a hospital under the *Mental Health Act* decreased to 8.1 per cent from 8.5 per cent in 2022-23. The decrease could suggest that Albertans with serious mental health issues are receiving services in the community.

In 2023-24, the proportion of individuals primarily admitted for more than 30 days to hospital in-patient care for a mental health issue also decreased. This is a broader segment of people that is not specific to admission through the *Mental Health Act*. The proportion of patients who had a length of stay of more than 30 days for a mental health-related illness decreased from 16.5 per cent in 2022-23 to 14.1 per cent in 2023-24. This decrease may potentially indicate improved coordination between community and hospital-based services, as well as enhanced community-based care.

Outcome Two: The capacity of communities and families to support individuals in recovery is strengthened

Mental Health and Addiction is working with government and community partners to ensure consistent resources, supports and services are available across the province to facilitate and sustain recovery. The ministry is responsible for building more recovery communities and funding their operation to remove barriers and provide better access to addiction treatment and recovery services. The ministry is committed to enhancing the continuum of culturally appropriate services available to Indigenous peoples in Alberta and building capacity in communities to improve supports for individuals pursuing recovery.

Key Objectives

2.1 Enhance recovery-oriented supports in urban areas with the greatest need to expand the province's response to the addiction crisis, and provide more treatment options for Albertans.

Addressing social disorder in Calgary and Edmonton

Since 2022, Alberta's government made a concerted effort to reduce social disorder and increase public safety in Alberta's two largest cities by addressing the root issues perpetuating disorder, including addiction, mental health and homelessness. In 2023-24, Mental Health and Addiction provided approximately \$9.8 million to the cities of Calgary and Edmonton to support urban strategies aimed at tackling these issues. To improve clinical supports as part of the urban strategies,

the ministry provided \$3.2 million to Alberta Health Services to add more mental health clinicians and mental health therapists to work alongside police services in the two cities. This integration with police teams is expected to improve access to consultative advice, as well as mental health assessments and assistance for individuals and families in need.

Safety of Our Cities Conference

- The Government of Alberta was a presenting sponsor of the inaugural Safety of Our Cities Conference held September 18-20, 2023 in Edmonton.
- A total of 600 participants from 171 agencies, including police, public health and social services sectors, corporations and government came together to:
 - Explore how partnerships between law enforcement, social service, health and other sectors are vital to tackling complex health and safety issues.
 - Highlight how research and innovation serve as critical tools in designing and delivering collective responses.
 - Operationalize new approaches to maximize impacts for an organization and the community.
- Several Recovery Expert Advisory Panel members participated as either a keynote speaker or a member of a conference panel, focusing on strategies for addressing addiction and improving outcomes for individuals through effective partnerships.

A key step in making progress on this important initiative was establishing frontline Police and Crisis Teams (PACT) and Human-centred Engagement and Liaison Partnership (HELP) teams in Calgary and Edmonton. These outreach and response teams better connect Albertans experiencing mental health or addiction challenges with overdose prevention supports and other essential health and social services.

PACT pairs police officers with mental health therapists to respond to 911 calls where there is believed to be a mental health concern. The teams assess a client's mental health challenge and determine what support is required to keep the individual and community safe, such as arranging urgent psychiatry assessments and referrals. Calgary uses a mixed model of paired and unpaired clinicians to support PACT officers and Edmonton will pair clinicians and

officers to cover PACT operating hours with a set number of teams available per day to provide support to districts in addition to the existing centralized model coordinated through Access 24/7.

In 2023-24, 11 clinicians and one clinical supervisor were added to support five PACT and PACT-related teams in Calgary and as of March 31, 2024, a total of 27 clinicians and one clinical supervisor were providing support to these teams. In Edmonton, as of March 31, 2024, there were four PACT operating per day and approximately 22 mental health clinicians are being hired over the next year to enhance these teams and support districts.

HELP teams provide system navigation support to break the cycle of arrest, remand and release for individuals at greatest risk for offending, harming themselves or others and victimization. In Edmonton, the HELP unit is part of the Edmonton Police Service. HELP teams provide outreach to support vulnerable and at-risk individuals and divert them from the criminal justice system toward appropriate services and supports. Social service navigators support these individuals by providing referrals, follow-ups and case management plans as needed. In 2023, the Edmonton Police Service added 12 social service navigators to HELP teams. In addition, eight social service navigators were added to the Edmonton Police Service Diversion and Desistance team, which conducts proactive outreach to individuals with a history of causing the greatest harm in the community, with a goal of helping the individuals stabilize and reduce their use of the system. In 2023, the HELP program received more than 5,300 referrals, with housing, addiction, mental health and identification as the top client needs across teams. Over the next year, HELP will be expanded to include additional Indigenous navigators to provide outreach, which will build relationships with individuals and provide culturally relevant services, offering individuals an opportunity to be connected back to their cultural practices.

In Calgary, HELP team outreach services are provided by Alpha House. The organization responds to substance use and public intoxication issues when emergency services are not needed, which helps lessen the demand on police, bylaw, hospital and emergency medical services. In 2023-24, Mental Health and Addiction provided \$570,000 to Alpha House to support outreach teams (which were rebranded from Downtown Outreach Addictions Partnership to HELP) and to expand the Beltline HELP team to provide overnight support to the area seven days a week, to enhance safety at the time of highest need.

In both Calgary and Edmonton, urban strategy funding was also used to support renovation and retrofitting of police detainment units. In Calgary, the Arrest Processing Services (APS) in the Spyhill Services Centre was renovated to support detainees requiring mental health and addiction supports. The APS supports detained individuals awaiting bail hearings, 75 per cent of whom have untreated mental health and addiction issues. In Edmonton, the Detainee Management Unit (DMU) was renovated to enhance the capacity to provide mental health and addiction supports to detainees, including individuals exhibiting extreme withdrawal symptoms. The DMU is also responsible for supporting detained individuals awaiting bail hearings. In addition, the Edmonton Police Service has a satellite program at the Northwest police campus where paramedics provide addiction treatment supports and connect detainees to the VODP. Information on APS and DMU utilization is provided in Key Objective 3.4.

2.2 Establish new and optimize existing addiction treatment spaces and recovery communities across the province to support more Albertans in their pursuit of recovery.

Building recovery communities

Recovery communities provide life-saving recovery-oriented care for individuals experiencing addiction and are an essential component of the Alberta Recovery Model. These facilities offer

holistic rehabilitation, helping people re-learn and re-establish physical and emotional health, repair relationships and learn new skills over a period of up to one year.

Alberta's government committed to establish 11 recovery communities across the province, including five in partnership with Indigenous communities, to reduce barriers and improve access to recovery-oriented supports for more Albertans. Sites are selected to serve the highest reported need and provide access for urban and rural areas. In 2023-24, two recovery communities were opened, two were under construction and the remaining seven were in various stages of planning and development. About 700 new long-term addiction treatment beds will be added across the province once all 11 recovery communities are operational, helping more than 2,000 Albertans every year in their pursuit of recovery and increasing the recovery capital in communities.

In May 2023, the province's first recovery community opened its doors in Red Deer with a full capacity of 75 treatment beds capable of serving up to 300 clients per year. A total of \$24 million in capital funding was invested in the project. In 2023-24, Mental Health and Addiction provided more than \$5.3 million to Edgewood Health Network Canada Inc. to operate the facility that had served 145 clients as of March 31, 2024. In the first year of operation, adjustments were made to the cohort complement and admission process to enable development of a positive therapeutic environment. The number of clients served is expected to increase now that Red Deer is finished building to its full capacity and will continue to operate at full capacity for the foreseeable future.

Recovery Month is a national observance held annually in September. 2023-24 marked the fifth year Alberta's government celebrated and recognized people across the province living in recovery. Stories shared by those in recovery provides encouragement to people struggling with addiction and offers hope that recovery is possible.

In September 2023, the second recovery community was opened in Lethbridge with a full capacity of 50 treatment beds capable of serving up to 200 clients per year. A total of \$19 million in capital funding was invested in the project. In 2023-24, the ministry provided nearly \$3.1 million to Fresh Start Recovery Centre to operate the facility that had served 74 clients as of March 31, 2024.

In 2023-24, recovery communities in Gunn and Calgary were under construction. The Lakeview Recovery Community in Gunn is expected to open in summer 2024, and the Calgary facility is expected to open in early 2025. Preliminary planning for recovery communities in Grande Prairie and Edmonton was also undertaken in 2023-24. Further information on Indigenous-led recovery communities is included in Key Objective 2.3.

Expanding access to medical withdrawal management, residential addiction treatment and residential recovery services

Alberta's government is continuing to focus on increasing addiction treatment capacity to ensure care is available to Albertans when and where they need it. As of March 31, 2024, more than 29,000 publicly funded spaces and 1,350 beds were available to those seeking treatment and recovery. Publicly funded treatment is provided free of charge to all Albertans.

Mental Health and Addiction is continuing to provide funding to support the more than 10,000 new publicly funded treatment spaces added in the last four years. Of the 10,000 spaces, approximately 7,700 are for medical withdrawal management, and more than 2,700 are for bed-based addiction treatment (residential treatment and residential recovery). Most of these spaces are supported with funding provided through the Medical Detoxification and Residential Addiction Treatment Expansion (MDRATE) Program. The program not only supports the operation of publicly funded addiction treatment and recovery services, but it also works to enhance the quality of services and programming delivered to support Albertans recovering from substance use issues.

In 2023-24, the ministry provided \$39.3 million to Alberta Health Services to administer the MDRATE Program. Funding was disbursed to 26 community agencies licensed under the MHSPA. In 2023-24, 5,173 Albertans received publicly funded treatment in the community at a facility supported by the MDRATE Program. Of this total, 3,725 individuals received treatment for the first time. Between April 1, 2023, and December 31, 2023, an average of 77 per cent of the available beds supported through the MDRATE Program were occupied.

Pre-treatment programs are part of a comprehensive recovery-oriented system of care that offers a bridge between medical withdrawal management and treatment for people who are pursuing recovery from addiction. In 2023-24, Alberta's government committed \$1.8 million in funding through the MDRATE Program over a three-year period (2023-24 to 2025-26) to support the Oxford House Pre-treatment Program. The funding established 240 additional pre-treatment recovery spaces annually in Calgary that are free for all Albertans with no user fees.

National Addictions

Awareness Week is observed annually during the last full week in November to reflect on the issues of substance use and learn more about addiction prevention and how to support people needing help with substance use.

The George Spady Centre Society (GSS) provides medical withdrawal management and drug consumption services in Edmonton's downtown core. Beginning in early 2023, a project was initiated to relocate GSS withdrawal management services to a newly renovated and more spacious facility that will have more capacity for medical withdrawal management and addiction recovery services. Funding for the project (\$8 million) was previously allocated in 2022-23 and covers the costs of the new building, building renovations and furnishing. In 2023-24, progress made on the project included planning and design work, as well as completing the property purchase. This process included GSS working closely with the City of Edmonton to amend the zoning bylaw, which was finalized in February 2024. In late 2024-25, the facility is expected to open and provide 10 new medical withdrawal management beds (41 in total) and nine new addiction recovery beds (19 in total).

2.3 Expand efforts to ensure culturally appropriate addiction and mental health community supports are in place for First Nations, Métis and Inuit peoples in Alberta.

Supporting safe, culturally appropriate treatment

Alberta's government is committed to building and strengthening a comprehensive continuum of mental health and addiction services for Indigenous peoples in Alberta. As part of a holistic approach to improve care, Alberta's government is building five recovery communities across the province in partnership with Indigenous communities that are intended to provide culturally safe and community-based services for people pursuing recovery. Recovery communities will be established on the Blood Tribe First Nation, Enoch Cree Nation, Tsuut'ina Nation, Siksika Nation and one additional location in the north zone and offer culturally appropriate treatment and holistic healing. These five are included as part of the 11 recovery communities being built throughout the province.

In early 2023-24, Alberta's government signed memoranda of understanding with Enoch Cree Nation, Tsuut'ina Nation and Siksika Nation to initiate recovery community planning and development. A total of \$14.9 million in capital funding was provided for early planning and construction activities, which includes undertaking site assessments, engaging with the community, and preparing Lands Plans detailing the requirements and steps for carrying out construction. On July 19, 2023, a groundbreaking event was held for the Blood Tribe Recovery Community, which will be operated by the Blood Tribe Department of Health.

In 2024-25, a total of nearly \$99 million in capital grants is budgeted to initiate construction activities for Indigenous-led recovery communities, which will add approximately 375 beds to the system capable of serving hundreds of Albertans once operational.

Implementing culturally appropriate community-based programs and services

Mental Health and Addiction is continuing to fund a suite of programs and initiatives that ensure culturally appropriate addiction and mental health community supports are in place for First Nations, Métis and Inuit peoples in Alberta. Supported initiatives aim to strengthen community-based mental health and addiction programs and services for Indigenous peoples in Alberta. In 2023-24, more than \$4.8 million was provided to support this suite of Indigenous programming.

Indigenous Continuum of Wellness

The Indigenous Continuum of Wellness Program is delivered by the Indigenous Wellness Core at Alberta Health Services and funded by Mental Health and Addiction. The program provides funding to First Nations, Metis Settlements, the Métis Nation of Alberta and Indigenous supporting organizations to implement recovery-oriented, community-driven mental health and wellness projects that build on identified needs and gaps within the community. The program is intended to increase capacity within Indigenous communities and organizations by funding opioid response projects to support Indigenous models for addressing the opioid crisis and to support the design and implementation of recovery-oriented, culturally appropriate mental health and wellness services. In 2023-24, the ministry provided nearly \$2.4 million to the Indigenous Wellness Core to support 24 projects led by Indigenous communities and organizations. Notably, the Indigenous Wellness Core was instrumental in providing support to evacuated Indigenous communities during the 2023 wildfire season.

Provincial partnership on recovery

- Beginning in 2024-25, Ministers responsible for mental health and addiction in Alberta, Ontario and Saskatchewan will collaborate on building systems of care that focus on recovery.
- The agreement highlights the importance of breaking down barriers and increasing access to recovery-oriented care, sharing best practices, advancing partnerships with Indigenous communities and advocating to the federal government for investment and policies that support recovery.

Building Bridges from Care to Home

The Building Bridges from Care to Home Program is delivered by the Kainai Transition Centre Society and funded by Mental Health and Addiction. The program is located on the Blood Tribe reserve and provides Indigenous-based transition services to support individuals pursuing recovery who are challenged by addiction, trauma and mental health issues. The program provides support to individuals transitioning back to their families and communities, offering 22 beds where clients can stay for up to one year and take part in Indigenous ways of healing and evidence-based mainstream counselling. In 2023-24, Mental Health and Addiction provided nearly \$1.4 million to support continued operation of the program. A total of 142 individuals accessed services and 404 education sessions, 84 recovery support meetings and more than 170 one-on-one sessions facilitated by Elders were held throughout the year.

Stoney Nakoda Tsuut'ina Tribal Council First Nation Client Liaisons

The Stoney Nakoda Tsuut'ina Tribal Council First Nation Client Liaisons Program is delivered by the Council and funded by Mental Health and Addiction. The program provides funding for First Nations Health Client Liaisons who work with families to help bridge the connection between client and services and build positive linkages and partnerships between the First Nations and the public health system. In 2023-24, the ministry, provided \$400,000 to support the ongoing work of First

Nations Health Client Liaisons within the four First Nations in the Treaty 7 Territory (Bears paw, Chiniki, Wesley and Tsuut'ina) in southern Alberta. Program reporting indicates First Nations Health Client Liaisons have had significant success liaising with Alberta Health Services for discharge planning, including planning for transportation and housing modifications for better accessibility when individuals return to their homes.

Coordination for Integrated Mental Health and Addiction Programming

This project aims to provide integrated mental health and addictions services for the Kee Tas Kee Now Tribal Council (KTC) First Nations through centralized coordination and relationship building with Nation level programs and publicly funded service providers. This project further funds the position of the KTC Addiction Specialist. The Addiction Specialist maintains relationships with on Nation and off Nation service providers and assists community members in accessing addiction and mental health supports. The Addiction Specialist role further coordinates education efforts and provides guidance to the four members of the Maskawâtsiwin Team who work directly with community members as a resource and a point of contact for addiction and mental health challenges, including crisis support. In 2023-24, the ministry provided \$200,000 to KTC for continued programming to effectively respond to community needs.

Metis Settlements Mental Health and Addictions Navigators

The Metis Settlements Mental Health and Addictions Navigators Program is delivered by the Metis Settlements General Council and funded by Mental Health and Addiction. The program provides funding for social navigators to provide culturally appropriate early intervention services and work to address barriers and improve access to mental health and addiction services for clients. In 2023-24, the ministry provided more than \$166,000 to support the work of social navigators across the Metis Settlements. Through a partnership with Indigenous Services Canada, 800 naloxone kits were distributed to the Metis Settlements through harm reduction sessions facilitated as part of this project. In 2023-24, further referrals were provided to 25 members for residential treatment, mental health therapy and social services and community programs. Partnerships with government and Alberta Health Services improved available support and communication about mobile mental health and addiction teams that service all eight Metis Settlements.

Community Wellness Advocate Program

The Community Wellness Advocate Program is delivered by the Métis Nation of Alberta Association (MNA) and funded by Mental Health and Addiction. The program provides funding to support equitable access to appropriate mental health and addiction supports and services for Métis Albertans, grounded in a Métis perspective. Individuals who access the program receive support to attain their mental wellness related goals, information and referrals, advocacy, system navigation, follow-up care and crisis financial assistance to access services that incur out-of-pocket expenses or to overcome waitlists. MNA also provides health surveillance of its population to inform services needs through the program. In 2023-24, the ministry provided \$150,000 to support program operations, including providing more than 530 referrals, responding to inquiries from 470 Albertans and supporting access to counselling sessions through the program's financial support component. Reporting from the MNA for 2023-24 demonstrated a high overall rate of satisfaction with the program.

Mental Health and Addiction Supports Program

The Mental Health and Addiction Supports Program is delivered by Aseniwuche Winewak Nation of Canada, A fellowship of Aboriginal People (AWN) and funded by Mental Health and Addiction. The program provides funding to support access to mental health and addiction services, life skills training to prepare those seeking to return to the community or work force and navigator supports

for people in need of housing and other social service supports. The program serves the population of Grande Cache and the surrounding Indigenous community members. In 2023-24, the ministry provided \$150,000 to support continued operation of the program. Up to 38 community members regularly attended scheduled programming and a total of 34 people received support to access medical withdrawal management and residential treatment services. In 2023-24, more than 5,700 harm reduction supplies were distributed within the AWN community.

Treaty 6 Wellbriety Movement

The Treaty 6 Wellbriety Movement is delivered by the Central Alberta Fetal Alcohol Spectrum Disorder (FASD) Network/Central Alberta FASD Society and funded by Mental Health and Addiction. The Wellbriety Movement provides culturally based healing conceptualized for, but not limited to Indigenous people. The Wellbriety Movement includes the recruitment of suitable Wellbriety Certified Facilitators, facilitator training and implementation and expansion of the Circles of Wellbriety. The program provides culturally based supports delivered through Circles of Wellbriety to foster sobriety, wellness and to address underlying trauma. In 2023-24, the ministry provided \$52,000 to support ongoing operation of the program. The program serves the communities of Red Deer, Rocky Mountain House, Olds, Sundre, Drumheller, Three Hills, Hanna, Caster, Coronation, Consort, Stettler, Sunchild First Nation, O'Chiese First Nation and Big Horn First Nation. The Wellbriety Movement is successfully implemented in Treaty 6 area correctional institutions, participating treatment-based organizations, homeless shelters and Indigenous communities. Over the past year, the Central Alberta FASD Network was offered two sponsored trainings: the Medicine Wheel 12 Steps for Youth and Mending Broken Hearts for Youth. In addition, as a result of the ability to mentor new circles, the communities of O'Chiese First Nation and Sylvan Lake, along with Olds College started meetings with assistance and have incorporated Wellbriety in their regular recovery programs.

2.4 Enhance system and service provider accountability to improve quality and safety, with a focus on transitions and integration back to the community to support recovery.

Providing regulatory oversight and enforcement to ensure safe, quality care

Alberta's government is ensuring those who live with mental illness or addiction issues have access to a range of high-quality supports and services to assist them in their pursuit of recovery. Mental Health and Addiction's Compliance and Monitoring Unit acts as the regulatory enforcement body that safeguards Albertans by monitoring service providers for compliance and adherence to the legislative requirements and standards under the MHSPA. The MHSPA and Regulation provide licensing and other requirements for residential addiction treatment services, supervised consumption services (also known as drug consumption services), narcotic transition services and psychedelic drug treatment services.

The Compliance and Monitoring Unit conducts regular inspections and investigations, responds to complaints and follows up on reported incidents at 111 facilities owned and operated by 59 service providers across the province. As a first enforcement step, conditional licences can be provided to help elevate the system of care and keep more beds open for individuals in need. For sustained or high risk non-compliances other enforcement measures are available, including Inspector's Order, licence suspension/cancellation, administrative penalties and court orders. In 2023-24, the ministry spent more than \$1.3 million to undertake compliance and monitoring activities.

2023-24 Compliance and Monitoring Overview

Enforcement/Licensing Activity	Result
Inspections completed	158
Inspection Orders issued	6
Investigations completed	20
Resolved instance of non-compliance	544
Conditional licences issued	23
New licences issued	46

In 2024-25, the number of facilities inspected and licensed is expected to increase when licensing and inspection of psychedelic drug treatment services commences. The expanded inspection and licensing program will ensure more service providers across the province are operating in accordance with the MHSPA, further enhancing the quality and safety of provided services.

The ministry is working on several projects to improve supports for service providers and reduce administrative burden, including developing and implementing a secure online portal for submitting documentation such as complaints, critical incident reports, licensing applications and renewals, collaterals and electronic evidence. An interactive web portal is also under development that will provide resources and information about licensing, compliance monitoring and enforcement outcomes for service providers, Albertans and their families. System implementation is expected to occur in 2024-25.

Supporting opioid dependency programs and narcotic transition services

ODP clinics assist people with opioid use issues by providing evidence-based opioid agonist treatment medications such as methadone, Sublocade and Suboxone and psychosocial support, including addiction counselling and referral to other community-based services. Alberta Health Services operates 15 ODP clinics across the province: Edmonton (five sites), Calgary, Red Deer, Fort McMurray, Lethbridge, Medicine Hat, Grande Prairie, Bonnyville, Cardston, High Prairie and Ponoka.

Narcotic Transition Services (NTS) are highly specialized services intended for people with the most severe cases of opioid addiction who have been unable to stabilize on conventional opioid agonist treatment medications. As of February 2023, NTS is available in all provincial health zones and offered in six ODP clinics: Calgary, Edmonton, Red Deer, Lethbridge, Grande Prairie and Medicine Hat. In 2023-24, Mental Health and Addiction provided \$15.8 million to Alberta Health Services to enhance operations and expand capacity for 10 ODP clinics in Alberta. The investment will enable increased and ongoing access to NTS through Alberta Health Services-run locations and expand and maintain the provincial capacity to provide ODP treatment through all 10 clinics.

Supporting safe transitions

Safe, well-planned transitions between services and warm hand offs ensure Albertans are supported through every step in their pursuit of recovery and can experience successful integration back into the community. In 2023-24, an example of this is the safe transportation service supported by Mental Health and Addiction. The project involved providing Albertans

released from the Calgary Spyhill APS the opportunity to be safely transported by commissionaires back into the community or to other social agencies, such as the Calgary Drop-In Centre or shelters.

Transitions between services

Services provided in recovery communities aim to improve individual recovery capital over a period of up to one year. Near the end of the program, clients can access workforce training to attain certifications and skills for diverse industries, enroll in continuing education or gain work experience in various roles around the facility. In addition, residents are connected with community supports including housing, vocational assistance, recovery-supportive workplaces, healthcare providers, Indigenous organizations and 2SLGBTQIA+ groups, all facilitating successful community reintegration. These services ensure individuals receive adequate support to ease their transition back to the community following treatment and set them up for success.

Individuals who take part in the TLU program undergo comprehensive, holistic addiction treatment while in custody and are supported by trained staff to prepare for life outside the TLU near the end of their release. The final phase is focused on preparing individuals for admission to a recovery community to engage in a formal vocational linkage program for approximately six months. Transitioning to a recovery community following release is voluntary. In 2023-24, more than half of the individuals who completed the TLU program subsequently transitioned to an Alberta recovery community.

As part of the VODP, transitional services are available seven days a week to help ensure smooth transitions for clients who are moving from one care setting to another. The Transitional Service Team employs a significant social work complement to provide provincial expertise around resources for opioid care and supports clients transitioning from:

- emergency departments;
- inpatient medical units;
- drug consumption services;
- medical withdrawal management sites;
- residential treatment programs;
- police detainment units;
- shelters;
- correctional facilities; and
- Indigenous communities.

Performance Indicator 2.a:

Recovery Capital scores of Albertan communities (under development)

In 2023-24, this performance measure remained under development. The Recovery Expert Advisory Panel provided insight and options for measuring community recovery capital and the ministry's research confirmed recovery capital is not traditionally measured at the community level, even though community support is vital for people pursuing recovery. In 2024-25, Mental Health and Addiction will continue work to build out this innovative indicator to add knowledge to the recovery landscape using data collected through a newly established survey. The indicator wording has been updated in the 2024-27 Mental Health and Addiction business plan to better reflect the new direction, which is the degree to which Alberta communities support recovery.

Outcome Three: Albertans have access to high-quality, person-centred mental health and addiction programs and services

Mental Health and Addiction works with government and community partners to provide access to a consistent continuum of supports and services spanning prevention, intervention, treatment and recovery for those at risk of, or experiencing, mental health and addiction issues. The ministry is responsible for directly funding the delivery of a significant number of community-based programs that provide an expanded range of services for children and youth, Albertans in rural and remote areas and other underserved communities. The ministry is committed to providing continued support for harm reduction services and supporting innovative programs that allow more Albertans to access services effectively and efficiently.

3.1 Ensure Albertans can access a continuum of recovery-oriented supports that meet their unique needs to improve their mental health.

Supporting accessible mental health services for prevention and early intervention

Alberta's government is committed to supporting accessible and affordable prevention and early intervention initiatives along the recovery-oriented continuum of care.

211 Alberta

211 Alberta (<https://ab.211.ca/>) is a free service that provides a single point of contact for high-quality system navigation supports, including information and connections to health, social and government services and organizations that provide a range of addiction and mental health supports. The service is confidential and available 24/7 through phone, text or chat. Phone services are available in more than 170 languages.

In 2023-24, Mental Health and Addiction provided approximately \$4.9 million to 211 Alberta to:

- meet existing demand;
- enhance community service listings in rural areas;
- improve the response to underserved populations;
- better connect callers to culturally and locally relevant supports; and
- develop and implement specialized navigation supports for children, youth and families.

In 2023-24, the service logged more than 88,000 total interactions by phone, text and chat. In addition, 211 Alberta operating partners, the Canadian Mental Health Association Edmonton and Distress Centre Calgary, became the province's 9-8-8 partners when the service opened in November 2023, answering calls and texts into the service from Albertans.

Throughout the year, new organizations and services were continuously added to the 211 Alberta database, including a mix of services located in rural and urban areas. In 2024-25, 211 Alberta will continue to support and improve seamless access with current partners (e.g., crisis lines, Alberta Support Contact Centre/Income Support Contact Centre, Caregivers Alberta, Alberta One Line and more) and explore opportunities to grow specialized navigation for individuals with complex needs or where additional support is required to ensure success in accessing supports.

World Suicide Prevention Day

is observed annually on September 10 to raise awareness and take action to prevent suicide. Alberta's government promotes the day by drawing attention to available resources and encouraging people to speak openly and acknowledge challenges to build resiliency and hope.

Kids Help Phone

Kids Help Phone (<https://kidshelpphone.ca/>) is a national 24/7 mental health support service for youth ages four to 29 that offers clinically based self-directed tools, mental health promotion and interventions, crisis support services, anonymous and confidential professional counselling and

Approximate 2023-24 service use

211 Alberta

- 77,900 phone calls
- 5,800 texts
- 4,300 chat exchanges

Kids Help Phone

- 17,600 phone calls
- 26,100 texts
- 350 chat exchanges
- 6,900 referrals provided
- 9,500 referrals made through the Resources Around Me Portal

community resource referrals in French and English at no cost. In Alberta, Kids Help Phone leverages resource listings and information available through 211 Alberta. In addition to providing immediate one-on-one support, Kids Help Phone also ensures young people can connect to local services and support in their community through the online Resources Around Me portal, which provides access to thousands of service listings on demand. In 2023-24, Mental Health and Addiction provided more than \$1.7 million to the Kids Help Phone for program operations and the service logged more than 44,000 interactions. Over the next year, Kids Help Phone will continue to improve services for clients and the effectiveness of the survey tool.

Recovery Colleges

The Provincial Recovery College Program (<https://alberta.cmha.ca/what-we-do/cmha-in-albertas-projects/alberta-recovery-colleges/>) helps those with mental health concerns and their supporters build

mental health peer capacity through locally developed courses that are accessible to anyone. The program is delivered by the Canadian Mental Health Association, Alberta Division and is available to all Albertans. Recovery Colleges provide early access to mental health supports through a range of in-person and virtual courses that help develop resiliency, wellness, connection, belonging and hope. All courses are co-developed and co-facilitated with the community and peers. This ensures community needs are addressed and incorporates both lived experience and clinical expertise. As of March 31, 2024, six Recovery Colleges were operating: Camrose, Grande Prairie, Lethbridge, Red Deer, Edmonton and Wood Buffalo.

In late 2023, the Medicine Hat Recovery College ceased operating due to financial pressures. In response to the closure, bridging opportunities were created for impacted community members to access Recovery College courses virtually through several other regions across Alberta. The Canadian Mental Health Association, Alberta Division is exploring opportunities to partner with a local organization to re-operationalize a Recovery College in the community.

In 2023-24, Mental Health and Addiction provided \$1.2 million to the Canadian Mental Health Association, Alberta Division to improve access to timely, cost-effective, outcomes-driven and effective care through the Provincial Recovery College Program. In 2023-24, a total of 695 courses were available, 53 of which were launched during the year. There were 6,380 registrations for available courses and more than 1,340 individuals participated in recovery-focused courses through the program, including 1,175 new participants. In 2023-24, more than 660 people were referred to the Recovery Colleges program from other services.

Throughout 2023-24, Albertans who participated in multi-session Recovery College courses reported learning new skills and acquiring new tools to support their well-being, such as grounding techniques, coping and stress management skills and how to manage emotions and practice self-compassion. Ninety-four per cent of multi-session Recovery College course participants reported increased hope for the future and 91 per cent indicated they had learned how to manage life

challenges more effectively after participating in Recovery College courses. In 2024-25, the Provincial Recovery College Program is expected to expand programming to Calgary and into additional rural and remote communities.

Mental health-related supports

In 2023-24, 10 mental health and crisis workers trained in suicide intervention and crisis de-escalation were incorporated into the Calgary 911 call centre to action and assist with mental health and addiction-related calls. In addition, several helplines and online chat services are available for Albertans seeking mental health information or support:

- The Alberta One-Line for Sexual Violence (<https://aasas.ca/get-support/> and 1-866-403-8000) provides emotional support, information and referral to anyone who has experienced or been impacted by sexual violence. Services are available 7 days a week. There were 2,648 total interactions in 2023-24 (1,300 calls, 267 texts and 1,011 chat exchanges).
- The Indigenous Support Line (<https://www.albertahealthservices.ca/info/Page18213.aspx> and 1-844-944-4744) supports Indigenous peoples seeking service navigation assistance including cultural support; primary care support; addiction and mental health support; general Indigenous Alberta Health Services support; referrals; and/or patient concerns. Services are available Monday to Friday from 12 p.m. to 8 p.m. The service managed more than 5,200 calls in 2023-24.
- The Mental Health Helpline (1-877-303-2642) is a 24/7 confidential telephone service that provides support, information and referrals to Albertans experiencing mental health challenges.
- The 9-8-8 Suicide Crisis Helpline (<https://988.ca/>) provides emotional support and resource information for individuals dealing with thoughts of suicide or those who are worried about someone else. Services are available by phone or text 24/7.

Providing mental health supports for underserved communities

Mental Health and Addiction is working to ensure all communities within the province have access to a continuum of mental health and addiction supports that meet their unique needs. The ministry works with several organizations targeting underserved communities and provides grant funding to ensure the suite of supported programs are inclusive to as many Albertans as possible.

Rural Albertans

The Rural Mental Health Program (RMHP) (<https://www.ruralmentalhealth.ca/>) is delivered by the Canadian Mental Health Association, Alberta Division and funded by Mental Health and Addiction. The program is intended to address the mental health needs of rural Albertans by building rural communities' recovery capital and capacity to meet rural residents' mental health needs through training, community grants and partnerships. The RMHP leverages whole-community, evidence-based and inclusive strategies that embed the experiences of residents, families and professionals. Funding provided through the program supports a sub-grant process, which allows for the development of action plans for rural communities to understand the current context of local mental health needs and services, identify best and promising practices and chart out key projects to move forward.

Mental Health Week is marked annually during the first full week of May to emphasize the importance of mental health as part of individual's well-being and to encourage people to talk about their mental health with others.

World Mental Health Day is observed annually on October 10 to raise awareness of mental health issues and to encourage activities that support mental wellness. The day is used to promote open conversation and draws attention to available mental health resources.

In 2023-24, Mental Health and Addiction provided more than \$1.7 million to support the RMHP, which included funding 35 rural communities through the sub-grant process and providing 59 capacity building training sessions. Rural communities face unique challenges; existing professionals and volunteers are in high demand due to their involvement in or support of multiple priorities and some communities do not have access to specialized local skills. In addition, more inclusive practices to encourage equity-deserving groups to participate in the program requires flexibility and offering alternative options to communities, which can include time intensive commitments and alterations that are meaningful to

each demographic group. To overcome these challenges, the Canadian Mental Health Association, Alberta Division is bolstering grant preparation and planning supports, including offering additional skills-based training and workshops, establishing one-on-one support for applicants to help them improve the quality of their submissions and embedding tips into application forms.

Newcomer and ethno-cultural communities

The ministry supports four programs targeting immigrant and refugee communities in Edmonton and Calgary. In 2023-24, Mental Health and Addiction provided more than \$1.6 million to support these programs.

- The Immigrant and Refugee Youth Mental Health Project is delivered by Multicultural Health Brokers Co-operative and funded by Mental Health and Addiction. The project supports the promotion and fostering of positive mental and physical well-being in immigrant and refugee youth in Edmonton by providing programs that are responsive and relevant to their unique and complex needs. Supports, resources and a range of programming (e.g., therapy, mentorship and leadership) are available to young people ages 12 to 29 to increase their mental health awareness; build their skills, knowledge and confidence; explore career choices and pathways; and support their personal development. In 2023-24, the ministry provided \$350,000 to support the project, which served a total of 458 clients within 19 ethno-cultural communities.
- The Therapeutic Services to Support Newcomers' Mental Health Program is delivered by the Edmonton Mennonite Centre for Newcomers and funded by Mental Health and Addiction. The program provides culturally appropriate mental health services and wrap-around supports for immigrants and refugees facing multiple barriers to accessing traditional services and delivers educational sessions to organizations that work with this population. Services include counselling (including trauma therapy) for immigrant and refugee adults, youth and children; social work support for multi-barrier immigrants and refugees; and provision of education sessions to strategic partner organizations on immigrant and refugee mental health. The ministry provided \$615,000 to support the program, which served a total of 985 clients in 2023-24. Of those clients who received counselling, 80 per cent reported improved relationships with family or important others in their lives. Additionally, 100 per cent of clients who accessed the program demonstrated a reduction in the severity of clinical symptoms of mental illness, 75 per cent reported improvement in self-esteem and 75 per cent indicated they had learned new and effective coping strategies which they were incorporating in their daily lives.
- The Youth/Family Therapy Support Program is delivered by the Calgary Catholic Immigration Society Centre for Refugee Resilience and funded by Mental Health and Addiction. The program supports delivery of community-based, culturally sensitive mental health services for immigrant and refugee children, youth and their families to address traumatic stress, and provides education to community stakeholders. The service model and intervention plan include mental health therapists and case coordinators to provide general non-therapeutic client support, community outreach, development of treatment plans and counselling services. In 2023-24, the

ministry provided more than \$338,400 to support the program, which served a total of 55 clients. For families who accessed the program, 93 per cent reported successful outcomes and 89 per cent reported they were satisfied with the language support provided to them. Overall, 71 per cent of participants demonstrated improvement in functioning and reduction in problem severity. In November 2023, the Centre introduced family socials through the Youth/Family Therapy Support Program, which involved creating spaces and opportunities for newly settled families and youth living in hotels to come together to combat isolation. In addition, a mature minor policy was introduced within the youth side of the program for clients who were deemed mature enough to consent for services without involvement of their parents.

- The Building Preventative Recovery Capital through Community Engagement Project was delivered by the Umoja Community Mosaic and funded by Mental Health and Addiction for a period of one year. The project provided mental health supports to low-income newcomer children, youth, and families facing social, mental and economic challenges. Funding supported after school programming, a food and nutrition program, culturally appropriate counselling and wellness sessions, and education and mentorship programming. In 2023-24, the ministry provided \$300,000 to support the project, which served a total of 1,782 clients.

Survivors of sexual violence

The Addressing the Health and Wellness of Albertans who have Experienced Sexual Assault and Sexual Abuse Program is delivered by the Association of Alberta Sexual Assault Services (AASAS) and partially funded by Mental Health and Addiction. The program ensures Albertans have access to timely, affordable and specialized sexual violence counselling services that are based on the most recent research, information and evidence-based practice. AASAS has 14 member agencies in rural and urban communities throughout Alberta. In 2023-24, the ministry provided nearly \$2.2 million to support 12 of these agencies to provide specialized trauma counselling services to individuals who have experienced sexual violence. A total of 6,610 individuals received counselling services, including 3,378 new clients, through the delivery of more than 30,450 individual and group counselling sessions. Program reports demonstrated that 90 per cent of group counselling participants gained awareness of available external supports and resources. In 2023-24, an increase in diversity of clients accessing counselling services was also noted, including more male identifying, Indigenous, Transgender and 2SLGBTQIA+ clients. Over the course of the year, AASAS facilitated 29 network wide Community of Practice meetings to foster a coordinated, collaborative and evidence-based response to sexual violence.

Eating disorders

Mental Health and Addiction provides partial funding support for two eating disorder programs: the Calgary Eating Disorder Program (CEDP) Community Treatment Beds and the Eating Disorder Support Network (EDSNA). Through the CEDP, 12 community treatment beds were established, and operate 24/7 for patients aged 13 to 24 with an eating disorder diagnosis in Calgary to address a significant gap in the continuum of care. In March 2024, the CEDP began accepting youth. The EDSNA facilitates support groups for people with eating disorders and provides public education and eating disorder awareness activities. Over a three-year period between September 1, 2020, and August 31, 2023, EDSNA offered 50 drop-in caregiver groups, 51 multi-week groups and 21 multi or single session workshops. Over the three-year period, 1,029 clients, caregivers and professionals participated in the groups and workshops.

National Eating Disorder Awareness Week is observed annually from February 1-7 to raise awareness about the seriousness of this health condition, who it impacts and the associated mental health challenges. The week is used to promote available supports for those struggling with an eating disorder.

Post-secondary students

The Recovery on Campus Alberta Project (<https://www.recoveryoncampusalberta.ca/>) is delivered by Recovery on Campus and funded by Mental Health and Addiction. Recovery on Campus is the first provincewide collegiate recovery organization in Canada. The organization, based out of the University of Calgary, is addressing a gap in the province's recovery-oriented system of care by leading in the co-creation of collegiate recovery programs across 26 publicly funded post-secondary institutions throughout Alberta. These programs aim to develop and expand support for students experiencing or at risk of addiction or mental health issues to enter and maintain recovery. The goal is to establish peer-led communities on campuses and provide virtual support to campus members in recovery. Programming includes addiction and recovery training, outreach and community building activities such as awareness campaigns and recovery-safe events. In 2023-24, the ministry provided \$644,000 to support the ongoing operation of the program. Recovery on Campus Project services and resources were accessed more than 4,480 times on campuses across the province in 2023-24. There were 39 capacity building information sessions, workshops and seminars and 10 outreach and community building events held, which had approximately 640 participants and more than 6,900 attendees, respectively. Program reporting indicates implementation of the Recovery on Campus toolkit led to increased recovery-oriented programming in at least five partnering post-secondary institutions. Mental Health and Addiction also provides funding to Alberta Health Services to work directly with post-secondary institutions in Edmonton and southern Alberta to ensure students have access to clinical mental health and addiction services as well as linkages into the public health system and back to campus.

Building trades professionals

The Building Trades of Alberta (BTA) Member Wellness Program is delivered by the Alberta Building Trades Council Benevolent Society and funded by Mental Health and Addiction. The program is designed to improve the health, safety and well-being of more than 60,000 members across 10 local construction trade unions by providing supports to individuals with addiction or mental health issues to enter and maintain recovery. The dedicated substance abuse program protects workers and the public against safety risks by ensuring that BTA members get the help they need to address drug and alcohol issues. The program also provides proactive education and awareness sessions for workers and assigns peer supports to major worksites. In 2023-24, BTA used grant funding provided by the ministry to:

- develop and offer sector-wide training on mental health, wellness and resiliency;
- launch the Breaking Free digital service to support trade members in recovery or seeking to reduce alcohol or substance use;
- host two recovery-oriented workplace training sessions for owners and contractors; and
- certify almost 70 individuals as peer supports.

2SLGBTQIA+

The CHEW (Community, Hope, Empowerment, Wellness) Project is delivered by the University of Alberta and funded by Mental Health and Addiction. The project provides mental health and addiction intervention and outreach supports, including crisis and suicide intervention support, to Edmonton's homeless and street-involved sexual and gender minority youth and young adults. The project provides access to wrap-around supports and resources in the community to enhance social well-being, such as counselling referrals, and assists clients with meeting their physical, safety and comprehensive health needs. In 2023-24, the ministry provided \$90,000 to support the project and a total of 330 individuals accessed services.

3.2 Expand the range of recovery-oriented services to support people living with a severe mental illness, with a focus on youth and young adults.

Expanding access to mental health supports in schools

Alberta's government is committed to expanding access to a range of mental health services in schools in partnership with organizations like CASA Mental Health (<https://casamentalhealth.org/>) and the Calgary Police Youth Foundation (<https://yycyouthfoundation.ca/>) as part of the Child and Youth Health Services Initiative. These school-based initiatives are intended to promote positive mental health and provide mental health services earlier to more children and youth to prevent treatment in hospitals and empower them to thrive.

Mental health classrooms

Mental health classrooms bridge a child's mental health and school needs by providing clinical supports to students with complex needs in classroom settings. These classrooms are referral-based and designed for students in grades 4 to 12 who:

- have not responded as expected to previous therapy and continue to have symptoms that impact their home, social and school life;
- are currently under the care of a physician, nurse practitioner, or psychiatrist; and
- are willing to participate in individual and group therapy with their family.

Through the program, delivered by CASA Mental Health, students are supported by a team of mental health professionals, including a therapist, psychiatrist and behavioural specialist. Classrooms are supported by a health team that includes a nurse, social worker, educational psychologist, speech and language therapist and occupational therapist. Each classroom serves a geographical area, meaning students from different schools within the community can be admitted to the classroom. Programming aligns with the school year; students are supported in the classroom for approximately half of the school year, followed by another half-year of tapered treatment and caregiver support as students transition back to their home classroom and care team. Mental health classrooms have the capacity to support 12 students per cohort.

In 2023-24, Mental Health and Addiction provided \$30 million to CASA Mental Health to establish more mental health classrooms for students with complex needs. In 2023-24, six additional classrooms were established and a total of 96 students were supported through mental health classrooms. As of March 31, 2024, eight mental health classrooms were operational in schools throughout the province:

- Gibbons School in Gibbons (February 2023);
- Sturgeon Composite High School in Sturgeon County (February 2023);
- Fort Saskatchewan Elementary in Fort Saskatchewan (September 2023);
- J.A. Fife School in Edmonton (September 2023);
- St. Gabriel Catholic School in Edmonton (September 2023);
- Escuela Vista Grande School in Red Deer (February 2024);
- Southview Community School in Medicine Hat (February 2024); and
- Wetaskiwin Outreach School (February 2024).

In 2024-25, at least 12 additional mental health classrooms are expected to open, including one in a French immersion school (Senator Riley School in High River). A total of \$70 million is budgeted for

the expansion over three years (2023-24 to 2025-26) and up to 60 mental health classrooms are expected to be established by late 2026, serving a catchment area of more than 140 communities.

Integrated School Support Program (ISSP)

The ISSP is a wellness initiative that provides wrap-around supports, such as meal programs, after school care, daily physical education, a positive police presence and access to mental health professionals to youth ages five to 15 at risk of addiction and mental health issues. The program also gives students and their families access to other supports as required through 211 Alberta or other community resources. These prevention and early intervention supports help children and youth improve their mental health, academic performance, social and emotional wellness and quality of life by building strength and resilience. The program is delivered by the Calgary Police Youth Foundation and is being rolled out in two phases.

In 2023-24, the ministry provided \$8.5 million to implement the ISSP in more schools throughout the province. A total of \$17 million is budgeted over three years (2023-24 to 2025-26) for the expansion. The program was implemented at 16 schools throughout the year and as of March 31, 2024, 18 high-needs schools in communities across Alberta had implemented ISSP. By fall 2024, the remaining phase one schools are expected to be implemented. The second phase of the rollout involves implementing ISSP in 22 additional high needs schools for a total of at least 50 schools by late 2026.

Indigenous Comprehensive School Based Mental Health Program

As part of the Indigenous Children's Mental Health Services Expansion led by CASA Mental Health, the Indigenous Comprehensive School Based Mental Health Program provides Indigenous-informed and culturally integrated school based mental health services in select partner First

Nation and Métis schools. The program is referral-based and available to children and teens. In 2023-24, more than 300 students participated in the program, which was launched in two First Nations schools outside the Edmonton area. In 2024-25, one additional Edmonton area First Nations school is expected to implement the program.

Mental Health Capacity Building (MHCB) in Schools Initiative

Led by Alberta Health Services, the initiative works to promote positive mental health in children, youth and families in the communities where they live. Programs are locally planned, coordinated and implemented; most programming serves rural and remote communities. Supports may include mental health promotion and prevention programming for students, referrals to community service providers for specialized services, presentations, events and campaigns targeted to students, staff, parents and community and building capacity in individuals who work with children, youth and families, such as teachers and support staff. MHCB services are provided to over 650 schools in 249 communities across the province, and nearly 210,000 students have benefited from the MHCB initiative.

Youth mental wellness building

The Heroes Resilience Program (<https://www.impactociety.com/heroes>) is delivered by the Impact Society for Children & Families in Turmoil and partially funded by Mental Health and Addiction. The program is a social-emotional skill building program, delivered primarily through online modules, that provides tools to children and youth at risk of or recovering from mental health and addiction challenges to build inner strengths, resilience and decision-making skills. Programming is trauma informed and provides access to other mental health resources. Facilitators such as

teachers and counsellors are trained by the Impact Society to deliver the program to students in their schools. Facilitators may also deliver the Heroes program to youth community organizations.

In 2023-24, a total of 50 schools in 31 communities delivered the Heroes Program to 9,633 youth through schools and the community. The ministry provided nearly \$500,000 for program operations which directly supported nearly 47 per cent of all participating youth (4,500). Program reports demonstrate students completing the Heroes Program have shown an average resilience increase of 45 per cent and a 55 per cent boost in social-emotional skills.

Evaluating mental health services for children and youth

Mental Health and Addiction is continuing to support important work that will provide insight into the effectiveness of new mental health and behavioural supports and programs for children and youth that are being implemented across Alberta. The Child and Youth Health Services Initiative Evaluation project is examining the cumulative impact of new investments in mental health supports and programs and how they are integrating with existing services available for children and youth. The ministry determines the goals and objectives of the programs and works to ensure they are meeting their objectives and creating value in every dollar spent. The project is being led by researchers from the Mathison Centre for Mental Health Research and Education at the University of Calgary. In 2023-24, Mental Health and Addiction provided \$1 million to support ongoing project work.

The project will use a mix of quantitative and qualitative methods to evaluate the community level impact of four programs in Alberta: CASA mental health classrooms, the ISSP, Kickstand Centres, and 211 Alberta closed loop referrals for families involved in mental health classrooms or ISSP. The evaluation will focus on four areas:

- Improving understanding and providing recommendations on how youth mental health services are provided in a safe and equitable manner that is accessible to community members with different backgrounds and abilities.
- Identifying methods for combining and integrating different types of youth mental health services in an efficient and cost-effective manner that reflects the needs of the local community.
- Maximizing the positive mental health impacts of the four programs.
- Identifying potential improvements for coordinating and integrating youth mental health services in the community.

Overall results of the evaluation will help the ministry understand the community level impact of service expansion and provide evidence to inform decision making and continuously improve supports and services for children and youth.

In 2023-24, the Mathison Centre engaged government and non-government partners and completed core planning activities, including developing project and evaluation plans and selecting eight communities (Grande Prairie, Athabasca, Bonnyville, Fort Saskatchewan, Ponoka, Red Deer, Lethbridge and Medicine Hat) to participate in the evaluation. These communities represent locations throughout the province offering a variety of youth mental health programs for different demographic groups. In 2024-25, the project team expects to finalize recruitment to the evaluation team, begin initial work on a literature review, identify key outcomes for the evaluation and conduct analysis. The final evaluation report is expected to be complete in spring 2025. In addition to the evaluation process, the Mathison Centre will create dissemination materials, such as policy briefs and manuscripts and host events, like symposiums and webinars, to present the findings to relevant communities and organizations, as well as partners and key government institutions.

Investing in youth-focused facilities

Alberta's government is prioritizing the expansion of youth mental health supports to ensure youth across Alberta can access treatment closer to home. In 2023-24, several key projects were initiated

and will continue over the next few years to ensure youth have access to critical mental health supports to improve their well-being.

CASA Houses

Mental Health and Addiction is partnering with CASA Mental Health to expand the CASA House program to three additional communities throughout the province over the next four years. CASA Houses offer referral-based live-in and day programming for youth experiencing mental health challenges. The live-in program is available to youth in grades 7 to 12 with various needs, including severe mental health challenges, addiction issues, complex learning needs, family problems or social issues. Parents and caregivers are active participants in treatment while youth live at a CASA House facility. Treatment includes individual, group and family therapy, social and life skills training and on-site schooling in small classroom settings. The day program is available to youth in grades 8 to 12 with a mental illness diagnosis who are struggling in a conventional classroom setting. Individuals can complete their schooling at a CASA House facility while receiving ongoing support, including group, family and individual therapy. Currently, Alberta's government funds the operation of one CASA House in Sherwood Park.

In 2023-24, the ministry provided \$14 million (\$10 million in capital, \$4 million in operating) to support CASA House expansion projects in Fort McMurray, Calgary and southern Alberta. In 2023-24, CASA completed community consultations in Fort McMurray and Calgary and secured a temporary space in Calgary to begin offering services while new spaces are under construction. Beginning in late fall 2024 or early winter 2025, CASA expects to deliver Trauma Program services out of the temporary spaces. CASA Houses are expected to serve up to 324 youth with complex mental illnesses per year once the three new facilities are fully established and operational.

Youth mental health hubs

Fully integrated youth mental health hubs serve as a single point of access for youth aged 11 to 25, offering a range of recovery-oriented services, including:

- mental health and addiction services;
- primary health care;
- social services;
- peer support; and
- Indigenous wellness services.

In 2023-24, Mental Health and Addiction provided more than \$6.4 million to the Alberta Centre for Excellence in Youth Mental Health (known as Kickstand) to continue to implement and support youth mental health hubs in Alberta. Youth mental health hubs make it easier for youth outside of larger urban centres to seek help and access services closer to home. In addition to physical centres, funding supports Kickstand Connect, which provides free virtual mental health and substance use counselling services, peer support and social services to youth and families throughout the province.

There are youth mental health hubs across Alberta at different stages of readiness for integration, including some led by First Nations. Planning to enhance services has begun in Bonnyville, Fort Saskatchewan and Grande Prairie with fully integrated services expected in spring 2025.

Supporting youth with complex needs

Mental Health and Addiction provides funding for several programs that offer critical supports for youth with complex needs. Collectively, programming ensures children and youth facing mental

health and addiction challenges are well-supported and have the capacity to overcome challenges and improve their mental wellness.

CASA Core

The CASA Core Program is referral-based and provides mental health therapy to children and youth ages three to 17 and their families. The program provides flexible service streams, allowing families access to timely, high-quality mental health care. Families are matched with the appropriate level of service depending on the complexity of mental health challenges. Services are community-based, and therapy incorporates the child's family, school and community network in treatment.

In 2023-24, the ministry provided more than \$5.1 million to CASA Mental Health to deliver seven programs as part of CASA Core:

- **Mental Health Consultation for Head Start and Home Visitation Program:** Provides early intervention support to service providers and families throughout the Edmonton area. Family needs may include cognitive and social-emotional development, health and parenting practices.
- **Collaborative Assessment and Treatment for Children's Health:** A multi-disciplinary, wrap-around infant and preschool assessment and intervention clinic for children who have experienced trauma.
- **Psychoeducational Assessment and Consultation:** Provides consultation, specialized assessment and classroom observations to families and care teams when children and adolescents struggle with learning and mental health.
- **Family Therapy Program:** Supports families to improve parent-child relationships and enhance family functioning. Services are tailored based on the needs of each family, which often include significant mental health challenges, family dysfunction, social or economic challenges, intergenerational trauma or attachment challenges.
- **Adolescent Concurrent Addiction and Mental Program:** Offers comprehensive community-based assessment and treatment to youth who are struggling with both an addiction and a mental health concern. Treatment is individualized according to need, readiness for treatment and treatment goals.
- **Rural residential beds at CASA House:** Provides family-centred tertiary residential care for adolescents. These adolescents have complex needs, which may include severe mental health challenges, addictions, family dysfunction, school issues, peer related issues and social or economic challenges.
- **Community Geographic Team:** Supports rural mental health therapists and care professionals through education, consultation, coaching and mentoring to improve local delivery of mental health services for children and families.

In 2023-24, more than 690 individuals received referrals to CASA Core programming. The suite of programs was accessed by 647 unique clients, 417 of which were new. In 2023-24, CASA Mental Health also completed an expansion of the Family Therapy Program, which involved expanding services from a single site to all three CASA sites in Edmonton. This is expected to improve CASA's reach by 25 per cent, offering 110 more families this service, per year.

Marian & Jim Sinneave Centre for Youth Resilience (The Summit)

The Summit, Calgary's first dedicated centre for child and adolescent mental health, opened in March 2023. The facility provides people under 18 years of age with new and enhanced mental health services that augment and integrate existing services provided by Alberta Health Services and community-based agencies. The Summit is operated by Alberta Health Services and funded by

the ministries of Mental Health and Addiction and Alberta Health. The facility provides mental health services that include no-cost walk-in therapy sessions for children and families, services to manage acute escalating mental health symptoms and mental health day hospital services that provide intensive therapy in a community setting. In 2023-24, Mental Health and Addiction provided \$3 million to Alberta Health Services to operate The Summit. The shift to community-based care is expected to create capacity and better access in acute settings for those who need it. In 2023-24, the facility's services were accessed by 3,576 clients. Of this total, 2,234 were unique clients and 1,342 were return clients. Follow up appointments were provided for services including risk assessments and safety planning; social work; psychiatric consults; and additional family support such as peer support, spiritual care and consultations with a pharmacist or dietician. The average length of stay for clients accessing intensive treatment was 13 days and a total of four per cent of all clients were directed to a hospital due to risk and possible admission. While the number of clients served in 2023-24 was less than The Summit is capable of serving, this was anticipated as it was the first full operating year. This number is expected to increase with greater awareness and facility promotion.

Youth Community Support Program (YCSP)

The YCSP provides an alternative, strength-based service for youth and their caregivers who frequently access tertiary services such as acute mental health settings or formal treatment environments. The goal of the YCSP is to transition youth from acute hospital or residential settings to intensive community-based treatment. The program is meant to fill a gap in the continuum of mental health and addiction services provided to these youths and their caregivers. Care is based on the philosophy that children, youth and families can live positive and fulfilling lives even when impacted by addiction or mental health concerns.

The YCSP is delivered by community agencies in partnership with Alberta Health Services and is funded by Mental Health and Addiction. Services are provided in both Edmonton and Calgary. Youth participate in evidence-based intensive therapeutic treatment including individual and group therapy and psychiatry services through the outpatient program. To reduce barriers for families, YCSP therapeutic services can be delivered to families within their family home, at the youth's school and in other community settings. In 2023-24, the ministry provided nearly \$4.9 million for continued operation of the program. Between April 1, 2023, and September 30, 2023, more than 40 unique clients accessed counselling services provided through the program. Of this total, 22 clients were new. In 2023-24, 10 clients were discharged from the program; discharge occurs when treatment has been completed and youth are ready to step down from the program.

Personalized Community Care (PCC) Program

The PCC Program is a referral-based, specialized and highly integrated treatment program for children and youth delivered in community-based settings that are individualized to the complex mental health, behavioural, emotional, developmental and trauma-impacted care needs of the client. The program operates in Calgary and Edmonton and is available to children and youth up to 18 years of age who are receiving child intervention services under the *Child, Youth and Family Enhancement Act*. The target population for the PCC Program are children and youth who have experienced chronic incidences of trauma, substance misuse, mental health diagnoses and have significant emotional and behavioural challenges with impairments across several areas of development. These children and youth often present as a high risk of harm to themselves and others, are significantly trauma-impacted and have severe and persistent mental health care needs that necessitate significant resources.

The PCC Program is delivered by Alberta Health Services and funded by the ministries of Mental Health and Addiction and Children and Family Services. Two Alberta Health Services-contracted partner agencies provide 24/7 on-site clinical programming, including individual therapy, ongoing

assessment, occupational therapy, psychiatry services, crisis intervention and support. In 2023-24, Mental Health and Addiction contributed \$1.3 million to support program operations. The ministry's contribution contracts clinical supports through Alberta Health Services while Children and Family Services contracts agencies delivering the PCC Program. The ministry also provided additional one-time funding to Children and Family Services to support older youth while they transitioned to appropriate adult services and residential supports in the community.

Child Advocacy Centres

Child Advocacy Centres provide coordinated, multidisciplinary and trauma-informed services to children and youth who have experienced severe physical or sexual abuse or neglect and are going through a legal process. In 2023-24, Mental Health and Addiction provided nearly \$1.1 million to the Ministry of Children and Family Services to support the operation of six Child Advocacy Centres across the province.

3.3 Reduce the number of opioid-related overdoses in the province, with a focus on Indigenous Albertans who are disproportionately affected.

Supporting harm reduction services

Harm reduction services are an important part of the recovery-oriented continuum of care that work to prevent overdoses and save lives. Services aim to provide pathways to additional supports including health care, social services, treatment and recovery.

Provincial Naloxone Program

Naloxone is a drug that can temporarily reverse the effects of an opioid overdose. The Provincial Naloxone Program is delivered by Alberta Health Services in collaboration with municipal and community partners and funded by Mental Health and Addiction. The program aims to reduce harm related to psychoactive substance use by improving access to naloxone kits, developing and updating education and awareness resources, and providing education sessions about naloxone and the continuum of care.

The Provincial Naloxone Program has more than 2,000 registered sites in Alberta communities where people at risk of experiencing or witnessing an opioid overdose can obtain an injectable naloxone kit at no cost. Distribution sites include harm reduction programs, health service providers and more. Training is available wherever kits are provided. In early 2023, the Minister of Mental Health and Addiction signed an order to allow more workers to administer injectable naloxone as part of their workplace duties. This activity was previously restricted by legislation to authorized regulated health professionals and certain types of first responders.

In 2023-24, the ministry provided more than \$17 million to Alberta Health Services to deliver the Provincial Naloxone Program, an increase of \$5.9 million over 2022-23 program spending. Additional funding was provided to support naloxone kit distribution and administration in workplaces, expand the Naloxone Response Box Program and meet increased demand for Community Based Naloxone Program kits. In 2023-24, more than 306,400 naloxone kits were distributed to Albertans through the Community Based Naloxone Program compared to more than 201,400 in 2022-23, which is an increase of approximately 52 per cent. In 2023-24, a total of 33,700 naloxone doses were distributed to registered sites through the Naloxone Response Box Program, compared to 6,900 the year prior, which represents an increase of more than 388 per cent. The significant increase in demand for the Naloxone Response Box Program was due to wider distribution as a result of the Ministerial Order signed in early 2023. The overall increase in demand for naloxone kits and boxes demonstrates improvement in awareness of the services and perceived program value. In 2023-24, there were nearly 17,300 self-reported overdoses reversed

in Alberta compared to more than 17,900 in 2022-23, representing a decrease of around 3.5 per cent. While the number of reported reversals is valuable, it is important to note the statistic is limited and likely underrepresents the true number of reversals because it is self-reported.

In 2023-24, the Injectable Naloxone Training for Workplace Administration e-learning module was launched by Alberta Health Services to provide information on how to respond to a suspected opioid overdose in the workplace. Between April 1, 2023, and September 30, 2023, the module was viewed more than 1,680 times.

Drug Consumption Services

Drug consumption services are an important tool supported by Alberta's government that help save lives, reduce drug use in the community and connect people to health and social services. As part of a recovery-oriented system of care, these sites serve as a pathway to treatment and recovery.

International Overdose Awareness Day is recognized annually on August 31 to draw attention to lives lost from drug overdose and acknowledge the grief of family and friends left behind. On this day, Alberta's government promotes available resources and encourages those struggling with addiction to seek help and support.

Drug consumption services are facilities that offer hygienic spaces where individuals can use illicit drugs in the presence of trained staff who are able to provide timely emergency care in the event of an accidental drug overdose. Service providers can refer clients to a variety of recovery-oriented services such as medical withdrawal management, addiction treatment and recovery services, social services and primary or mental health care services. Alberta's drug consumption service providers also provide basic medical/wound care, harm reduction education and supplies such as naloxone kits, sterile drug use equipment, in addition to testing for infectious diseases such as HIV and Hepatitis C. Use of drug consumption services preserves healthcare capacity in highly

burdened areas such as emergency medical services and emergency departments. In 2023-24, there were no changes to the number, capacity or availability of drug consumption service facilities. Mental Health and Addiction provided nearly \$14.1 million to Alberta Health Services to support the operation of seven drug consumption service facilities in Edmonton, Calgary, Red Deer, Lethbridge and Grande Prairie, which were accessed nearly 148,000 times with an average of almost 1,677 unique individuals using the services per month.

As part of their licensing requirements under the Mental Health Services Protection Regulation, drug consumption service providers publish good neighbour commitments that reflect their promise to understand and respond to concerns raised by community members and specifically set out a commitment to address the issue of discarded drug consumption supplies in the area surrounding the facility. In 2023-24, the ministry provided nearly \$600,000 to six municipalities to support needle debris collection programs, including Calgary, Edmonton, Grande Prairie, Lethbridge, Red Deer and Medicine Hat. The programs are delivered by various community organizations and involve collection and disposal of discarded drug consumption supplies in public spaces and increasing awareness of harm reduction programs.

Calgary Drop-in Centre

The Calgary Drop-in Centre (<https://calgarydropin.ca/>) connects vulnerable individuals 18 years of age and older to addiction supports and services directly within the facility's shelter space. In mid-2023, the drop-in centre completed renovations to create a safe space within the Riverfront Shelter for high needs clients identified at risk for drug overdose or intoxication who require increased monitoring. As of August 2023, the drop-in centre operated at full capacity of 15 medical withdrawal management and 20 pre-treatment beds and is capable of supporting up to 1,000 individuals per year.

The Riverfront Dynamic Program is a suite of short- and long-term addiction programs focused on providing recovery-oriented care to high-risk clients. Through these programs, a mental health and addiction navigator is available to support clients with referrals, crisis intervention and other recovery-oriented services as part of discharge planning.

- **Withdrawal Management Program:** Provides a safe space for clients to withdraw from alcohol, drugs or other substances in a medically supported environment over a five to 10-day period.
- **Recovery Transition Program:** Assists clients preparing for upcoming treatment or housing intake, offering support such as discharge planning, goal setting, addiction counselling, group facilitation and referrals to community resources.
- **Riverfront Dynamic Overdose Response Capacity Program:** Provides 24/7 health care services at the Riverfront Shelter area to increase capacity to respond to drug overdoses and other medical emergencies in the drop-in centre and surrounding community. The program is aimed at increasing client and staff safety, having client-centred recovery conversations and reducing the impact on urgent care services in Calgary.

In 2023-24, the ministry provided \$3.2 million to the Calgary Drop-in Centre to support the Riverfront Dynamic Overdose Response Capacity Program and ongoing operation of the on-site Health Services Clinic. The Withdrawal Management Program and Recovery Transition Programs are funded separately by Mental Health and Addiction through the MDRATE grant. The Health Services Clinic supports individuals with complex needs who face barriers to accessing housing and primary care in the community. In 2023-2024, a total of 2,180 unique individuals accessed the Health Services Clinic, which logged more than 25,900 service events.

On August 23, 2023, the Riverfront Dynamic Overdose Response Capacity Program began operating. Through March 31, 2024, 796 unique individuals were served through the program and almost 2,200 service events took place. During this time, more than 470 drug overdoses were responded to in the Riverfront Shelter area. In 2024-25, this figure is expected to increase as it will be the first complete year the facility will operate at full capacity.

In 2023-24, more than 2,100 drug overdoses were responded to at the Calgary Drop-in Centre. Prior to the response programs being established, Emergency Medical Services (EMS) were called to drug overdose events 100 per cent of the time. With the addition of supports at the Calgary Drop-in Centre, EMS calls for drug overdose events have dropped to around seven per cent. This service change resulted in faster response times and a decreased demand on EMS, which improved their capacity to respond to other medical emergencies.

Addressing opioid use in First Nation communities

Bringing the Spirit Home is a no-cost Indigenous-led program delivered by the Blood Tribe Department of Health Inc. that includes a safe management withdrawal site and a post-detox/pre-treatment program. In 2023-24, Mental Health and Addiction provided nearly \$2.8 million to the Blood Tribe Department of Health Inc. to support the program and help build a continuum of addiction and mental health services in the community.

The safe management withdrawal site provides access to recovery-oriented addiction and mental health services and medical withdrawal management to address the opioid crisis in the community. The program is voluntary and provides trauma-informed care and culturally appropriate services. Clients entering the program receive medically supported withdrawal management, and after 10 to 14 days are connected through a case manager with wrap-around services such as professional counselling, peer support, traditional healing and ongoing medical support. In 2023-24, a total of 385 individuals were admitted to the safe management withdrawal program.

The post-detox/pre-treatment program provides 20 safe spaces for people who have detoxed and are awaiting space in a treatment centre or recovery community. These spaces enable the Blood Tribe Department of Health Inc. to provide supports and programs to help community members avoid relapse and continue their pursuit of recovery. Clients have access to clinical therapists and Elders to begin the journey of healing and can participate in cultural and therapeutic activities geared toward understanding self, learning spiritual teachings and participating in sharing circles. In 2023-24, a total of 134 individuals were admitted into post-detox/pre-treatment beds.

The ministry is also providing support to improve treatment pathways for Indigenous communities, including expanded access to the VODP. Following a successful pilot project with Stoney Health to set up and facilitate timely opioid addiction treatment for community members in the Stoney First Nation, the VODP engaged and developed full partnerships with three additional First Nations: O'Chiese First Nation, Fort Chipewyan First Nation and Goodfish Lake First Nation. The VODP is working with other interested Indigenous communities to determine if similar clinical pathways could be set up in their community, or if there are other ways the VODP can provide support.

3.4 Further develop effective treatment referral pathways and supports for people with mental health and addiction issues within the criminal justice system to facilitate recovery.

Establishing effective treatment and referral pathways

In 2023-24, construction activities undertaken at the Calgary Spyhill APS and Edmonton DMU enabled effective supports for clients presenting in police detainment units with mental health and addiction challenges (see Key Objective 2.1 for construction details). Within these settings, health care practitioners can assist detained individuals who are in withdrawal from opioid use by connecting them to the VODP and facilitating access to opioid agonist treatment as prescribed. In the Edmonton DMU, a navigator and a recovery coach provide additional support and are connected to the Radius Community Health Centre within the Integrated Care Centre. In the Calgary Spyhill APS, an Alberta Health Services provided addiction therapist and mental health therapist work with detainees to complement paramedic supports. Funding for these services is provided by Mental Health and Addiction through the urban strategy grant programs referenced in Key Objective 2.1. In 2023-24, there were 1,955 combined referrals from the Edmonton and Calgary detainee holding units to the VODP and a total of 1,377 prescription starts.

The ministry is continuing to provide support to other communities throughout Alberta to expand access to the VODP in their detainment units. In 2023-24, Lethbridge was provided \$863,000 to expand paramedic hours to enable 24/7 coverage in the police service Short-Term Holding Facility. This expansion covers addiction treatment and support services, including coordinating access to the VODP, facilitating administration of opioid agonist treatment and providing outreach in the community. In both 2022-23 and 2023-24, funding was provided to hire paramedics to work in RCMP detachments in Red Deer (\$824,000) and Grande Prairie (\$420,000). In each city, the RCMP committed an officer to work alongside the paramedic. At least 76 RCMP detachments in Alberta have set up protocols to offer detainees the ability to access the VODP and obtain evidence-based opioid agonist treatment prescribed by VODP addiction medicine physicians.

Expanding outreach services to rural and remote communities

Increasing and improving mental health and addiction supports for rural Albertans is a priority for Alberta's government. To make progress on this priority item, Alberta's government is supporting the implementation of Regional Police and Crisis Teams (RPACT) in areas serviced by the RCMP, which aim to improve access to mental health and addiction services in rural, remote and Indigenous communities in Alberta. Like the urban-based PACT, RPACT pairs a mental health clinician with law enforcement to attend mental health crisis calls. The combination of law

enforcement resources paired with the expertise of a mental health professional ensures an appropriate response is delivered, while also protecting public safety and optimizing health outcomes. Services provided through RPACT include mental health assessments, community service referrals, counselling, case planning and follow-up care through a combination of in-person and phone consultations to serve clients in need more effectively and efficiently.

The RCMP Community Safety and Well Being Branch is responsible for overseeing all RPACT, including providing project oversight, consistent direction and messaging, problem solving and project outcome evaluation support. Alberta Health Services provides additional oversight to enable operational collaboration to meet the unique needs of each community served and ensure consistent service. Mental Health and Addiction provides funding support to enable expansion activities. In 2023-24, the ministry provided \$1.5 million to help increase access to mental health and addiction supports and services in rural and remote Alberta communities. As of March 31, 2024, three RPACT were operational in Grande Prairie Rural, Wainwright and Camrose, and seven were in various stages of development in Hinton, Cold Lake, Coaldale, High Level, Athabasca, Gleichen and Drumheller. In 2024-25, two additional RPACT are expected to begin operating in Parkland County. Once fully operational, the 12 RPACT will serve more than 85 communities throughout the province.

3.5 Enhance innovative virtual services to support recovery regardless of where an individual resides.

Reducing barriers with accessible, affordable counselling services

Counselling Alberta (<https://www.counsellingalberta.com/>) is a division of the Calgary Counselling Centre that provides high-quality, affordable, virtual counselling across the province with no wait list. Virtual care includes counsellor-client interaction through video, audio or chat. This innovative service is working to reduce barriers to accessing counselling services, particularly for those living in rural and remote areas of Alberta where access to traditional counselling services may be limited or unavailable.

Counselling Alberta is also working to expand access to affordable in-person services outside of the Calgary area to help address the growing need for mental health services throughout the province. The expansion targets Albertans affected by social, emotional and psychological problems who need access to care. This includes children and youth, adults and seniors representing all cultures, backgrounds and walks of life residing in urban, suburban and rural and remote areas.

In 2023-24, Counselling Alberta focused on scaling up and building a team of virtual and in-person counsellors to provide expanded services and offer employment opportunities for counsellors residing in more locations across Alberta. In 2023-24, a total of 14 counsellors were added, increasing capacity to provide counselling services throughout the province. With the added capacity, clients from an additional 13 Alberta communities accessed virtual counselling services through Counselling Alberta in 2023-24 compared to 2022-23. In addition, Counselling Alberta worked with key partners to successfully expand virtual and in-person mental health counselling options in Edmonton, Fort McMurray, Grande Prairie, Lethbridge, Medicine Hat and

International Self-Care Day is celebrated annually on July 24 to promote individual mental, physical and spiritual health and wellness, and to encourage people to look after their own health in collaboration with health and social care professionals as needed.

Bell Let's Talk Day is recognized annually in late of January and focuses on reducing stigma around mental health issues by engaging in honest conversations about mental health, sharing helpful resources with others and reflecting on one's own mental well-being.

Red Deer. Partner agencies are responsible for hiring and managing locally recruited counsellors. Counselling Alberta provides clinical oversight for the agencies as well as coordination, intake, outcomes measurement and coaching to assist with transitions. The goal of the expansion is to ensure all Albertans referred or self-identified as needing mental health services and support have access to consistent, high-quality services. Further expansion to other communities across Alberta is planned for 2024-25.

In 2023-24, Mental Health and Addiction provided nearly \$3.7 million to Counselling Alberta to support the continued operation and expansion of virtual and in-person counselling services. Almost 12,300 counselling sessions were offered both virtually and in person to more than 2,150 unique clients in 2023-24, compared to 416 sessions for 197 unique clients in 2022-23. This represents a significant increase in both sessions and clients over the prior year and demonstrates the effectiveness of scale up and expansion activities. Program reporting as of March 31, 2024, indicated 95 per cent of Counselling Alberta clients experienced improvement, recovery or stabilization in their mental health conditions. Work is underway to implement a digital tool that will allow agencies to provide information in a standardized, systematic manner. More than \$6.9 million is budgeted over three years (2023-24 to 2025-26) to expand Counselling Alberta's virtual and in-person services. Overall, the expansion is expected to have a far reaching and sustainable impact on the mental wellness and recovery of Albertans.

Expanding and enhancing no waitlist virtual addiction treatment

The VODP (<https://vodp.ca/>) is provided by Alberta Health Services to help address traditional access barriers and better serve opioid dependent Albertans who require low-barrier, immediate access to care from an addiction expert and evidence-based opioid agonist treatment such as Suboxone and Sublocade. A same-day emergency opioid agonist treatment start service is available to any Albertan using street-sourced opioids to help manage withdrawal symptoms. Approximately 60 per cent of client admissions to the overall VODP fall into this category. The program uses videoconferencing technology to connect a physician-led multi-disciplinary team to any Albertan wanting to access expert treatment and to support recovery for opioid dependence. Assessment and treatment are provided virtually, and when indicated, prescriptions for opioid agonist treatment medications are sent to any qualified pharmacist in the local area. In 2023-24, VODP service was available 12 hours a day, 7 days a week. In 2024-25, the program is being expanded to offer 24/7 service to ensure recovery-oriented addiction supports are readily available to those who need them.

In 2023-24, the ministry provided \$11.2 million to support continued operation and expansion of the VODP. As of March 31, 2024, the VODP has supported clients in 397 communities across the province. In 2023-24, there were 6,595 active clients in the program and 7,105 client discharges. New admissions have increased significantly, from 1,285 in 2019-20, to 7,217 in 2023-24, which corresponds with the expansion of services. In 2023-24, the number of clients referred to the VODP was relatively stable, with a total of 7,938 referrals compared to 7,872 in 2022-23. In 2023-24, there were 1,987 clients who transitioned out of VODP to other treatment and recovery settings compared to 1,863 in 2022-23, representing an increase of more than six per cent. The average number of same-day starts also increased substantially, from an average of 6.6 in the first quarter of 2021-22 to an average of 12.7 in the fourth quarter of 2023-24.

Supporting digital harm reduction

The Digital Overdose Response System (DORS) is a harm reduction app that allows Albertans using opioids or other substances alone to summon emergency response to their location if they become unconscious. The app is confidential and helps provide life-saving intervention. Albertans can download the DORS app free of charge from Google Play or the Apple App Store and follow instructions for registration and set-up. Information collected is limited to what is required to

support an individual in the event assistance is needed, including a phone number, location and any unique access instructions. The app has a built-in timer that provides an alert to check-in at various intervals to ensure safety. A session can be cancelled or extended at any time. Individuals who do not respond to the timer receive a call from the STARS emergency response centre. If STARS is unable to contact an individual or there is reason to believe they may be experiencing an overdose, EMS is dispatched.

In addition to coordinating emergency responses, the DORS app provides information on national and provincial addiction recovery supports and services, such as the Addiction Helpline, ensuring people have the information they need to move forward in their pursuit of recovery.

Addiction-related help line supports

The Addiction Helpline (1-866-332-2322) is a confidential telephone service for Albertans seeking help for addiction concerns. Services are available 24/7.

In 2023-24, Mental Health and Addiction provided \$186,000 to support the continued operation of DORS. As of March 31, 2024, the app had been downloaded almost 8,100 times and there were more than 2,700 registered DORS users, 1,230 of which registered for the service in 2023-24. A total of 1,673 sessions were initiated in 2023-24 compared to 1,421 in 2022-23, which represents an increase of almost 18 per cent. There were 87 emergency response escalations to STARS compared to 58 the year prior and 19 emergency response escalations to EMS compared to 11 the year prior, representing increases of 50 per cent and nearly 73 per cent, respectively. This increase may be attributable to increased awareness of the DORS app due to advertising campaigns, resulting in more people using the app.

Performance Measure 3.a:

Mental health and addiction-related emergency department visits with no interaction with publicly funded mental health and addiction services in the previous two fiscal years (per cent)

Prior Years' Results				2022-23 Target	2022-23 Actual
2018-19	2019-20	2020-21	2021-22		
21.3%	20.7%	20.6%	19.6%	18.3%	19.5%

Source: Ministry of Health

Notes: Results lag by up to 10 months. Only the first visit is counted in a given fiscal year for individuals with multiple emergency department visits. Individuals with invalid or missing PHN's and less than two years of eligibility under the Alberta Health Care Insurance Plan are excluded.

This performance measure was listed as “under development” in the 2023-26 Mental Health and Addiction Business Plan due to the transfer of responsibility for the measure from the Ministry of Health to Mental Health and Addiction when it became a stand-alone ministry in October 2022. Over the course of 2023-24, following consultation with the Recovery Expert Advisory Panel and a review of available data, the measure was fully developed. The title of this measure has been revised from what was presented in the ministry's 2023-26 business plan to precisely identify the in-scope services. Results have been recalculated using a revised methodology; details are available on pages 58-59.

Description: This performance measure describes the proportion of mental health or addiction-related emergency department visits in a fiscal year with no interaction with publicly funded mental health and addiction services (such as visits to physician office or emergency department, hospitalizations and prescription drug dispensations for mental health or addiction issues) in the previous two fiscal years.

Rationale: A decreasing score over time suggests improvement, indicating that individuals’ needs are being addressed in the community, reducing reliance on the emergency department for mental health and addiction related services.

Results and variance explanation: In 2022-23, the result for this measure was 19.5 per cent, which is 1.2 percentage points above the 2022-23 target of 18.3 per cent and only 0.1 percentage points below the 2021-22 result of 19.6 per cent. Results from the previous fiscal years demonstrate a gradual decreasing pattern of around one percentage point annually.

The difference between the 2022-23 target and the actual result could reflect variation over time. However, insufficient workforce support and capacity at the community level, along with barriers affecting treatment and referral pathways from police services to mental health and addiction care, could contribute to an increasing number of Albertans seeking emergency department care for their mental health and addiction-related concerns.

The results for this measure from 2018-19 to 2021-22 have underscored the actual need for mental health and addiction service use. Overall health care use decreased during the COVID-19 pandemic, with a considerable decrease in physician visits and hospitalizations among individuals with mental health and addiction issues. Wildfires and other emergency events also impacted mental health and addiction needs, leading to an increase in emergency department visits for such conditions. Additionally, there are rural and remote areas in Alberta where mental health and addiction services are not readily available in the community, leading residents in these areas to rely on the emergency department for their mental health and addiction concerns.

**Performance Indicator 3.b:
Change in recovery capital scores of Albertans accessing publicly funded treatment (per cent)**

Recovery Capital Tool	Prior Years’ Results				
	2019-20	2020-21	2021-22	2022-23	2023-24
Recovery Capital Index (RCI)	N/A	N/A	N/A	N/A	43%
Assessment of Recovery Capital (ARC)	N/A	N/A	N/A	N/A	43%

Source: MRP System

Notes: The MRP system rollout began in July 2022, and as such, there are no historical full fiscal year results to report prior to 2023-24. Results reported for 2022-23 in the 2024-27 Mental Health and Addiction Business Plan included data from July 2022 to December 2023. The result has been recalculated to align with fiscal year presentation.

This indicator was listed as “under development” in the 2023-26 Mental Health and Addiction Business Plan and was presented as a performance measure with different verbiage: Recovery Capital Index (RCI) scores of Albertans accessing [publicly-funded] addiction or mental health treatment and participating in the MRP platform. Revisions have been made to remove reference to mental health treatment as this was included in error. The MRP platform is currently available in select publicly funded residential addiction treatment and medical withdrawal management facilities. In addition, presentation as an indicator more accurately reflects the ministry’s level of control over the results.

Description: This indicator reports on the percent change in individual recovery capital scores from admission to discharge or most recent assessment of Albertans receiving addiction treatment services in publicly funded facilities where the MRP platform has been implemented. The RCI and Assessment of Recovery Capital (ARC) scores are calculated using items from the Recovery Capital (REC-CAP) questionnaire, which is facilitated by a health care professional. The REC-CAP questionnaire includes 120 questions on areas such as substance use, housing, legal issues, social supports and service needs, which touch all domains of recovery capital. The ARC scale is a subset of 50 items from the REC-CAP questionnaire representing social and personal recovery capital.

Rationale: Increases in recovery capital are associated with positive recovery outcomes for individuals experiencing addiction issues. Recovery from addiction is among the most important, ultimate goals of treatment for providers, family, clients and society. Improvements in this indicator are intended to reflect improvements in quality and person-centredness of addiction programs and services.

Results and variance explanation: As 2023-24 is the first full fiscal year of available data, there are no historical results for comparison. As of March 31, 2024, MRP had been implemented in 23 medical withdrawal management and residential addiction treatment and recovery sites in Alberta. In 2023-24, 696 clients had eligible records, meaning at least two recorded assessments. For those individuals, the mean percentage change in RCI from admission to discharge or most recent assessment was 43 per cent. This is an indication of improvement of recovery capital with treatment.

The ministry will continue to work with Alberta Health Services to identify opportunities to improve the recovery capital questionnaire or develop a shorter assessment tool for use in low-barrier services (e.g., with clients accessing withdrawal management services). In addition, future funding agreements may include opportunities for collaboration that could improve this indicator.

Performance Measure and Indicator Methodology

Performance Indicator 1.a:

Albertans receiving care at an appropriate level (under development)

This indicator remained under development in 2023-24. Data for the preliminary results is extracted from the following sources:

- Consolidated Addiction and Mental Health Database, Alberta Health Services; and
- Discharge Abstract Data Alberta Hospital Discharge Abstract Database (DAD), Alberta Health.

Data updates may occur in the administrative sources referenced for the preliminary results; as such, results are subject to change.

Performance Indicator 2.a:

Recovery Capital scores of Albertan communities (under development)

This indicator remained under development in 2023-24.

Performance Measure 3.a:

Mental health and addiction-related emergency department visits with no interaction with publicly funded mental health and addiction services in the previous two fiscal years (per cent) (under development)

Methodology

The information needed to generate this performance measure is hosted (including cleaning and maintenance) in the Business Intelligence Environment in the Ministry of Health. The Strategic Information, Research and Evaluation Unit in the Ministry of Mental Health and Addiction accesses, extracts and analyzes the needed data to produce the results for this measure. All data extractions and analyses are done using the Statistical Analysis Software data analytics tool. The result for this measure is generated by following these steps:

- Datasets are derived by processing and merging the physician claims data, emergency department visit data, hospitalization data, Pharmaceutical Information Network data for mental health or addiction-related prescription drug dispensation and population registry data for each fiscal year. This process allows for identification of the unique patients who have “used” and “not used” any publicly funded mental health and addiction services.
 - The numerator for the respective fiscal year is determined by the number of individuals presenting in the emergency department for mental health or addiction-related concerns who have not used any mental health and addiction-related services in the last two years.
 - The denominator is derived by summing the numbers of individuals presenting in the emergency department for mental health or addiction-related concerns who have “used” and “not used” the mental health and addiction related services in last two years.
-

- The result is obtained using the following formula:

$$\text{Percentage} = \frac{\text{Number of individuals presenting to an emergency department for addiction or mental health concerns who did not use publicly funded mental health and addiction services in the past two years of the reference year}}{\text{Number of individuals presenting to an emergency department for addiction and mental health concerns in a given fiscal year}} \times 100$$

This performance metric was presented as a performance indicator in the Ministry of Health's 2022-25 Business Plan. When responsibility for this measure was transferred to the Ministry of Mental Health and Addiction, updates were made to the title, definition, methodology and reporting structure, allowing for reprofiling as a performance measure in the Mental Health and Addiction 2023-24 Annual Report.

The revised definition considers both mental health and addiction related service use in the previous two years, whereas the Ministry of Health only accounted for mental health related service use. Additionally, the revised methodology includes all age groups, in contrast to the earlier methodology which included only those aged 10 years and older. For a comprehensive understanding of the mental health and addiction landscape in the province, the revised methodology incorporates mental health or addiction related drug dispensation data from the Pharmaceutical Information Network database for the previous two years prior to the emergency department visit date.

In future annual reports, this performance measure will be reported under Outcome 1 outlined in the Ministry of Mental Health and Addiction's 2024-27 Business Plan, which focuses on ensuring a comprehensive, integrated, and responsive recovery-oriented addiction and mental health system.

Source

Alberta Health Business Intelligence Environment: National Ambulatory Care Reporting System; Discharge Abstract Database; Practitioners Claim Database under Alberta Health Care Insurance Plan; Pharmaceutical Information Network; Population Registry Files; and Alberta Health Postal Code Translator File.

Performance Measure 3.b:

Change in recovery capital scores of Albertans accessing publicly funded treatment (per cent) (under development)

Methodology

The raw data needed to generate this performance indicator is provided to Alberta Health Services weekly from Last Door Recovery Society – the vendor supplying the MRP system. The data is hosted in an Alberta Health Services data warehouse and Alberta Health Services conducts the required analysis for this indicator.

MRP records are initiated for consenting clients at the time of admission into a publicly funded facility that has implemented MRP. Data is entered into the REC-CAP tool via clinical interview by health care professionals in residential addiction treatment facilities, recovery communities and medical withdrawal management settings. Some self-entry by clients is also available. The REC-CAP questionnaire includes 120 questions on areas such as substance use, housing, legal issues, social

supports and service needs, which touch all domains of recovery capital (see page 10 for a complete listing of the domains). This assessment includes both positive recovery capital items that support recovery and negative recovery capital items that do not support recovery. The ARC scale is a subset of 50 items from the broader REC-CAP questionnaire representing social and personal recovery capital.

All records for clients with at least two assessments are included:

- first assessment – usually upon admission; and
- most recent assessment – usually upon discharge.

ARC scale values are summed for each record and the average is taken across records. Box plots are produced for distributions of scores for each assessment to ensure they are suitable for the intended analyses. Means for each assessment are produced and mean per cent change is calculated along with paired t-tests and 95 per cent confidence intervals for statistical significance.

The ARC numerator is determined by subtracting the mean score for the first assessment (MT1) from the mean score for the most recent assessment (MT2) for the 50 items included in the scale. The ARC denominator is the mean score for the first assessment (MT1). The mean percentage change is calculated using the following formula, where M is the mean, T1 is the first assessment, and T2 is the most recent assessment:

$$\text{Percentage Change} = \frac{MT2 - MT1}{MT1} \times 100$$

Values for the remaining items from the REC-CAP questionnaire are combined with the ARC items to produce the RCI. The numerator is determined by subtracting the overall RCI score for first assessment (MT1+100) from the overall RCI score for the most recent assessment (MT2+100). The RCI denominator is the overall RCI score for the first assessment (MT1+100). The scales are normalized, and the percentage change is calculated using the following formula, where M is the mean, T1 is the first assessment, and T2 is the most recent assessment:

$$\text{Percentage Change} = \frac{(MT2 + 100) - (MT1 + 100)}{MT1} \times 100$$

Data from medical withdrawal management settings are excluded. Clients are often unwell and in distress and unable to complete the assessment at intake. In addition, stays in medical withdrawal management settings are often brief with not enough time to significantly impact recovery capital.

Source

Last Door Recovery Society, My Recovery Plan system database

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Ministry Financial Highlights

Statement of Revenues and Expenses (unaudited)

Year ended March 31, 2024

(In thousands)

	2024		2023	Change from	
	Budget	Actual	Actual	Budget	2023 Actual
Revenues					
Government Transfers					
Government of Canada	\$ 1,050	\$ 41,800	\$ 7,118	\$ 40,750	\$ 34,682
Refunds of Expense	-	3,936	4,603	3,936	(667)
Ministry Total	1,050	45,736	11,721	44,686	34,015
Inter-Ministry Consolidation Adjustments	-	(2,610)	(1,820)	(2,610)	(790)
Adjusted Ministry Total	1,050	43,126	9,901	42,076	33,225
Expenses - Directly Incurred					
Ministry Support Services	4,382	6,434	2,061	2,052	4,373
Addiction and Mental Health	270,623	302,094	194,534	31,471	107,560
Ministry Total	275,005	308,528	196,595	33,523	111,933
Inter-Ministry Consolidation Adjustments	(108,551)	(132,054)	(98,641)	(23,503)	(33,413)
Adjusted Ministry Total	166,454	176,474	97,954	10,020	78,520
Adjusted Annual Deficit	\$ (165,404)	\$ (133,348)	\$ (88,053)	\$ 32,056	\$ (45,295)

Revenue and Expense Highlights

Revenues

Actual revenue for the year was \$45.7 million, which was \$44.7 million higher than the budget and an increase of \$34 million over prior year.

The \$44.7 million increase from budget is attributable to the new Canada Health Transfer agreement signed in December 2023 and the return of unused grant funding from grant recipients.

- \$40.8 million is attributable to the Canada Health Transfer agreement signed in December 2023.
- \$3.9 million is due to unused restricted grant funding returned from grant recipients.

The \$34 million increase from the prior year is primarily due to the \$40.8 million funding provided through the new Canada Health Transfer agreement signed in December 2023, partially offset by the final year funding for the Emergency Treatment Fund in 2022-23.

Expenses

Actual operating expenses for the year were \$308.5 million, which was \$33.5 million higher than budget and an increase of \$111.9 million from prior year.

The \$33.5 million increase from budget is primarily attributed to the \$40.8 million spending related to the Canada Health Transfer agreement, partially offset by \$7.3 million in lower spending primarily in the Treatment and Recovery Program.

The \$111.9 million increase from prior year is primarily due to:

- \$40.8 million increase in eligible grants related to the new Canada Health Transfer agreement.
- \$66.4 million increase in operating grant expenditures in the areas of Treatment and Recovery, Early Intervention, Children and Youth and Initiatives that Reduce Harm:
 - \$36.9 million in Treatment and Recovery mainly related to increase in medical detoxification residential treatment, Narcotics Transition Services, recovery community operations and Virtual Opioid Dependency Program.
 - \$14 million in Early Intervention mostly related to increased funding for urban addiction response initiatives, grant funding to Alberta Health Services for Regional Police and Crisis Team expansion and 211 Alberta navigation services.
 - \$10 million in Children and Youth for CASA House expansion operations, Alberta Health Services Calgary Centre for addiction and mental health operations and Integrated Community Youth Services.
 - \$5.5 million in initiatives that Reduce Harm for the Provincial Naloxone Program, Supervised Drug Consumption Services operations and dynamic overdose response teams.
- \$4.4 million increase to support the additional positions approved for the ministry, as well as costs associated with shared services provided by Alberta Health in relation to financial administration, FOIP and information management.

Expenses – Directly Incurred Detailed by Object (unaudited)

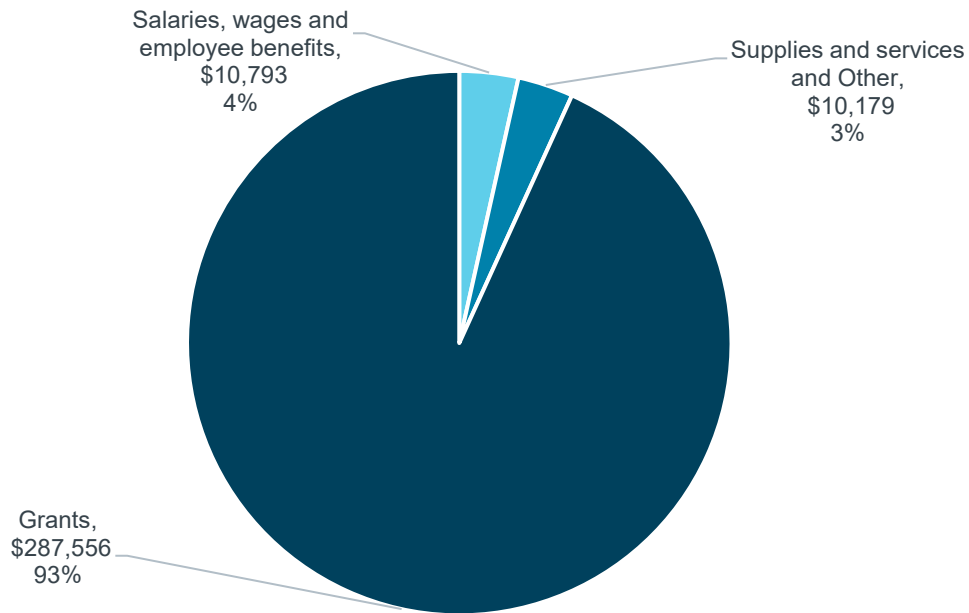
Year ended March 31, 2024

(In thousands)

Expense by object	2024		2023
	Budget	Actual	Actual
	<i>In thousands</i>		
Salaries, wages, and employee benefits	\$ 10,004	\$ 10,793	\$ 6,739
Grants	256,371	287,556	181,375
Supplies and services and Other ⁽¹⁾	8,630	10,179	8,481
Total ministry expenses	\$ 275,005	\$ 308,528	\$ 196,595

⁽¹⁾ Includes financial transactions and other expenses of \$80 in 2023-24 (\$371 in 2022-23).

2024 Actual (unaudited)



Grants comprise the largest category of expense, at 93 per cent of total expenses. In 2023-24, the ministry provided \$287.6 million in grants to support organizations and communities through various grant programs, including:

- \$141.3 million for Treatment and Recovery related services.
- \$79.6 million for children and youth related services.
- \$36.2 million in Initiatives that Reduce Harm.
- \$30.5 million for Prevention and Early Intervention related services.

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Lapse/Encumbrance (unaudited)

Year ended March 31, 2024

(In thousands)

Expense Vote by Program	Voted Estimate ⁽¹⁾	Supplementary Estimate ⁽²⁾	Adjustments ⁽³⁾	Voted Estimate	Voted Actuals ⁽⁴⁾	Expended/ (Unexpended)
Operating Expense						
1 Ministry Support Services						
1.1 Minister's Office	\$ 657	\$ -	\$ -	\$ 657	\$ 786	\$ 129
1.2 Deputy Minister's Office	879	-	-	879	757	(122)
1.3 Corporate Services	2,846	-	-	2,846	4,891	2,045
	<u>4,382</u>	<u>-</u>	<u>-</u>	<u>4,382</u>	<u>6,434</u>	<u>2,052</u>
2 Addiction and Mental Health						
2.1 Program Support	10,774	-	-	10,774	10,527	(247)
2.2 Compliance and Monitoring	1,287	-	-	1,287	1,359	72
2.3 Mental Health Review Panel	2,191	-	-	2,191	1,950	(241)
2.4 Prevention	722	-	-	722	1,095	373
2.5 Early Intervention	29,325	-	-	29,325	29,362	37
2.6 Treatment and Recovery	132,128	3,300	-	135,428	125,664	(9,764)
2.7 Initiatives that Reduce Harm	30,434	-	-	30,434	35,904	5,470
2.8 Children and Youth	45,762	24,500	-	70,262	69,624	(638)
	<u>252,623</u>	<u>27,800</u>	<u>-</u>	<u>280,423</u>	<u>275,485</u>	<u>(4,938)</u>
Capital Grants						
2 Addiction and Mental Health						
2.6 Treatment and Recovery	8,000	18,100	-	26,100	15,714	(10,386)
2.7 Initiatives that Reduce Harm	-	-	-	-	254	254
2.8 Children and Youth	10,000	-	-	10,000	10,000	-
	<u>18,000</u>	<u>18,100</u>	<u>-</u>	<u>36,100</u>	<u>25,968</u>	<u>(10,132)</u>
Capital Investment Vote by Program						
1 Ministry Support Services						
1.3 Corporate Services	25	-	-	25	-	(25)
2 Addiction and Mental Health						
2.6 Treatment and Recovery	-	3,000	-	3,000	-	(3,000)
	<u>25</u>	<u>3,000</u>	<u>-</u>	<u>3,025</u>	<u>-</u>	<u>(3,025)</u>
Contingency Vote by Program						
2 Addiction and Mental Health						
2.6 Treatment and Recovery	-	-	17,515	17,515	-	(17,515)
	<u>-</u>	<u>-</u>	<u>17,515</u>	<u>17,515</u>	<u>-</u>	<u>(17,515)</u>
Total	<u>\$ 275,030</u>	<u>\$ 48,900</u>	<u>\$ 17,515</u>	<u>\$ 341,445</u>	<u>\$ 307,887</u>	<u>\$ (33,558)</u>
Lapse/(Encumbrance)						<u>\$ (33,558)</u>

(1) As per "Expense Vote by Program" and "Capital Investment Vote by Program" page 159 of the 2023-24 Government Estimates.

(2) Per the Supplementary Supply Estimates approved on March 21, 2024.

(3) Adjustments include supply vote transfers for "Contingency" as approved by the Lieutenant Governor in Council under the direction of the Minister of Finance. The Contingency supply vote consists of a provisional funding authority transferable to any ministry. Upon approval by the Lieutenant Governor in Council, the President of Treasury Board and Minister of Finance may either spend or transfer all or a portion of this supply vote to another Minister for public emergencies, disasters, or unanticipated costs.

(4) Actuals exclude non-voted amounts as no cash disbursement is required (non-cash amounts), or because the Legislative Assembly has already provided the funding authority pursuant to a statute other than an appropriation act. Non-cash amounts (such as amortization, accretion, valuation adjustments and other provisions) are excluded as these amounts do not require any expenditure or payment of public money. Year-end expense accruals & payables which will immediately require a cash outlay (payment of public money) to settle or otherwise extinguish the liabilities are included in Actuals.

Deferred Contributions

Year ended March 31, 2024

(in thousands)

	2024	2023
Unspent deferred contributions		
Deferred operating contributions ⁽¹⁾	\$ 30,650	\$ -

⁽¹⁾ Deferred operating contributions

	2024	2023
	Government of Canada	Government of Canada
Balance at beginning of year	\$ -	\$ -
Cash contributions received/receivable during year	72,450	7,118
Less: amounts recognized as revenue	(41,800)	(7,118)
Balance at end of year	\$ 30,650	\$ -

⁽¹⁾ includes funding provided through the Canada Health Transfer agreement signed in December 2023.

Subsequent Event (unaudited)

Year Ended March 31, 2024

In November 2023, the Government of Alberta announced the refocusing of health care with the creation of four new provincial health agencies responsible for the oversight and delivery of health care services in the province, including the new mental health and addiction provincial health agency, Recovery Alberta.

Recovery Alberta will be a reporting entity of the Ministry responsible for the delivery of mental health and addiction services currently delivered by Alberta Health Services. While timelines are dependent on legislative amendments yet to be passed, the ministry aims to establish the corporate structure of Recovery Alberta in the summer of 2024. Following the establishment of the corporate structure and executive team, staff and services would begin operation under the banner of Recovery Alberta.

In addition, Alberta's government is establishing the Canadian Centre of Recovery Excellence (CoRE) to inform best practices in mental health and addiction, conduct research and program evaluation and support the development of evidence-based policies for mental health and addiction. CoRE will be a reporting entity of the Ministry, established as a Crown corporation through legislation to be introduced in spring 2024. It is anticipated CoRE will be operational by summer 2024.

Both entities will be consolidated into the ministry financial statements starting with the 2024-25 fiscal year.

Annual Report Extracts and Other Statutory Reports

Public Interest Disclosure (Whistleblower Protection) Act

Section 32 of the Public Interest Disclosure (Whistleblower Protection) Act reads:

32(1) Every chief officer must prepare a report annually on all disclosures that have been made to the designated officer of the department, public entity or office of the Legislature for which the chief officer is responsible.

(2) The report under subsection (1) must include the following information:

(a) the number of disclosures received by the designated officer, the number of disclosures acted on and the number of disclosures not acted on by the designated officer;

(b) the number of investigations commenced by the designated officer as a result of disclosures;

(c) in the case of an investigation that results in a finding of wrongdoing, a description of the wrongdoing and any recommendations made or corrective measures taken in relation to the wrongdoing or the reasons why no corrective measure was taken.

(3) The report under subsection (1) must be included in the annual report of the department, public entity or office of the Legislature if the annual report is made publicly available.

There were no disclosures of wrongdoing filed with my office for your department between April 1, 2023 and March 31, 2024.