# Template: Mental Health, Substance Use, Peer Support, Primary Care and Social Services Environmental Scan

Please identify existing health and social services currently offered in your community and consider whether there is an opportunity for them to operate out of a Foundry centre or deliver existing services in an integrated manner. This document will be used to support building out the Integrated Stepped Care Model (ISCM) within your community. Please note the following:

* This is a working document – the focus is on the current state at first;
* As much as possible, consider including contacts who are responsible for supporting the direct day-to-day operations (team leaders, coordinators, supervisors);
* Use this as an opportunity to connect with services, understand if there are any changes coming up that need to be considered (workflows, criteria, etc.) and briefly discuss the vision of Foundry in the community;
* The last column is typically completed as a second step, although ideas and considerations often come up during the initial phase;
* The Foundry Central Office Manager, Service Implementation and Integration (MSII) will be available to support and assist where needed;
* Following the completion of the first round of discussions, bring this document to a discussion with the MSII to identify the following:
  + What are the strengths in each service stream?
  + Are there any identified gaps?
  + What are the opportunities, such as supporting walk-in services, on-site direct service provision and transition between services?
* Based on this information, begin to develop a plan and continue discussions with key contacts to articulate what the future state will look like; and
* Information pulled from this should be part of a community mapping exercise with a larger group and will be used to support service composition, service pathways and ISCM allocation.

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|  | **List the youth/young adult services that are offered in your community and who delivers these services** | **Primary contact (Name, Role, Phone and Email)** | **Briefly describe the service that is provided.**  **Describe model or approach for the service (outreach, appointment-based, school-based)** | **Age group served** | **Describe existing intake process for service (walk-in, referral-based, etc.)** | **Is there an opportunity to deliver existing services at the Foundry centre?**  **Is there an opportunity to support new services on-site (walk-in counseling, groups, etc.)?**  **Is there an opportunity to support transition between services?** |
| *MENTAL HEALTH* |  |  |  |  |  |  |
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| *SUBSTANCE USE SERVICES* |  |  |  |  |  |  |
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| *PEER SUPPORT (youth and family)* |  |  |  |  |  |  |
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| *PHYSICAL HEALTH (e.g., sexual health and more)* |  |  |  |  |  |  |
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| *SOCIAL SERVICES (e.g., employment, cultural services)* |  |  |  |  |  |  |
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