



## Family Service Saskatchewan Walk-In Counselling Annual Report April 1<sup>st</sup> 2019-March 31<sup>st</sup> 2020

### Implementation

April 1<sup>st</sup> 2020 marked one year of Family Service Saskatchewan (FS Sask) working in collaboration with the Saskatchewan Health Authority to implement the FS Sask Walk-In Counselling Program. In this year the FS Sask Walk-In Counselling Program saw substantial growth all the while implementing a new program in many communities.

- FS Sask began the year by offering counselling in four communities in the province and increased to offering walk-in counselling in 27 communities across Saskatchewan which surpasses the 23 communities originally planned for.
- FS Sask provided 3,990 sessions with 4,270 people being served through Walk-in Counselling Clinics.
- In October FS Sask Walk-in clinics saw the most completed sessions with 441 sessions completed.
- In order to deliver services in rural communities FS Sask Walk-In Counsellors travelled 39,729 km.

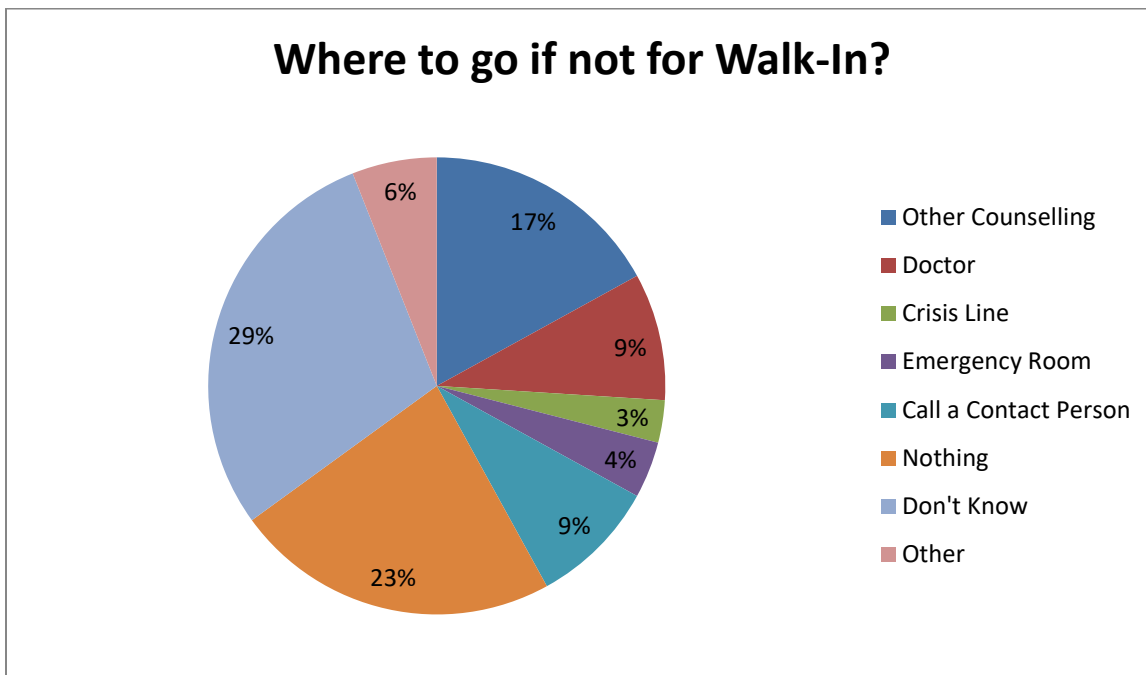
	April 2019	March 2020	Yearly Total
Number of clinics	85	208	1477
Number of sessions available per month	286	920	9209
Sessions available per month	146	528	3990
Number of communities served	4	27	27
Number of children seen	4	18	185
Number of couples seen	6	30	333
Number of families seen	7	10	198
Number of individuals seen	129	354	3554
Total number of people attending Walk-In Counselling Clinics	146	412	4270

FS Sask has established that there is a need in Saskatchewan communities for rapid access mental health services. The usage of the program has been very strong and our outcomes illustrate that we can have a significant clinical impact with just a few counselling sessions. We have had an incredible response from the communities where we offer walk-in services, and have established many referral partnerships with providers who send community members to our walk-in clinic. FS Sask has also established that working with a single-session solution focused walk-in counseling model we can significantly reduce the chronic issue of waitlist and capacity challenges. While we have achieved a strong implementation we have not



arrived at 100% utilization of the sessions available in our clinics and have room to see more clients in most communities. FS Sask is confident that the Walk-in counselling services assists in serving our community more effectively as a result of implementing rapid access mental health services.

FS Sask asks people being served to report where they would have gone if not Walk-In Counselling. Our data shows that 4% would have gone to the Emergency Room at their nearest hospital, 44% of participants indicated that they would have looked for other counselling, called a crisis line, attended their doctor’s office or had alternative ideas of where to go. This means 52% of participants had no alternatives or options and would have continued without assistance for their immediate need, possibly becoming more chronic, or may have turned to the emergency room without our support and intervention.



## Locations where Walk-in Counselling was Implemented

FS Sask has been worked in partnership with other organizations in the communities we operate to ensure we are located in an accessible non-stigmatizing space. We have established through past program evaluation that offering our services in non-traditional mental health spaces we can improve accessibility for community members. Beyond being co-located with SHA in several health clinics, some of the unique spaces where Walk-in is delivered include:

- Food Banks
- Pro-Bono Law Clinics
- Regional Colleges
- Public Libraries
- Community Hubs
- Salvation Army
- Community Centres
- Spiritual Centres
- Drop-In Centres



FS Sask’s member organizations and their service locations include:

<b>Agency</b>	<b>Community and Site</b>
<b>Catholic Family Services of the Battlefords</b>	North Battleford, Battlefords
<b>Catholic Family Services of Prince Albert</b>	Prince Albert
<b>CFS Regina</b>	Regina, Indian Head, Southey
<b>CFS Saskatoon</b>	Saskatoon, Delisle
<b>Envision Counselling and Support Centre</b>	Weyburn, Estevan, Oxbow
<b>Fresh Start Swift Current</b>	Swift Current, Maple Creek
<b>Family Service Regina</b>	Regina
<b>Family Service Saskatoon</b>	Saskatoon, Warman, Martensville
<b>North East Outreach and Support Services (NOESS)</b>	Melfort, Nipawin, Tisdale
<b>Partners Family Services Humboldt</b>	Humboldt, Wynyard, Wadena, Wakaw, Cudworth
<b>Society for the Involvement of Good Neighbours (SIGN)</b>	Yorkton, Kamsack

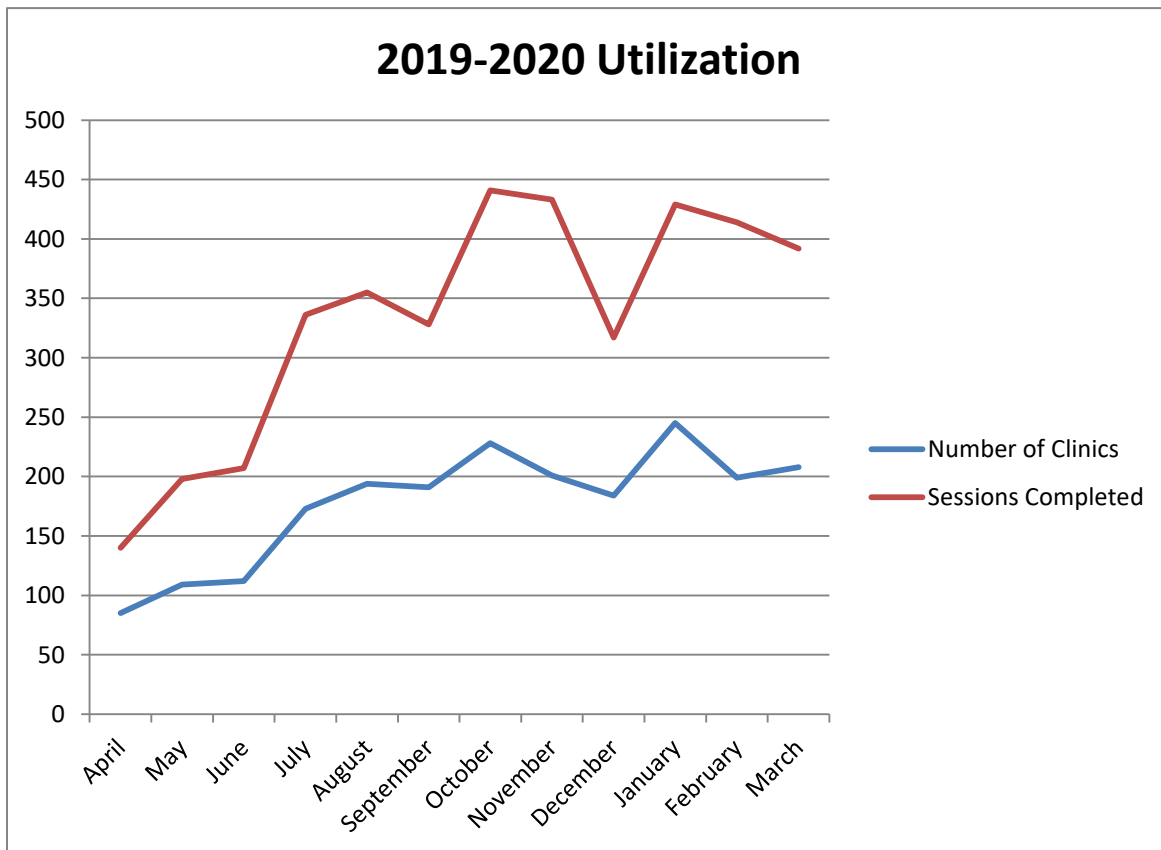
## **Data Gathered**

In order to provide effective program reporting, Family Service Saskatchewan has developed a standardized data collection system that ensures we collect consistent data across our service sites. The attached statistical report outlines our service capacity, service modality, demographics, utilization and outcomes for the 2019-2020 fiscal year.



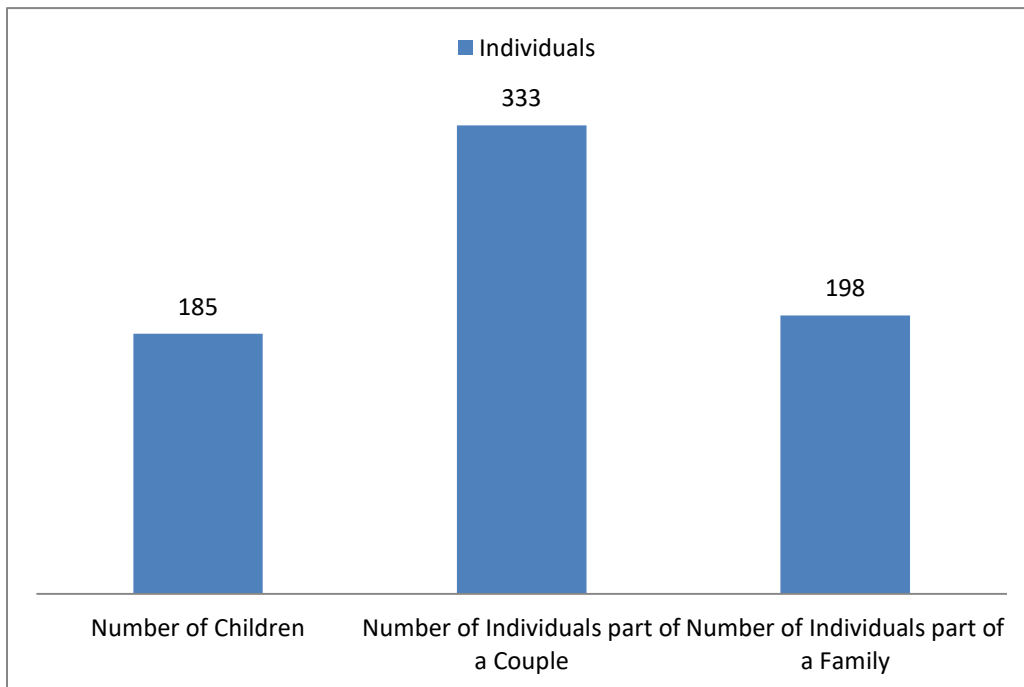
## Service Capacity

After acquiring funding from SHA, FS Sask agencies began to hire Walk-In Counsellors develop partnerships and service locations in new communities. As agencies added clinics and promoted the service, we saw increases in the number of clinics and number of sessions offered to the community as well as increases in the number of sessions completed. Currently there is room to increase utilization now that the program is fully staffed and operational in 27 communities.



## Service Modality

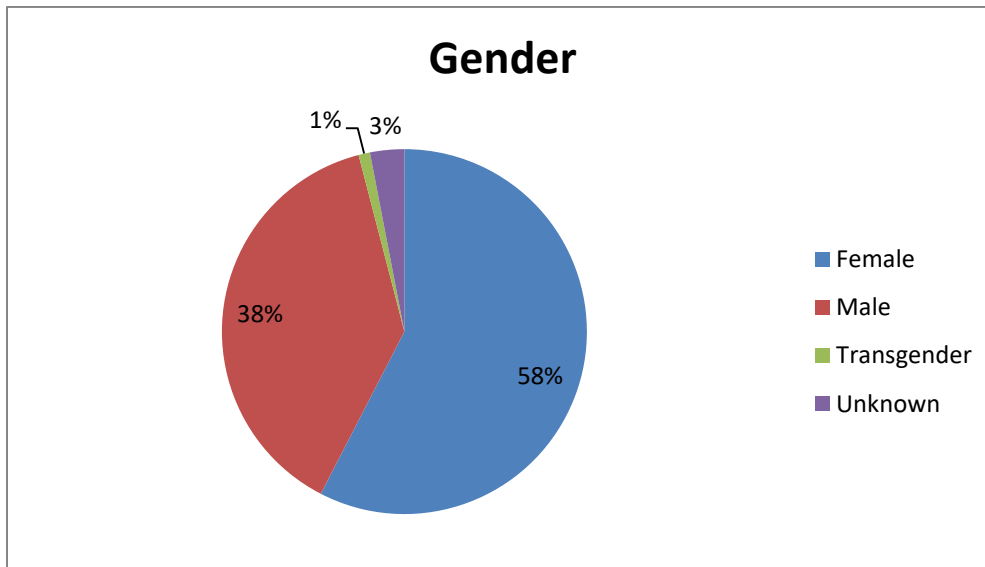
Most of the sessions completed at FS Sask Counselling Clinics is done with Individuals. In 2019-2020 Walk-In served 3,554 individuals who came alone to a single session. Beyond that, Walk-In was also able to meet 185 children, 166 couples (333 individuals) and 85 sessions were devoted to families (approximately 2 individuals per family). FS Sask agencies do feel it is important to profile our services as a resource for the entire family, which may differentiate ourselves from other mental health services.



## Demographics

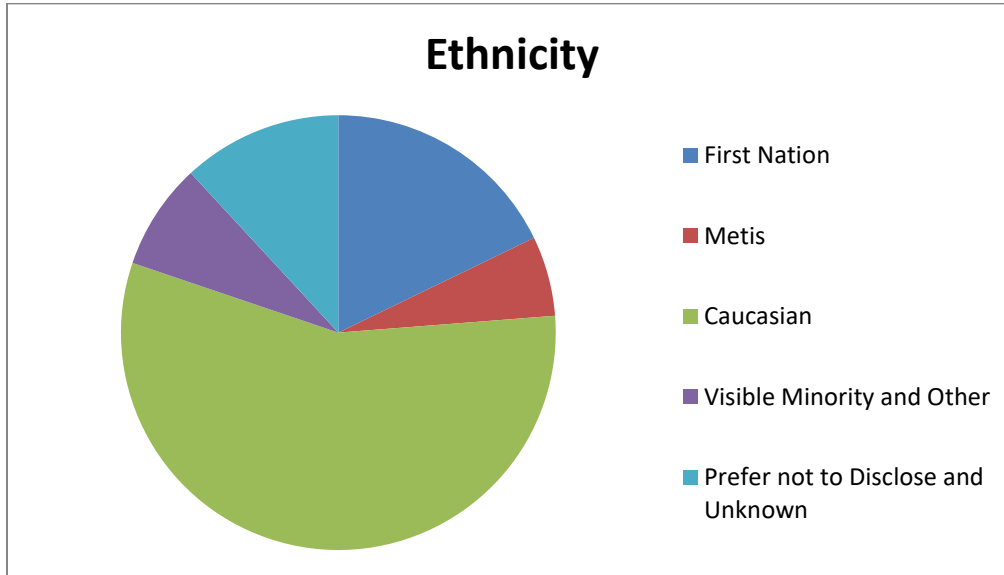
### Gender

38% of counselling participants were male. On average, a higher percentage of males attended the Walk-In Clinics than attend traditional counselling programs. At times in some locations it has been noticed that a higher percentage of males than females attended Walk-In Counselling Clinics.



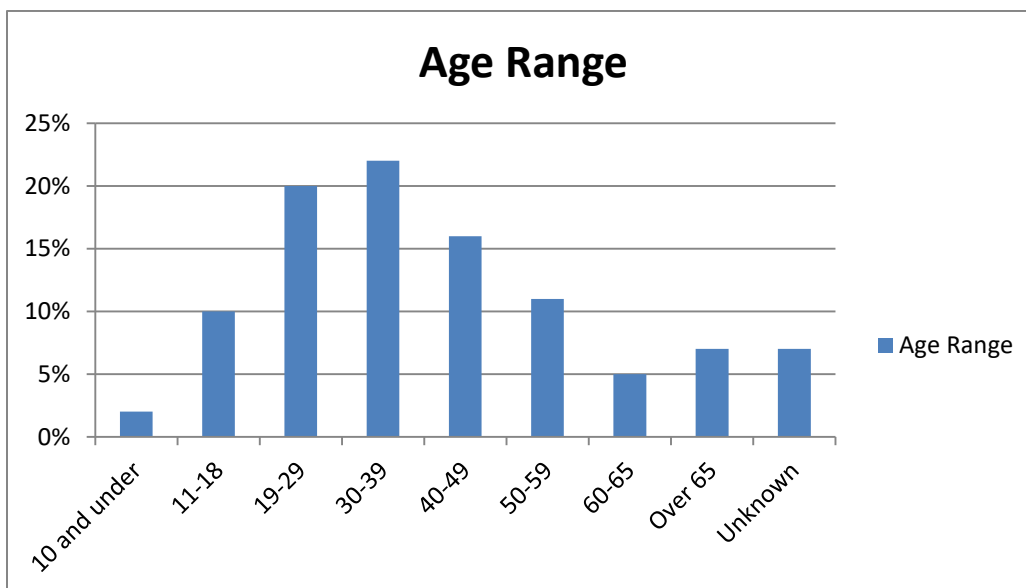
### Ethnicity

57% of individuals who attend Walk-In counselling identify as Caucasian. While 24% identify as First Nation, Inuit or Metis, 4% as a visible Minority, 16% note that they prefer not to disclose, indicate “other” or do not respond to this question.



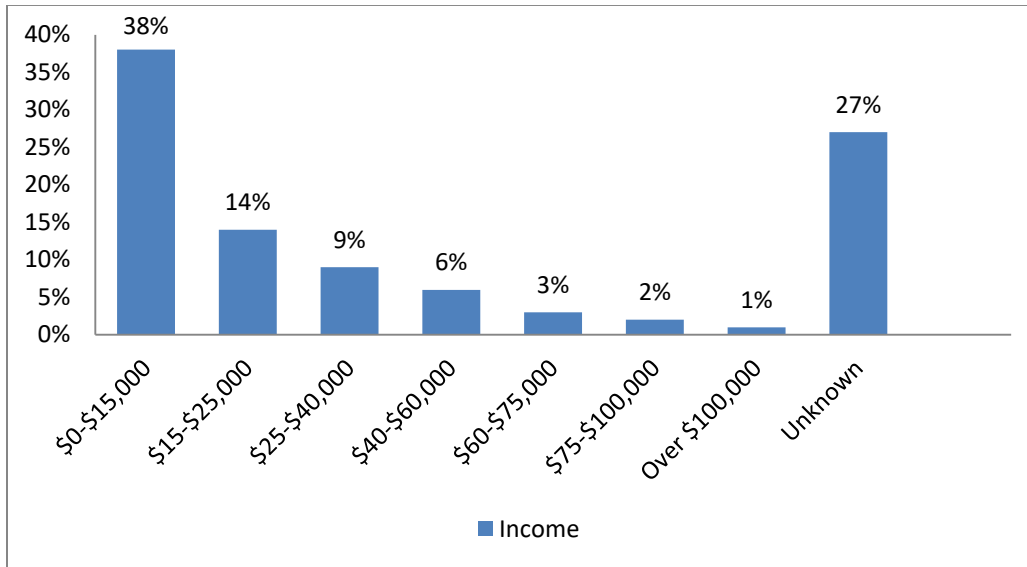
### Age Range

Data shows individuals of all ages access Walk-In Counselling Clinics with people between the ages of 19-39 utilizing the service more frequently than other age groups.



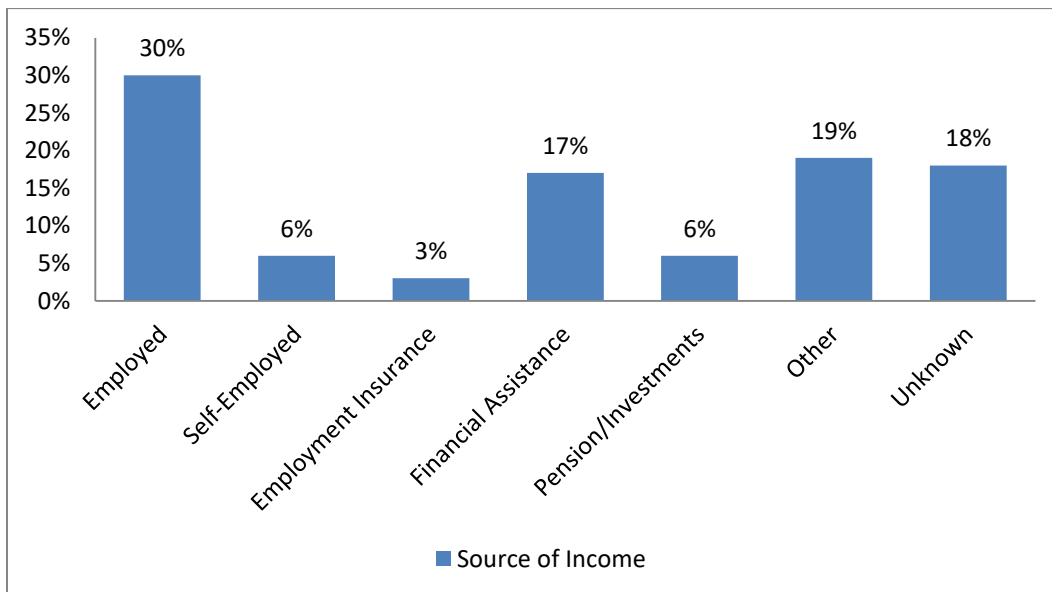
### Income

61% of individuals who attend Walk-in Counselling experience low income. 52% of people have an income that falls below LICO.



### Source of Income

Many of the individuals seen through FS Sask Walk-In Clinics are employed but not in positions where they have access to benefits for counselling. 32% of individuals who access Walk-In are either Self-Employed, on Employment Assistance, live on Pensions and Investments or are utilizing Financial Assistance and may not qualify for Employment Assistance Plans and the counselling benefits that might be included in such plans.

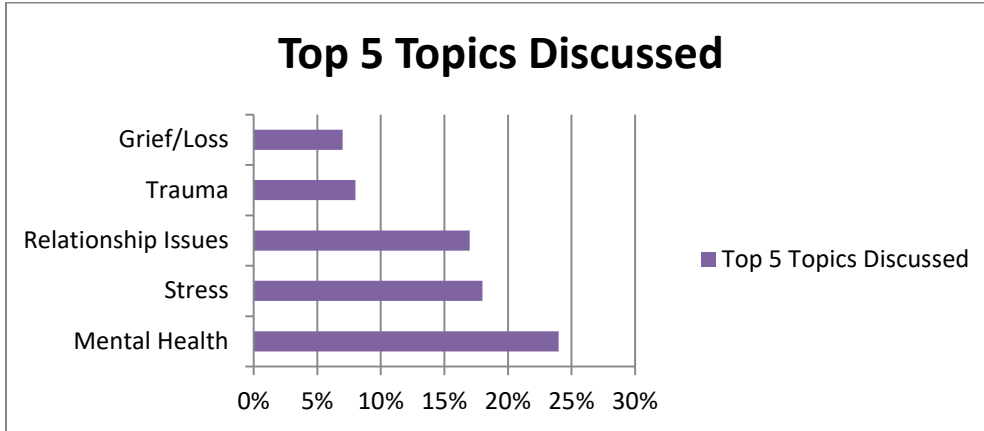




## Utilization

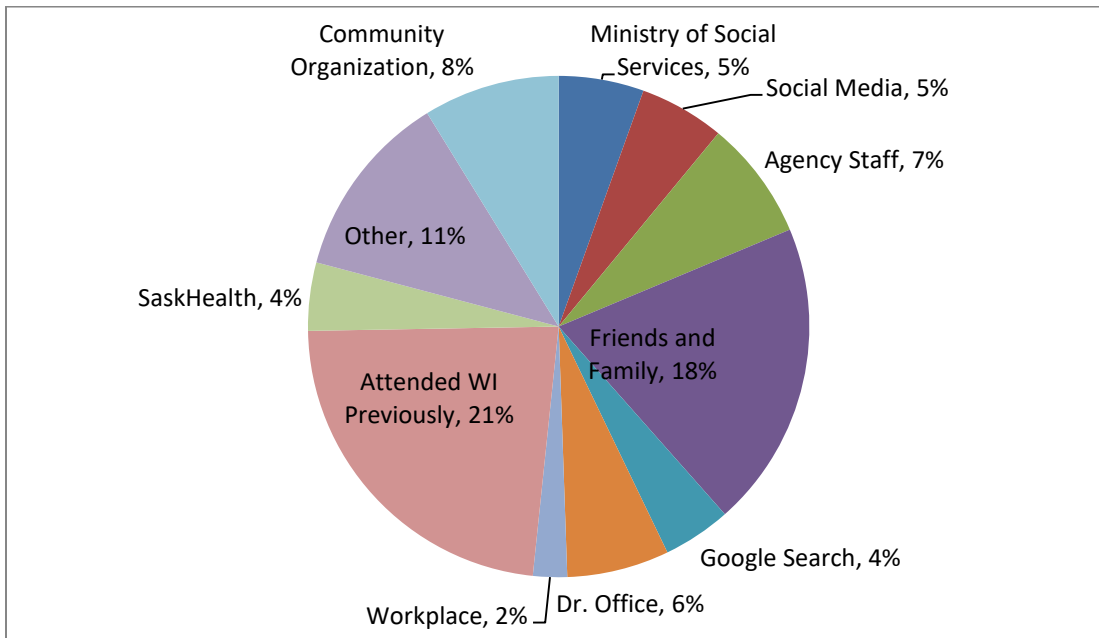
### Topics Discussed

The top five topics discussed during Walk-in Counselling were Mental Health concerns such as anxiety and depression (24%), stress (18%), relationship issues (17%), trauma (8%), and grief and loss (7%). Counsellors identified the topics discussed after the individual left the session.



### Referral Source

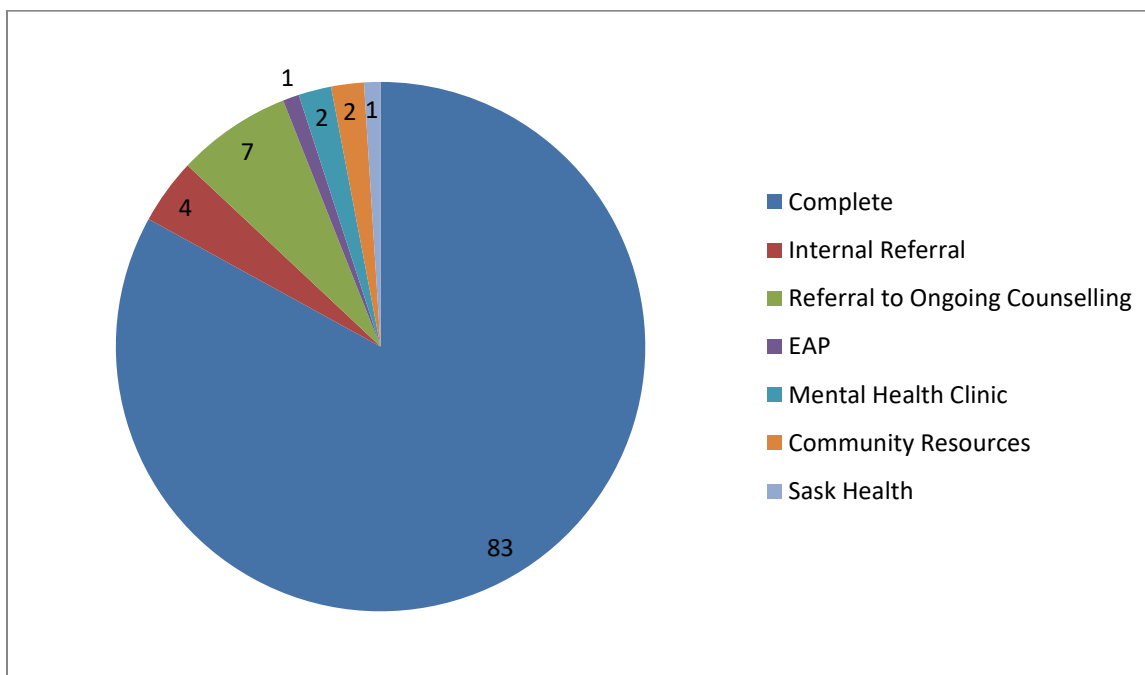
FS Sask Walk-In does not require individuals to be referred to this service. Taking note of where individuals learn of the service assists in how FS Sask is promoted. It is worth noting that Doctors are aware of Walk-In services and are referring to Walk-In almost as much as agency staff (N=276). Currently 161 individuals attended Walk-In after SaskHealth referred them to Walk-In services.



## Outcome

### Session Outcome

Single-Session Therapy is a brief form of Solution Focused Therapy which ensures tangible clinical support is available in 1 or 2 sessions. Counsellors along with the individuals they serve determine what the next steps will be. Complete indicates that work was done and that the Walk-In service was appropriate for the individual. Referrals to ongoing counselling or EAP indicates that the individual plans to access counselling where they will work on goal setting and see improvements with the same counsellor. Referrals to the Mental Health Clinic or Sask Health indicate that the individual had mental health needs beyond the scope of what FS Sask Walk-In Counselling Clinics could offer and the individual was agreeable to access treatment. Currently 83% of sessions are designated as complete while 2% (N=90) are referred to the Mental Health clinic.



### Session Outcome Score

#### Partners for Change Outcome Management System (PCOMS) Data:

Family Service Saskatchewan (FSS) agencies are working to consistently utilize both the Outcome Rating Scale (ORS) and Session Rating Scale (SRS) to measure outcomes and inform practice (Miller, 2008). These are standardized and evidence based outcome measurement and session feedback scales.



The Outcome Rating Scale (ORS) measures level of distress relating to mental health symptoms, family relationships and social dimensions; such as work and school. While an average person not considered to be in distress would score 25 points, Walk-in clients on average scored 18.5 this year.

The Session Rating Scale (SRS) measures session outcomes relating to satisfaction, therapeutic alignment, and factors such as “we talked about what was important to me today”. Clients scored their satisfaction with their Walk-in counselling session 36.3 out of 40. Through this tool, clients are reporting that the counsellor they spent time with was able to establish a therapeutic alliance within the single session.

### **Client Feedback**

While the SRS score is indicative of client satisfaction with Walk-in, at times individuals express their gratefulness for the Walk-In service without soliciting feedback.

- “I was surprised for few days how well the counselor was and how she not only listened but gave me resources that made me see things differently and helped not just that day but following days as I implemented some behavior changes. I wanted her and her leader know that this program and counselor was great.” Email feedback from Anonymous client
- “Thank you for your help and your encouragement over the last few months. It was appreciated more than you know.” Card sent by client about a Walk-In clinic.
- “Honestly, you kept me out of the psych ward” Client feedback
- “I want to thank you for helping me, for listening and for your patience and kindness” Client feedback

### **Conclusion**

April 1<sup>st</sup> 2020 marked one year of Family Service Saskatchewan (FS Sask) working in collaboration with the Saskatchewan Health Authority to implement the FS Sask Walk-In Counselling Program. Overall it was an excellent year of implementing a new program. The implementation process was rapid, growth was steady and the demographic data shows Walk-in is being utilized by individuals who do not have access to an Employee Assistance Plan or the means to access counselling. Referral data shows that many partners in the community are aware and easily referring individuals to Walk-In Counselling to assist with their mental health needs. Finally, the data shows that Walk-in provides individuals with the help that they need at the time that they need assistance. FS Sask looks forward to another year working in collaboration with the Saskatchewan Health Authority.