Overview of Foundry's Service Model

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Introduction

The Foundry service model is based on promising practices and research evidence, principles of culturally responsive and equitable care, and learnings from Foundry centres in operation. In order to realize the Foundry vision and mission, the process of becoming a Foundry centre involves the intentional development, implementation and continuous quality improvement of a unique service mode — an Integrated Youth Services (IYS) model. IYS refers to a wide a variety of services that work together to treat a young person wholistically, whatever their needs may be.

Foundry is removing barriers and increasing access to quality care by bringing together and intentionally integrating a variety of health and social services through meaningful partnerships in order to connect services, make navigation easier and support youth to live a good life.

A young person may come to Foundry for a single, discrete counselling session and then not come back for months, or they may access various services during an episode of care, needing support throughout a period of greater need. Regardless of the pattern of service access, Foundry aspires to provide care in a wholistic and integrated way within our service framework, from the moment young people and their families/caregivers access our services to when they are connected with a service provider best suited to meet their needs at that moment. This seamless experience requires careful planning, attention to detail and a commitment to not just co-locate services, but to integrate them with intention.

"Collaboration and integration can be transformative..."

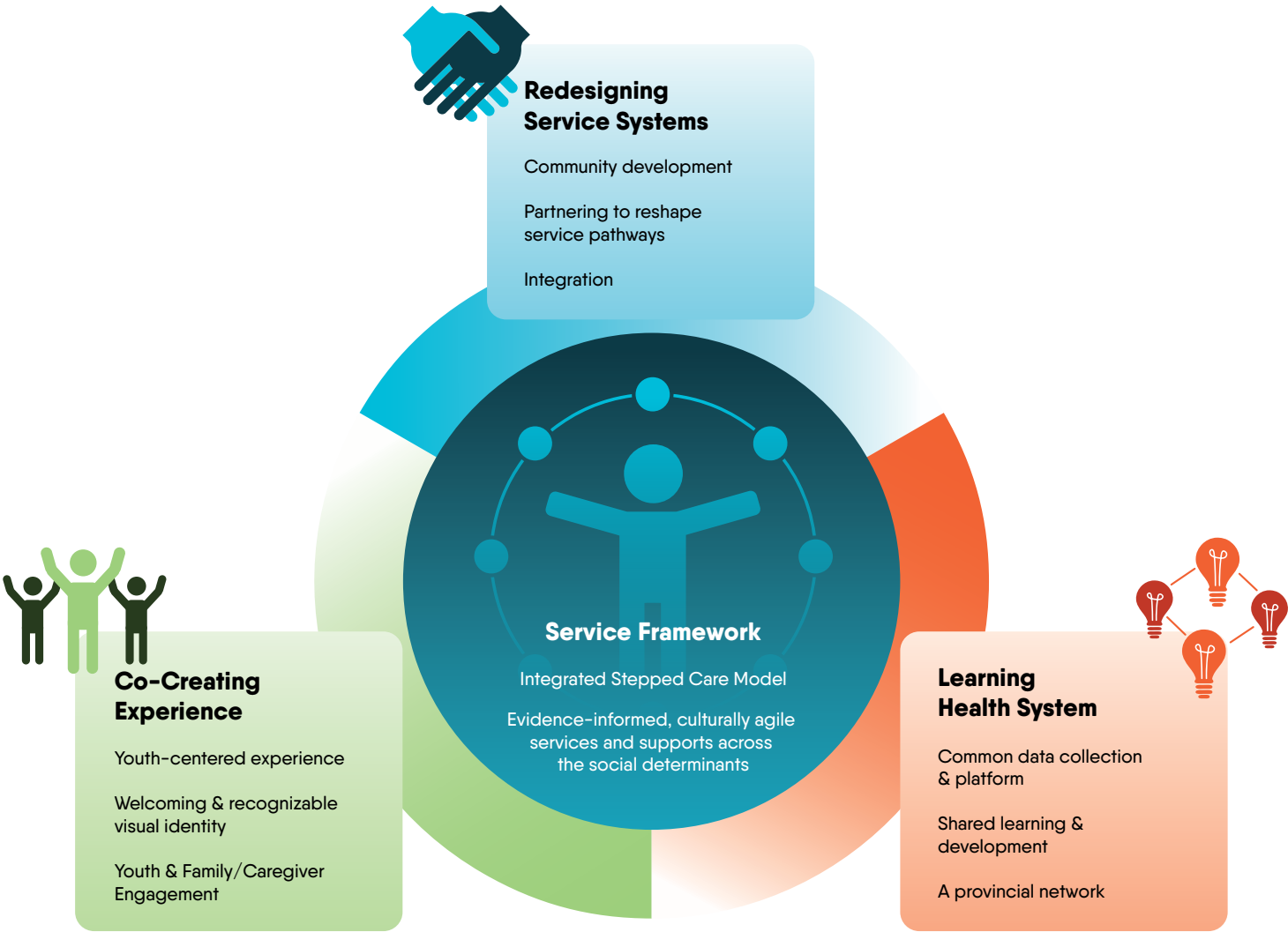-Foundry centre staff, Developmental Evaluation

Integrated Youth Services

IYS models are an innovative way to provide comprehensive, person-centred and coordinated care for young people.

At the centre of Foundry's IYS model is a wholistic service framework that structures the care offered in centres. The focus of this Service Model Guide is implementing this service framework, shown in Figure 1, by providing evidence-informed, culturally agile services and supports across the social determinants of health.

As shown in Figure 1, the key aspects of Foundry's IYS model include redesigning service systems, co-creating experience and building a provincial Learning Health System (LHS).

FIGURE 1: FOUNDRY'S INTEGRATED YOUTH SERVICES MODEL

Redesigning Service Systems

Community development

Partnering to reshape service pathways

Integration

Service Framework

Integrated Stepped Care Model

Evidence-informed, culturally agile services and supports across the social determinants

Co-Creating Experience

Youth-centered experience

Welcoming & recognizable visual identity

Youth & Family/Caregiver Engagement

Learning Health System

Common data collection & platform

Shared learning & development

A provincial network

Redesigning Service Systems

Rather than developing new services and resources in a community, in IYS existing non-profit and publicly administered services are redesigned through an asset-based, community development approach. While partners do collaboratively identify gaps in community resourcing, the approach fundamentally reshapes and integrates existing services to make them more welcoming, easier to navigate and ultimately more accessible.

Co-Creating Experience

At the heart of IYS is a commitment to ongoing engagement with youth and families/caregivers. Creating accessible and transformative services starts with building strong and trusting relationships with those who have lived experience. To truly understand youth's needs and meet them where they are, we must listen and learn from them and their families/caregivers. We involve them in shaping the services we deliver, the decisions we make and the priorities we set. Bringing young people into shared decision making in these areas also supports the broader goal of empowering them as care-seekers in their health journeys.

It is important to remember that young people's needs are always changing, so we need to ensure that we have processes and structures in place for ongoing, meaningful and reciprocal engagement. As service providers, we get used to doing things the way that makes sense for ourselves and our organizations. Working with youth and families/caregivers helps push us away from what is comfortable to what is truly needed.

Learning Health System

As Foundry's provincial network of centres has grown and evolved, we have recognized the opportunity to develop a Learning Health System (LHS). An LHS is a continuous improvement cycle where data and knowledge are mobilized into practice. By using a common data collection platform, shared clinical screening and assessment tools, and the power of communities of practice, we have the data and insights to support quality improvement. This shared learning and development leads to better support and outcomes for youth, families/caregivers and communities.

Foundry's work includes ensuring we create culturally safe and respectful environments for equity-denied groups including IBPOC (Indigenous, Black and People of Colour) communities.

We recognize our role and responsibility as a white settler organization in calling out and dismantling colonialism and racism in the work we do.

Our journey includes committing to the implementation of the United Nations Declaration of the Rights of Indigenous Peoples (UNDRIP), the Truth and Reconciliation (TRC) Calls to Action, the Calls for Justice of the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG) and the recommendations of the report "In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in BC Health Care."

Defining and Achieving Integration

When we say "integration", what we mean is that our role as leaders is to take a close look at systemic internal processes and consider whether these are conducive to creating a seamless experience for young people and their families/caregivers. Integration is about removing systemic barriers and facilitating access to care for young people. One of the means of achieving this is to offer services that are flexible and responsive to the presenting need. Integrating existing health and social services in the community is critical to ensuring the sustainability of Foundry's service model.

To better understand the work involved to achieve integration of services, Foundry has adopted a framework known as the "Fulop Typology,"[1] which categorizes integration into six domains and outlines key elements to effective integration (see Figure 2 below). Findings from our 2018 developmental evaluation (see "Tools and Resources" on page 14) support this approach and illustrate the complexity involved in establishing and sustaining systemic change through integration.

FIGURE 2: FULOP MODEL OF INTEGRATION
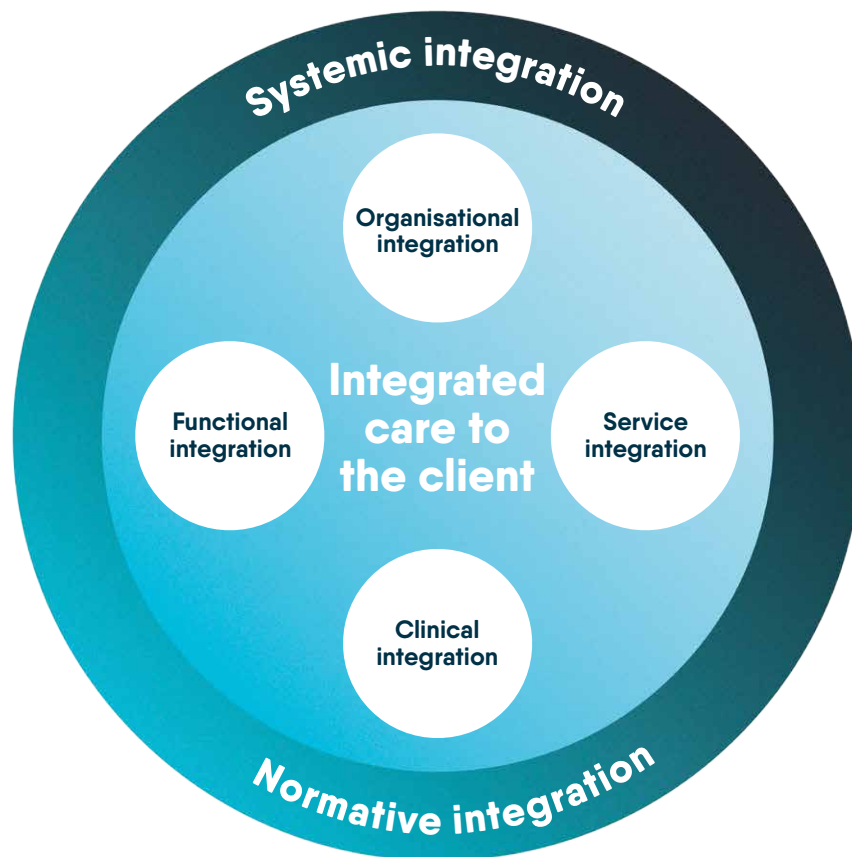
Key findings from Foundry's developmental evaluation

During Foundry's proof of concept phase (2015-18), a developmental evaluation was conducted by the Centre for Health Evaluation and Outcomes Sciences (CHÉOS). A developmental evaluation is an evaluative approach that supports dynamic, complex and innovative interventions and allows for real-time decision making and course correction.

Key findings from the evaluation include the following:

- Health and social services partners collaboratively delivering integrated youth services is key to improving access to care and transforming communities.
- The "one-stop-shop" concept doesn't just mean "everything under one roof" but also "everyone working together." Co-location is not the same as integration.
- Integration is not a simple, linear process in Foundry's complex adaptive system. Practice change, including structural and cultural changes, requires sustained work, effort, attention, intention and shared purpose to achieve the objective of a seamless care experience.
- Integration needs facilitative leadership and a coordinated, collaborative approach.
- Integration impacts resources, relationships and practice.

The developmental evaluation of our service model also found that, when partners shift towards increasing integration, services are experienced as a single point of entry into a safe space that values relationship building, does not require referrals and empowers youth as care-seekers.

Findings in this evaluation highlight the unique role that Foundry centres and their staff play in supporting young people and families/caregivers during this important developmental period of transition. Young people are transitioning from an age when most health care decisions are made for them by family/caregivers to an age when they are independent, informed and empowered to reach out to services and make decisions about the supports they require.

"Yes. I like the idea that we're sort of pooling for Foundry. Hopefully, the idea is to pool our knowledge and our resources. And so, we hopefully maybe can even make it where our expertise is available for kids that maybe aren't in crisis, but we can support our colleagues and supporting their youth, so it doesn't have to go to a crisis — would be one benefit, I sort of see as partnering with so many other different agencies..."
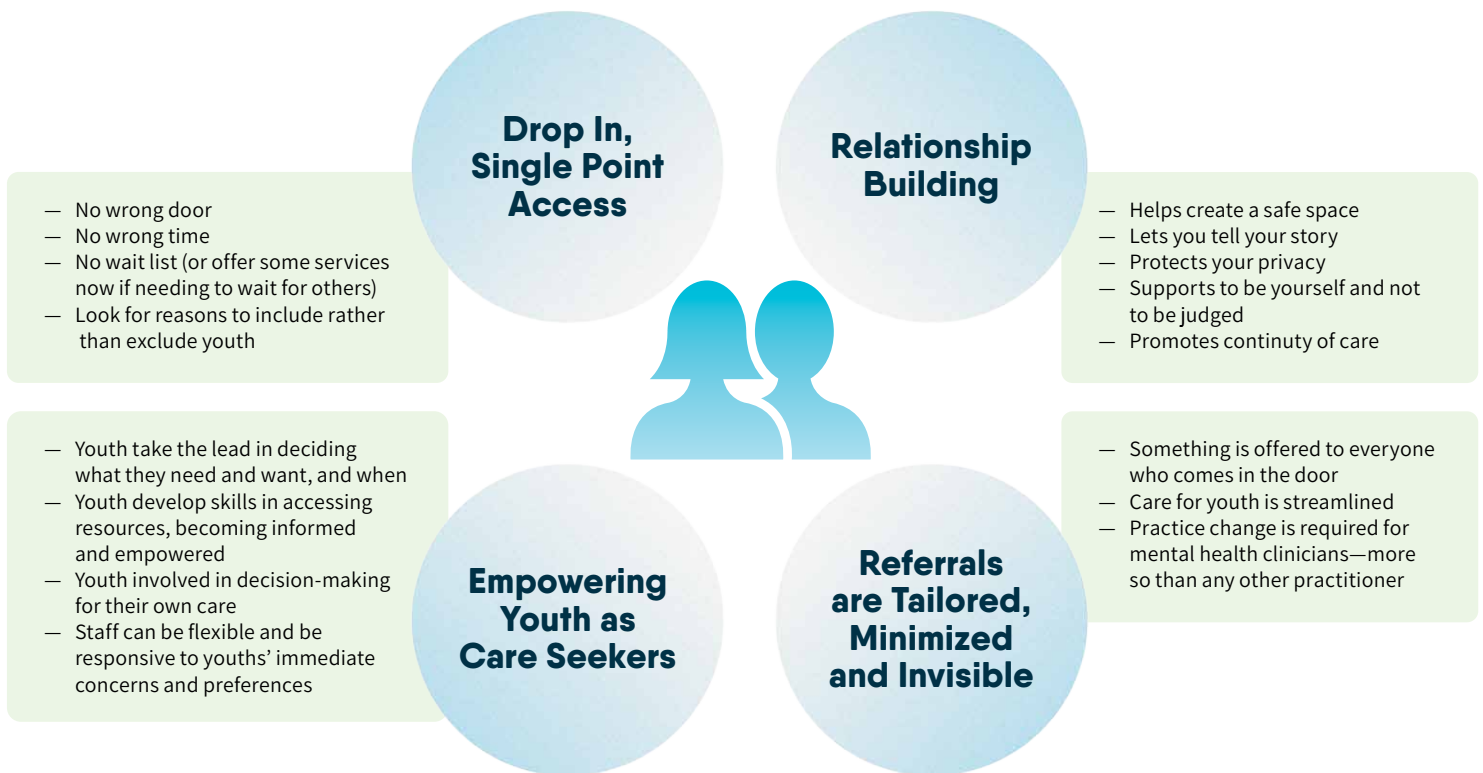
Foundry centre staff, Developmental Evaluation

"Collaboration and integration can be transformative because any one of those [agencies] on their own would've struggled... From formal collaboration like their weekly triage meetings and so on to the fact that they walk around... People don't have any problem talking to anyone else in the building that they know is here and consulting in the minute about something that's going on."

Foundry centre staff, Developmental Evaluation

Understood in this way, Foundry centres facilitate the growth of young people not only by offering readily available services but also by building upon young people's capacity to engage effectively and meaningfully with supports in their community as they become adults. This way of understanding young people is evident in the emerging core service delivery characteristics in Figure 3 below.

FIGURE 3: CORE SERVICE DELIVERY CHARACTERISTICS

Drop In, Single Point Access

— No wrong door
— No wrong time
— No wait list (or offer some services now if needing to wait for others)
— Look for reasons to include rather than exclude youth

Relationship Building

— Helps create a safe space
— Lets you tell your story
— Protects your privacy
— Supports to be yourself and not to be judged
— Promotes continuity of care

Empowering Youth as Care Seekers

— Youth take the lead in deciding what they need and want, and when
— Youth develop skills in accessing resources, becoming informed and empowered
— Youth involved in decision-making for their own care
— Staff can be flexible and be responsive to youths' immediate concerns and preferences

Referrals are Tailored, Minimized and Invisible

— Something is offered to everyone who comes in the door
— Care for youth is streamlined
— Practice change is required for mental health clinicians—more so than any other practitioner

Foundry's Five Service Streams

Foundry centres in British Columbia are community-based, integrated youth services centres providing five service streams (see "Figure 4: Five Service Streams" on page 11): mental health and substance use support (considered jointly), physical and sexual health, youth and family peer support, and social services.

Our approach to primary youth health care takes a broad, social determinants of health lens, ensuring that services are not exclusively focused on providing solutions to mental health and substance use concerns but provide broad supports to address overall health and social concerns, supported by our five service streams.

Foundry's provincial virtual services team also offers these services across BC through the Foundry Virtual BC platform, which includes the Foundry BC app, a web portal and phone services.

Centres offer a range of services in each service stream, which are selected based on peer-reviewed evidence, clinical and lived experience, and operational context. For more details on the evidence and rationale for Foundry's services, please see "Tools and Resources" on page 14.

> **"We call upon the federal, provincial, territorial, and Aboriginal governments to acknowledge that the current state of Aboriginal health in Canada is a direct result of previous Canadian government policies, including residential schools, and to recognize and implement the health-care rights of Aboriginal people as identified in international law, constitutional law, and under the Treaties."**
>
> Call to Action 18, Truth and Reconciliation Commission of Canada

Foundry centres also adapt services for the virtual space to varying degrees.

For more details on the benefits, principles and lessons learned about virtual services in centres, please see the "Virtual Services" section of the Service Model Guide.

Mental Health and Substance Use Support

Mental health and substance (MHSU) services may be provided by different agencies or may be delivered by a concurrent disorders practitioner. Core MHSU interventions are organized within the Integrated Stepped Care Model (ISCM) with services from across the continuum and community. MHSU services include monitoring; screening and assessment; triage and referral; individual, group and family interventions; and psychiatric consultation and pharmacotherapy.

Although there are distinctions between mental health and substance use services — including evidence-based treatments for identified presentations and specific service referral options — in Foundry, we support both mental health and substance use support equitably and promote concurrent services where possible.

Peer Support

Peer support is provided by youth or family/caregivers who have personal lived and living experience with mental health or substance use concerns themselves or who have previously supported a young person with mental health or substance use challenges.

Physical and Sexual Health

Physical and sexual health services at Foundry include general physical health assessment and interventions, management of sexual health concerns, prevention and health promotion, specialized services such as gender-affirming care and referrals to shared care with other medical services providers such as psychiatrists and mental health teams.

These services are delivered by a multidisciplinary team of medical services providers including family physicians, nurse practitioners, nurses, social workers, medical office assistants and Peer Support Workers.

Social Services

Social services address the social determinants of health and wellness, supporting a young person's transition to adulthood. Examples include work and study supports such as the Foundry Work and Education Program, income assistance, housing support and recreational services such as Foundry's Wellness Program.

FIGURE 4: FIVE SERVICE STREAMS
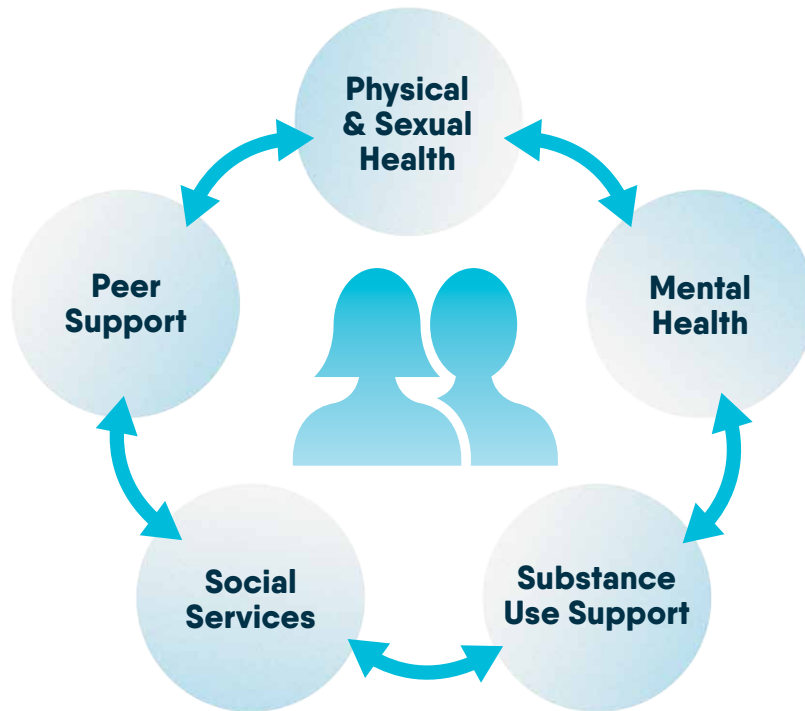
Flexible Access across the Service Streams

Under the Foundry brand, the five service streams are co-located and accessed in a flexible manner at each centre, determined by client preference and need, to reach young people earlier — before their concerns have a severe impact on their relationships, health and well-being. Beyond just co-location, an integrated team of service providers work alongside each other. Services are linked and coordinated, with everyone communicating and sharing information to provide a seamless experience for youth and families/caregivers, making Foundry one of the most integrated health systems in Canada.

Young people can access services from more than one stream as needed. While we use the concept of service streams to clarify core services and supports offered at Foundry, service providers offer supports across multiple streams. For example, as part of the integrated care team, medical services providers (family physicians, nurse practitioners and nurses) offer support across physical, mental and sexual health services, as well as substance use services and supports. Peer Support Workers also regularly bridge across multiple service streams.

Integrated Stepped Care Model (ISCM)

Every young person's journey to wellness is unique, especially when it comes to mental health. At Foundry, we want to ensure that our evidence-informed care model is flexible to best meet the individual needs of every young person. To be able to provide this personalized care, we have developed an Integrated Stepped Care Model (ISCM) for Foundry.

Achieving the system transformation necessary to implement Foundry's ISCM requires early engagement from stakeholders, forming partnerships and building trust-based, supportive relationships from the beginning. ISCM is impossible without collaboration and integration (shown in Figure 5).

FIGURE 5: STEPS TO SYSTEM TRANSFORMATION, AS DETERMINED THROUGH OUR DEVELOPMENTAL EVALUATION

Forming partnerships → Relationship building → Collaboration → Integration → Implement stepped care
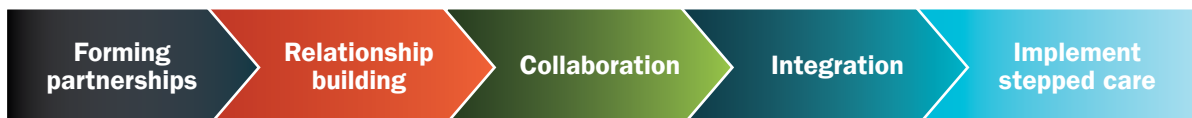
The ISCM gives order to how we provide services across Foundry centres and between different service providers. By following the ISCM, we can help provide a framework for young people, their families/caregivers and service providers to access the most effective interventions to support young people experiencing mental health and/or substance use concerns. The ISCM places emphasis on transparency and flexibility in service matching and highlights early intervention to offer effective support to young people before issues overwhelm or illness progresses to the point of requiring specialized services.

Grounded in a stepped care approach, the ISCM includes multiple service options specific to both mental health and substance use challenges within an integrated service delivery framework. A range of services, from low to high intensity, are available at each centre. Services offered to young people are based on their needs, readiness and preference, as well as the provider's clinical judgement and data from standardized tools that are completed by youth seeking mental health, substance use and physical health care services. See "Figure 6: Foundry's Integrated Stepped Care Model" on page 13.

In addition to clinical conversations, mental health is measured in order to inform transparent and collaborative care delivery. Using measures helps infer if the young person is likely to benefit from a service, and comparisons are made at different times to assess how much the young person is benefiting relative to their goals. Data supports providers in deciding which services to offer, and data supports youth in making informed decisions about their care.

FIGURE 6: FOUNDRY'S INTEGRATED STEPPED CARE MODEL
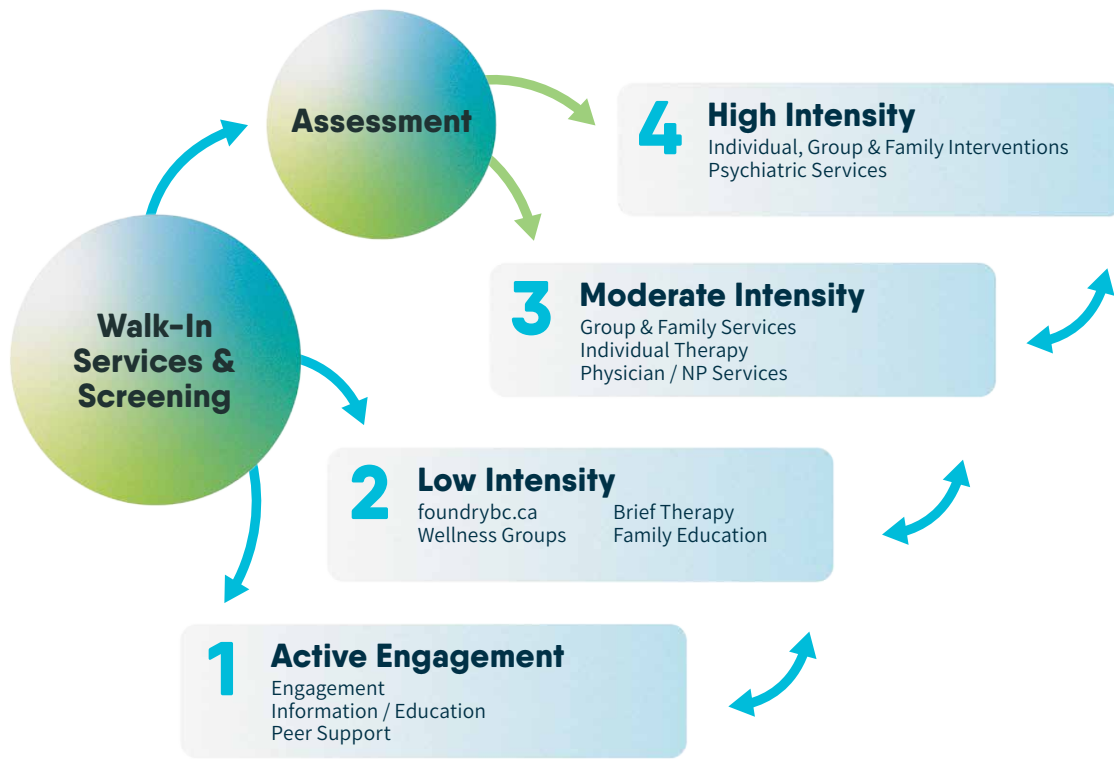
Service options for each step are based on wise practices and community assets. For example, step one options may include services delivered by Peer Support Workers and step two includes support to access self-guided materials through foundrybc.ca. Step three and four care options typically involve more intense mental health and substance use services. Easy access to services is key, whether they are specialist services on site or medical care.

For more information about implementing Foundry's ISCM, please see the "Integrated Stepped Care Model" section of the Service Model Guide.

Tools and Resources

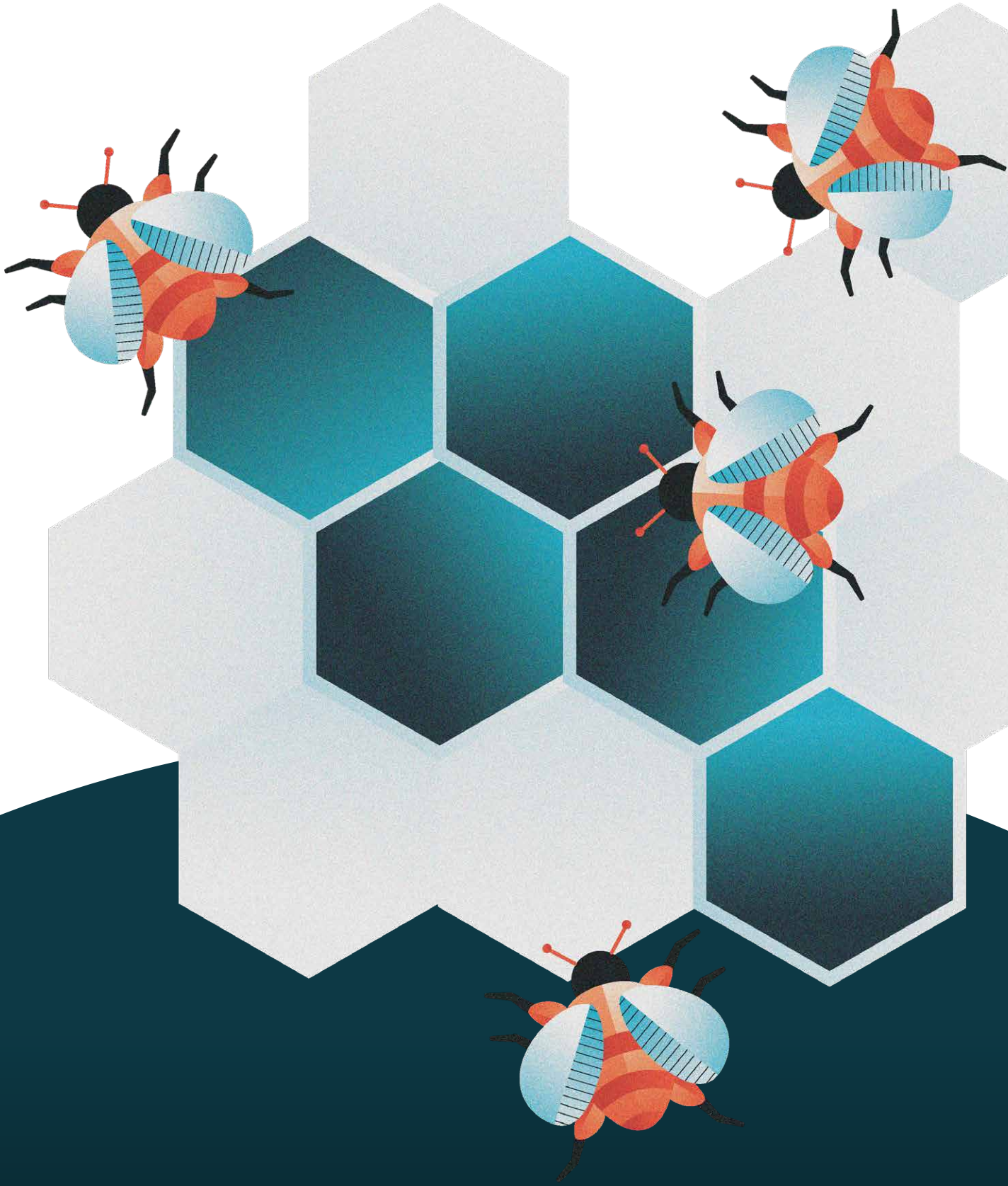Visit **The Foundry Learning Centre** to access these tools and resources.

- Transforming Access to Care: Foundry's Integrated Youth Services Model

- Developmental Evaluation Report

References

1   Fulop N, Mowlem A, Edwards N. Building integrated care: lessons from the UK and elsewhere. London: The NHS Confederation; 2005.

"We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Right of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism."

Call to Action 20, Truth and Reconciliation Commission of Canada

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