NavMAP Standards

Contents

Executive Summary

Youth mental health and/or addictions (MHA) navigation programs are emerging across Canada and are an important way to help youth with MHA concerns and their families overcome barriers to care and ensure continuity of care when accessing and transitioning through care. Currently, navigation program practices and models vary. This document serves as a synthesis of existing evidence and practices into standards that can help guide program practices and promote consistency. An extensive review of evidence (including published academic papers and web sources) and interviews with several youth MHA navigation programs across Canada were conducted to develop these standards. The following document discusses why and how these standards were developed, how they can be used, and describes the standards. These standards are voluntary and are intended to be seen as key considerations; they are not requirements and it is not expected that every youth MHA navigation program will need to or be able to implement every standard. Each navigation program is unique and their utilization of these standards will depend on the scope of the service, local context, capacity, and other qualities of the navigation program.

Summary of Standards

1. <u>Navigation Team composition and credentials</u>
   Navigation program includes a multidisciplinary team with relevant credentials and offers program staff with onboarding training and opportunities to engage in community trainings.
2. <u>System Resource Options</u>
   Navigation program helps clients navigate the MHA system and/or any system needed. Navigation program maintains a database and/or file system with specific and relevant information about services in the community.
3. <u>Outcomes</u>
   Navigation program gathers feedback from clients, community members, and service providers to determine the impact and effectiveness of the program. Feedback results are used to inform changes within the program.
4. <u>Lived Experience and Outreach</u>
   Navigation program values lived experience by actively promoting youth and family-centeredness, offering peer support, implementing and engaging with advisory councils, and spreading awareness about MHA and the system in general.
5. <u>Needs of Target Population</u>
   Navigation program understands its local context and addresses individual and systemic needs, barriers, and gaps.
6. <u>Service Delivery</u>
   Navigation program determines and communicates service hours, catchment area, eligibility criteria, method of referral, caseload, duration of support, modality of support, consent process, privacy and confidentiality process, elements of the navigation process, types of support provided as a complement to navigation, and waitlists.
7. <u>Categories of Access</u>
   Navigation program enhances access to the program for current and potential clients by using different strategies and improves access to the MHA system by addressing barriers to care.

8. <u>Sustainability</u>
   Navigation program makes efforts to secure and sustain funding for the program.
9. <u>EDI & Health Equity</u>
   Navigation program adopts and regularly reviews policies and practices that meaningfully promote equity, diversity, inclusion, and accessibility among program staff and youth/families.
10. <u>Community Collaboration</u>
    Navigation program identifies, builds, and maintains relationships with community services and service providers.

Glossary

Accessibility: the practice of making information, activities, and/or environments usable and meaningful for everyone.

Caseload: number of individuals supported by a service provider in a particular period.

Catchment area: a geographical area served by a service/organization.

Client(s): the individual(s) (i.e., youth and/or family member(s)) served by the navigation program.

Confidentiality: the principle of keeping secure and secret from others, information given by or about an individual in the course of a professional relationship, and it is the right of every patient, even after death.

Cost/benefit: the relation between the cost and benefits of an undertaking.

Consent: when an individual provides permission or agreement.

Crisis: a time of intense difficulty, trouble, or danger. Crisis is self-defined and experienced differently by different individuals.

Community: a group of people sharing common characteristics.

Community services: programs designed and delivered to aid individuals, groups, or communities.

Diversity, Equity, and Inclusion: principles, policies, and practices designed to promote the representation and participation of diverse individuals (e.g., racial, ethnic, socioeconomic, and cultural backgrounds, physical and/or developmental disabilities, etc.) to ensure equitable access to opportunities for individuals who may otherwise be excluded.

Family: Biological or non-biological immediate or extended family, friends, or others of importance to the youth, who have a role in the youth's care.

Family-centered: the act of engaging and supporting families based on the belief that families can help meet a client's needs.

Person-centered: a strategy that views clients as equal partners in planning, developing, and monitoring care. Decisions are guided by the client's needs, goals, and values.

Group support: a group of individuals meeting and receiving service.

Hiring practices: strategies used to recruit, select, and hire new employees.

Indigenous peoples: According to the Canadian government, Indigenous peoples are the original inhabitants of North America. In Canada, this includes three groups: First Nations, Inuit, and Métis. These peoples are unique in their cultures, histories, languages, and spiritual beliefs, and practices.

Lived experience: knowledge and expertise based on first-hand experiences of individuals.

LGTBQ2S+: a term that encompasses multiple gender identities and sexual orientations (e.g., Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Two-Spirit).

Navigator: navigation program staff focused on supporting clients in navigating and finding appropriate services.

Navigation program staff: individuals employed by the navigation program.

Navigation: the process of helping clients and their caregivers find, access, and transition through mental health care services and resources. Navigation services help clients overcome barriers to care, provide person-centered support, and support integrated care.

Outcome: the result or effect of service.

Outreach: efforts made to spread awareness and provide information.

Peer support: People with lived experiences offering support to others, which can include emotional and social support, guidance, information, etc.

Privacy: protecting an individual or a groups' information.

Referral: directing a client to a service.

Retention: the act of keeping navigation program staff.

Self-referral: the act of referring oneself to a service.

Service providers: individuals with professional designations and/or lived experience, offering mental health and/or addictions services to youth and/or families.

Standards: considerations intended to ensure quality navigation services. Standards are generally accepted norms that can set expectations and accountabilities.

Warm transfer: process intended to help clients feel supported through transitions. Can involve one service provider conveying information to another service provider, making introductions, attending initial meetings with the new provider alongside the client, etc.

Acronyms

MHA – mental health and/or addictions

PHI - private health information

Introduction

Fewer than 20% of children and youth with mental health and/or addictions (MHA) concerns in Canada receive appropriate MHA treatment. Most adults trace the emergence of MHA concerns back to their youth. Early intervention is needed to reduce burden and ensure optimal wellbeing. However, youth with MHA concerns and their families encounter numerous barriers and unclear pathways when accessing and transitioning through youth MHA services. This can lead to interruptions in care and prevent youth and families from engaging in care. A coordinated solution is needed to help youth with MHA concerns and their families access and transition through the MHA system.

Navigation services are one way of enhancing service access and continuity. Navigation was developed as a clinical service to help patients address barriers to care. Navigation programs are emerging across Canada to support patients in finding their way through complex care systems, and overcoming barriers to care. Presently, youth MHA navigation programs across Canada vary in their models, practices, and approaches. These standards will promote consistency and set expectations among youth MHA navigation programs and guide policies and practices within current and future youth MHA navigation programs, thereby enhancing available support for youth with MHA concerns and their families. The scope of these standards include navigation programs located in Canada and serving youth with MHA concerns and/or their families. These standards can be used by youth and families, to inform their understanding and expectations of navigation services; navigation program staff, to inform their practices; and decision makers, to inform development, implementation, and delivery of new and existing youth MHA navigation services.

Methodology

A realist review and synthesis methodology was used, which helps identify what works, why, how, for whom, and under what circumstances. The project was conducted over different phases, which included:

1. Defining the scope

   The project team helped determine the nature and content of navigation interventions. A national community consultation was held to further refine the scope of the standards. As a result, the guiding review question, a search strategy, and a data extraction template were developed.

2. Searching for evidence

   With the support of a librarian, academic and grey literature were reviewed. Youth MHA navigation programs across Canada were identified and interviewed.

3. Appraising studies and extracting data

   A quality assessment rubric was utilized to ascertain the quality of available literature. Data from literature sources and interviews was extracted.

4. Synthesizing evidence and developing conclusions

   A thematic and descriptive analysis was conducted of the information extracted. After synthesizing this information, the NavMAP standards were generated.

5. External consultation and disseminating findings

   The standards were made available for stakeholder consultation and public comment. A national community consultation was held to gather feedback, which was used to revise the standards. A second draft was posted online for public comment. The finalized document will be posted following final revision.

How to Use the Standards

These standards are intended to ensure quality navigation services. Implementation of these standards will differ based on various factors, such as the scope of the navigation program, local needs and barriers, organizational policies and practices, etc. Navigation programs must take these factors into account when implementing these standards. Given that youth MHA navigation practices vary and these programs are emerging across Canada, adhering to standards can promote consistency, guide current and future navigation programs, inform policies and procedures, improve quality, and help sustain and scale navigation programs. Navigation programs can identify the ways in which the standards apply to the program and associated strengths, weaknesses, and opportunities. They can connect with other youth MHA navigation programs and/or navigation programs in other areas of healthcare, to mutually learn about and share their practices. Programs can also monitor, review, and revise processes to continually enhance their services. Navigation programs can consider going beyond these standards to enhance the quality of the program as well.

Standards

Navigation Team composition and credentials

Navigation program includes a multidisciplinary team with relevant credentials and offers program staff with onboarding training and opportunities to engage in community trainings.

1. *Team composition*
   - 1.1 Navigation program includes various professionals (e.g., navigators, intake workers, peer supporters, managers, and other service providers).
2. *Navigator credentials*
   - 2.1 Navigators have a minimum of a post-secondary education in a relevant discipline (e.g., Social Worker, Social Service Workers, Registered Nurse, Occupational Therapists, etc.).
   - 2.2 Navigators offering peer support have lived experience of navigating the MHA system, with or without post-secondary education.
3. *Front-line staff training*
   - 3.1 Navigation program staff receive onboarding training and in-house trainings tailored to the local context to help them get acclimated to the new organization and role. Onboarding training can include trainings about privacy, confidentiality, databases, and health and safety policies along with shadowing other navigators and/or colleagues.
   - 3.2 Navigation program staff attend trainings in the community that contribute to their ongoing professional development (e.g., therapeutic modalities, crisis intervention, EDI, etc.).
   - 3.3 If the navigation program is newly developed, navigators utilize their educational background, professional experiences, and/or personal experiences to develop the role and support clients. Navigators learn from and consult with staff at other navigation programs.
   - 3.4 Navigation program staff familiarize themselves with services in the community and the MHA system (e.g. by networking with key service providers, learning about the client's support system, learning about how community services operate, etc.).

System Resource Options

Navigation program helps clients navigate the MHA system and/or any system needed. Navigation program maintains a database and/or file system with specific and relevant information about services in the community.

1. *Systems navigated*
   - 1.1 Navigators support clients in navigating the MHA system and/or related systems (i.e., education system, justice system, developmental services, etc.) based on the clients' needs and goals.
2. *Service database/file system*
   - 2.1 Navigation program staff utilize secure databases or other digital solutions and/or analogue file sharing (e.g., storing notes in binders or spreadsheets, collecting program pamphlets methods to identify, etc.) to collect, and track service information in their catchment area and share this information with colleagues.
3. *Service information monitored*
   - 3.1 Navigation program staff gather and monitor specific information about services (e.g., program contact information, hours, criteria, wait times, referral process, fees, population served, website information, etc.) within their catchment area and convey relevant information to clients.

Outcomes

Navigation program gathers feedback from clients, community members, and service providers to determine the impact and effectiveness of the program. Feedback results are used to inform changes within the program.

1. *Evaluation conducted –*
   1.1 Navigation program elicits feedback using <u>formal methods</u> (e.g., survey and interviews) and/or <u>informal methods</u> (e.g., check-ins during sessions and feedback through regular correspondence, emails or text messages).
   1.2 Navigation program seeks feedback from clients and offers incentives for their feedback.
2. *Client satisfaction/experience –*
   2.1 Navigation program elicits feedback from clients about the program overall (including whether they will recommend the service and if they are satisfied with the program overall) and the navigation process (including satisfaction with the method of referral and modes of communication).
   2.2 Navigation program explores clients' experiences with the navigators and other members (e.g., the intake coordinator, research staff, etc.) in the program.
   2.3 Navigation program elicits feedback about specific navigator skills, such as timeliness, youth-friendliness, communication, education provided, timely access to care, and the navigators' ability to respect their identities (culture/ethnicity, gender identity, sexual orientation, etc.).
3. *Staff satisfaction/experience –*
   3.1 Navigation program obtains feedback from navigation program staff to learn about their experience and satisfaction with their roles.
4. *Reduce crisis –*
   4.1 Navigation program determines if connection with the navigation program impacts frequency of contacts or admissions to the hospital, the Emergency Department, crisis services, distress lines, and/or similar services.
5. *Continuity of care –*
   5.1 Navigation program strives to identify barriers and facilitators to continuity of care.
   5.2 Navigation program explores clients' experiences during and after the navigation process, regarding their perceptions of the ongoing involvement of navigators.
6. *Appropriate match to service –*
   6.1 Navigation program tracks referrals made for clients (e.g., types of referrals made and whether or not clients connected with resources provided).
   6.2 Navigation program follows up with clients to determine if suggested resources met their needs and goals.
   6.3 Navigation program determines if clients were satisfied with the navigator's suggestions, knowledge, and expertise about MHA resources.
7. *Improved mental health –*
   7.1 Navigation program has a process established to regularly review and track changes in clients' MHA symptoms and/or, preferably using valid and reliable scales.
8. *Cost/benefit –*
   8.1 Navigation program conducts a cost/benefit analysis to determine the feasibility, effectiveness, and utility of the service.

9.   *Other outcomes observed* –
   9.1   Navigation program tracks and measures additional outcomes, including the following –
      9.1.1   Health outcomes
      9.1.2   Self-care
      9.1.3   Negative and/or unintended outcomes
      9.1.4   Timeliness of service
      9.1.5   Need for navigation/supplemental services
      9.1.6   Increased knowledge and skills
      9.1.7   Referral sources
      9.1.8   Number of clients served and demographics
      9.1.9   Reduced isolation
      9.1.10   Reduced wait times
   9.2   Navigation program elicits input from community services and service providers about their experience interacting with the navigation program.
10.   *Evaluation reported* –
   10.1   Navigation program reports evaluation results within the organization (e.g., navigation program staff, leadership team, Board of Directors, advisory committees, youth, and families).
   10.2   Navigation program reports evaluation results externally (e.g., presenting results at conferences, publishing results as an academic article, reporting results on social media platforms or the website, and sharing information with community services and service providers). Navigation program reports this information to local, provincial, and federal government, and funding bodies, to justify the need to invest in youth MHA navigation services.

Lived Experience and Outreach

Navigation program values lived experience by actively promoting youth and family-centeredness, offering peer support, implementing and engaging with advisory councils, and spreading awareness about MHA and the system in general.

1.   *Youth-centeredness* –
   1.1   <u>Role of navigation program</u> –
      1.1.1   Based on the mandate/criteria of the program, efforts are made to center and empower youth, even when involving families, to acknowledge and accommodate for the unique differences between youth and families.
      1.1.2   Navigation program is offered in a youth-friendly environment (physical space) or manner (virtual programs).
      1.1.3   Navigation program offers youth additional support and opportunities for engagement (e.g., youth-centered events, peer support for youth, and developing youth advisory committees).
      1.1.4   Navigation program includes youth friendly staff and offers youth-centered training to navigation program staff.
      1.1.5   Navigation program engages youth in research and program evaluation efforts.
      1.1.6   Navigation program is developed and evolved in collaboration with youth.

1.2   <u>Role of navigators</u> –
- 1.2.1   Navigators assess and understand youth needs and perspectives.
- 1.2.2   Navigators adopt a person-centered approach and meet youth where they are.
- 1.2.3   Navigators offer specific options tailored to the youth's needs and goals.
- 1.2.4   Navigators provide education, build relationships, and empower youth.
- 1.2.5   Navigators understand and address stressors in the local contexts of clients (e.g., academic, rural, or urban settings).
- 1.2.6   Navigators collaborate with and support service providers to help youth.
- 1.2.7   With consent, navigators include families to support youth.
- 1.2.8   Navigators engage in youth-centered trainings and research.

2.   *Family-centeredness* –

2.1   <u>Role of navigation program</u> –
- 2.1.1   Navigation program offers additional support and opportunities (e.g., family-centered events, peer support for family, and developing family advisory committees).
- 2.1.2   Navigation program offers family-centered training to navigation program staff.
- 2.1.3   Navigation program engages family in research and program evaluation efforts.
- 2.1.4   Navigation program includes family friendly staff.
- 2.1.5   Navigation program is developed in collaboration with families.

2.2   <u>Role of navigators</u> –
- 2.2.1   Navigators assess and understand family's needs, dynamics, and perspectives.
- 2.2.2   Navigators adopt a person-centered approach and meet families where they are.
- 2.2.3   Navigators offer specific options tailored to the family's needs and goals.
- 2.2.4   Navigators provide education, build relationships, and empower families.
- 2.2.5   Navigators understand and address stressors in the local contexts of clients (e.g., academic, rural, or urban settings).
- 2.2.6   Navigators collaborate with service providers to bridge differences in perspectives between clients.
- 2.2.7   With consent, navigators include families to support youth.
- 2.2.8   Navigators engage in family-centered trainings and research.

3.   *Peer Support* –

3.1   <u>Role of navigation program</u> –
- 3.1.1   Navigation program offers peer support to address client's needs.
- 3.1.2   Navigation program trains and supervises peer support staff.
- 3.1.3   Navigation program involves and obtains input from peer support staff.

3.2   <u>Role of peer support</u> –
- 3.2.1   Peer support staff offer one-on-one and/or group support.
- 3.2.2   Peer support staff remain connected as long as needed.
- 3.2.3   Peer support staff utilize the knowledge from lived experience and provide education.
- 3.2.4   Peer support staff advocate for clients with regards to addressing barriers in the system, accessing services, etc.
- 3.2.5   Peer support staff support the system navigation process and/or offer system navigation. Peer support staff are offered system navigation training.

4.   Advisory Councils
    4.1   Navigation program develops or consults with different types of advisory councils. For example, Client Advisory councils, MH Advisory councils, and Elders councils.
    4.2   Navigation program staff inform advisory councils about needs, barriers, and trends.
    4.3   <u>Role of advisory councils</u> –
        4.3.1   Advisory councils inform program design, strategy, initiatives, research and evaluation efforts, training initiatives, and outreach efforts.
        4.3.2   Advisory councils offer feedback to navigation program staff.

5.   *Awareness and education*
    5.1   Navigation program conducts outreach about MHA and the system to share information, promote clients' wellbeing, and build relationships with youth.
    5.2   Navigation program spreads awareness about the MHA system, community resources, and wellbeing through networking, education, newsletters, social media platforms, and/or courses.
    5.3   Navigation program provides education on diverse MHA-related topics (e.g., self-care, available MHA resources, connecting with MHA resources, and navigating the MHA system).
    5.4   Navigation program tailors outreach efforts to specific groups (e.g., youth, families, community services, and service providers) based on their needs and goals.

Needs of Target Population

Navigation program understands its local context and addresses individual and systemic needs, barriers, and gaps.

1.   *Gathering client information and assessing needs -*
    1.1   Navigators collect information when initially connecting with clients and throughout the navigation process.
    1.2   Navigators conduct a comprehensive assessment. Navigators collect the following information from clients, which can vary based on client needs –
        1.2.1   Consent
        1.2.2   Eligibility criteria
        1.2.3   Demographics
        1.2.4   History
        1.2.5   Presenting concerns
        1.2.6   Goals and needs
        1.2.7   Mental health and/or addictions concerns
        1.2.8   Current supports
        1.2.9   Family functioning/situation
        1.2.10   Determinants of health
        1.2.11   Risk screening

2.   *Local needs/barriers/gaps –*
    2.1   Navigation program staff assess for and address the following needs, barriers, and gaps –
        2.1.1   <u>Individual barriers,</u> including:
            2.1.1.1 Settlement barriers
            2.1.1.2 Increasing MHA needs/challenges

        2.1.1.3 Challenges with education/vocation

        2.1.1.4 Challenges in the home

        2.1.1.5 Language/literacy barriers

        2.1.1.6 Lack of finances

        2.1.1.7 Lack of access to transportation

        2.1.1.8 Lack of access to technology

        2.1.1.9 Insufficient knowledge about MHA navigation

        2.1.1.10 Stigma

    2.1.2   <u>Systemic barriers,</u> including:

        2.1.2.1 Geographic barriers

        2.1.2.2 Lack of access to physician care

        2.1.2.3 Lack of MHA-specific services and supports

        2.1.2.4 Lack of consistency in care

        2.1.2.5 Lengthy waitlists

        2.1.2.6 Lack of housing

        2.1.2.7 Difficulties accessing MHA services

        2.1.2.8 Difficulties accessing and understanding MHA/MHA system (e.g., services hours conflicting with work/school, unclear information, etc.)**.**

        2.1.2.9 Challenges with engaging youth/families (e.g., obtaining consent, lack of time/resources, etc.)

        2.1.2.10 Lack of funding

Service Delivery

Navigation program determines and communicates service hours, catchment area, eligibility criteria, method of referral, caseload, duration of support, modality of support, consent process, privacy and confidentiality process, elements of the navigation process, types of support provided as a complement to navigation, and waitlists.

1. *Service hours*
   1.1 Navigation program staff maintains service hours based on the needs of their clients (e.g., regular business hours on weekdays and/or provide service in the evenings, on weekends, and/or 24/7 to allow clients to reach out after work or school).
2. *Catchment Area*
   2.1 Navigation program clearly identifies catchment area, and supports clients within a specific jurisdiction (e.g., town, region, province, etc.)
   2.2 Navigation program staff provide brief, limited, or partial navigation support to clients outside the catchment area.
3. *Eligibility criteria*
   3.1 Navigation program determines and communicates age requirements, diagnosis requirements, types of clients, and other eligibility criteria, if any.
   3.2 Navigation program limits or excludes eligibility criteria to minimize barriers to accessing the program.
4. *Method of referral*
   4.1 Navigation program accepts self-referrals and/or referrals from service providers.

4.2   Navigation program accepts referrals through program referral forms and/or via phone calls, emails, and appointment booking systems.

4.3   Navigation program makes and accepts referrals to and from other navigation program based on mutually-defined catchment area.

5. *Caseload*

    5.1   Navigation program staff maintain a manageable caseload, determined by the mandate of the program, and by guidance from program administration.

6. *Duration of support*

    6.1   Navigation program staff support clients for a defined period of time and/or as long as needed, depending on the mandate of the program and/or the needs and goals of the clients.

7. *Modality of support*

    7.1   Navigation program staff offer to connect with client's in-person and/or virtually.

8. *Communication*

    8.1   Navigation program staff use different methods to communicate with clients and/or providers in clients' circle of care, depending on their needs. Different communication methods may include phone, email, texting, video conferencing platforms, in-person at the office, in-person at the client's home, and/or in-person in the community.

9. *Frameworks used*

    9.1   Navigators use different frameworks to guide, support, and build rapport with clients (e.g., trauma-informed approaches, strengths-based approaches, and/or anti-oppressive approaches).

10. *Waitlist*

    10.1   Navigation program maintains a waitlist if navigators are unable to accommodate additional clients, or the navigation program does not maintain a waitlist and implements initiatives to avoid exceeding appropriate caseloads.

    10.2   Navigation program staff offer alternative resources, preferably ones without a waitlist, to clients on the program's waitlist.

    10.3   Navigation program has a triage process and/or waitlist management strategy based on the needs of the clients.

11. *Support provided*

    11.1   Navigation program provide additional support (e.g., peer support, group support, and/or workshops to build skills, learn, communicate, etc.) while clients are supported by the navigators.

12. *Consent*

    12.1   Navigation program staff connect with the client to obtain consent, inform and review the consent process, and discuss age of consent and family involvement, especially if a family member reaches out on behalf of a youth.

    12.2   Navigators enable clients to provide consent in different ways (e.g., verbal consent, written consent, using consent forms, and/or obtaining consent through referral forms).

    12.3   Navigators obtain consent in accordance with the organizations and/or regulatory bodies' consent policies and procedures. Navigators can obtain consent to –

        12.3.1   Initiate and continue the navigation service

        12.3.2   Communicate via email, text, and/or other virtual formats

        12.3.3   Make referrals, provide, and/or obtain information to community services/service providers on behalf of clients

        12.3.4   Advocate for clients

        12.3.5   Involve minors as clients

13.   *Privacy and Confidentiality*

    13.1   Navigation program staff adhere to organizational and/or regulatory body privacy and confidentiality policies and procedures.

    13.2   Navigation program staff share the following information with clients –

        13.2.1   navigation process

        13.2.2   limits of confidentiality

        13.2.3   the process of sharing, collecting, and using information

        13.2.4   how to obtain copies of personal health information that resides with the navigation program

        13.2.5   cancellation/revoking consent process

        13.2.6   what information is needed and why

    13.3   Navigators create plans to manage risk of an inadvertent privacy breach and ensure client privacy/confidentiality.

    13.4   Navigation program staff store, access, and discuss information according to policy and on a need-to-know basis.

    13.5   Consent materials contain clear information about privacy and confidentiality.

14.   *Elements of Navigation Process*

    14.1   <u>Intake and assessments</u> –

        14.1.1   Navigation program staff contact clients as quickly as possible.

        14.1.2   Navigation program staff conduct comprehensive and relevant assessments, including risk assessments, in a timely and person-centered manner.

    14.2   <u>Collecting and providing information about resources</u> –

        14.2.1   Navigators consult with navigation program staff, online resources, and community service providers to obtain information on available services for clients.

        14.2.2   Navigators identify resource options that meet the needs of clients and present these options in a thoughtful way, cognizant of the needs, limitations, and strengths of the client and family.

        14.2.3   Navigators offer clients alternative options if they need to wait to connect with their preferred resource option. Emergency services also offered to clients if needed.

    14.3   <u>Supporting clients</u> –

        14.3.1   Navigators create plans, educate, empower, advocate, offer strategies, and collaborate with clients throughout the navigation process.

        14.3.2   Navigators help clients navigate and connect to services (e.g., attending services with clients; completing referral forms; conducting warm transfers).

        14.3.3   Navigators help address additional needs related to social determinants of health (e.g., financial needs, social and community needs, food insecurity, and geographical limitations).

    14.4   <u>Completing navigation</u> -

        14.4.1   Navigators remain flexible and provide follow-up support (e.g., after connection to a service, after navigation process is complete, if clients are waiting to receive

referred service, etc.). Follow-up support may include asking clients about the service being received and/or encouraging client to reconnect.

14.4.2 Navigators determine the appropriateness of the match and offer alternative suggestions and connections to services if needed.

14.4.3 Navigators offer clients opportunities to participate in navigation program research, evaluation, and/or quality improvement initiatives.

Categories of Access

Navigation program enhances access to the program for current and potential clients by using different strategies and improves access to the MHA system by addressing barriers to care.

1. *Outreach into the Target Population –*
   1.1 Navigation program uses diverse outreach methods (e.g., conducting presentations, distributing posters/brochures, word of mouth, newsletters, social media promotion, and workshops) to inform youth and families about the program.
   1.2 Navigation program adopts a person-centered approach and conducts outreach in settings where youth and families are natural present, (e.g., community services and events, schools, youth hubs, and conferences).
   1.3 Navigation program provides contact information (e.g., email and phone number) to address questions about the program.
2. *Access to Navigation Services*
   2.1 Navigation program identifies the different and/or common ways clients learn about and access the program.
3. *Access Issues Addressed in the Mental Health system*
   3.1 Navigators address barriers to access by utilizing individualized and person-centered approaches, comprehensive assessments, referrals, warm hand offs, psychoeducation, advocacy, liaising, and follow ups.
   3.2 Navigation program consults with equity-deserving communities to understand their needs and addresses these needs by implementing equitable, diverse, inclusive, and accessible policies and practices.
   3.3 Navigation program addresses social determinants of health through different strategies (e.g., partnering with community services and advocating on behalf of or with clients for additional funding, affordable housing, and accessible services, etc.).
   3.4 Navigation program offer clients with opportunities to voice their opinions and obtain support from individuals with lived experience by offering supplemental services (e.g., peer support and opportunities to be part of advisory councils).
   3.5 Navigation program is co-designed with youth, families, and community services, to address barriers (e.g., need for services/service providers, social determinants of health, lengthy waitlists, and the lack of sufficient resources and information) hindering access to and through the mental health system.
4. *Technology*
   4.1 Navigation program utilizes appropriate technology tools and resources to improve access to the program (e.g., online resources, chat/text option, and virtual clinics).

Sustainability

Navigation program makes efforts to secure and sustain funding for the program.

1. *Funding source* –
    1.1 Navigation programs may draw on various public (e.g., federal government, provincial government, etc.) and private (e.g., philanthropic) funding sources
2. *Program Sustainability* –
    2.1 Navigation program conducts research and/or program evaluation to learn, monitor, and report on these activities.
    2.2 Navigation program engages in efforts to secure funds to sustain or scale the program.
    2.3 Navigation program conducts outreach and builds and maintains relationships with community services.
    2.4 Navigation program improves quality and sustains the service by continuously implementing additional initiatives(e.g., providing information to support research projects, implementing evidence-based best practices, staff development/retention efforts, refining navigation program model/theory, etc.).

EDI & Health Equity

Navigation program adopts and regularly reviews policies and practices that meaningfully promote equity, diversity, inclusion, and accessibility among program staff and youth/families.

1. *Focus on equity-deserving groups*
    1.1 Navigation program aims to support equity-deserving groups through its services and engage with these groups for co-design and strategic planning.
2. *Languages offered* –
    2.1 Navigators offer services in diverse languages to engage clients, directly through staff who are fluent or indirectly via access to translators and interpreters.
3. *Diversity/inclusion efforts* –
    3.1 <u>Role of navigation program</u> –
        3.1.1 Navigation program's hiring policies and practices complement EDI efforts.
        3.1.2 Leadership and committees within the navigation program support EDI efforts.
        3.1.3 Navigation program provides EDI trainings and assessments (e.g., knowledge, skills, competency, and sensitivity) to program staff. Online resources and experts can help adopt and implement EDI principles.
    3.2 <u>Role of navigator</u> –
        3.2.1 Navigators implement a person-centered approach and are respectful and non-judgmental to clients.
        3.2.2 Navigators understand and accommodate for clients' EDI needs.
        3.2.3 Navigators support and engage with diverse youth, families, and service providers.
        3.2.4 Navigators offer inclusive options for resources and services (e.g., resources that are sensitive of language needs, cultural needs, etc.).
4. *Accessibility* –
    4.1 <u>Role of navigation program</u> –
        4.1.1 Navigation program uses different modalities (e.g., virtual and in-person methods) to communicate with clients.

4.1.2   Navigation program offers support to address additional accessibility needs, (e.g., lack of finances, transportation issues, overnight accommodations, etc.)

4.1.3   Navigation program maintains little or no waitlist.

4.1.4   Navigation program offers service free of cost.

4.1.5   Navigation program is hosted in an accessible environment or provided in an accessible manner (e.g., virtual programs), conducive to the accessibility needs of clients.

4.1.6   Navigation program allows referrals from youth, families, and service providers.

4.1.7   Navigation program adopts technology to offer accessible services.

4.1.8   Navigation program maintains flexible hours to accommodate for clients that are working or attending school.

4.2   Role of navigators

4.2.1   Navigators understand and accommodate for accessibility needs (e.g., physical, visual, hearing needs, etc.)

4.2.2   Navigators refer clients to services that accommodate for different accessibility needs.

Community Collaboration

Navigation program identifies, builds, and maintains relationships with community services and service providers.

1.   *Information-gathering about service options –*
    1.1   Navigation program staff learn from clients and conduct online research to learn about services to best match client needs.
    1.2   Navigation program staff share their knowledge about community resources with the navigation program staff on an ongoing basis.
    1.3   Navigation program staff visit or host community services to learn about these services and their processes for clients.
    1.4   Navigation program staff network and consult with community services.

2.   *Relationships with other providers –*
    2.1   Navigators meet with community services and advocate for clients' needs.
    2.2   Navigation program partners with community service providers to sustain relationships.
    2.3   Navigators attend and present at different community events (e.g., conferences, cultural events, etc.).

3.   *Referral mechanisms –*
    3.1   Navigators collaborate with community service providers and conduct warm transfers when making referrals.
    3.2   Navigators work collaboratively with clients to make referrals to services. Navigators make referrals to services on the clients' behalf, with their consent and/or navigators provide clients with information about the referral process to enable them to complete self-referrals.

4.   *Service outreach –*
    4.1   Navigators network and present information about the navigation program to community services using different methods (e.g., presentations, social media promotion, newsletters, attending community events, meet and greet committees).

Conclusion

Thank you for taking the time to review these standards. These standards were developed to deepen the understanding of youth MHA navigation programs across Canada. These standards can assist new and existing youth MHA navigation programs in understanding how they offer quality services and most optimally serve their clients. These standards can help current and future navigation programs make evidence-based decisions regarding program considerations, approaches to navigation supports, and supporting youth and families throughout their experiences with the MHA system.

It is important to note that the role of navigation is ever-changing and dynamic. Several factors will affect the way these standards are used and eventual outcomes. Navigation programs are encouraged to consider their own local contextual factors when implementing these standards, continually review the implementation process, and revise policies and practices accordingly. Navigation programs should engage their own stakeholders (e.g., youth, families, program staff, funders, decision makers, etc.) extensively in these processes. Navigation programs are also encouraged to communicate processes and outcomes with the navigation community locally and nationally to further deepen our collective understanding of this innovative model of care.

Individuals and programs are also encouraged to provide feedback on the standards by contacting Roula Markoulakis (nominated principal investigator) at roula.markoulakis@sunnybrook.ca.

Acknowledgements