Vancouver Inner City Urgent Mental Health and Substance Use Service Enhancements

October 7, 2025

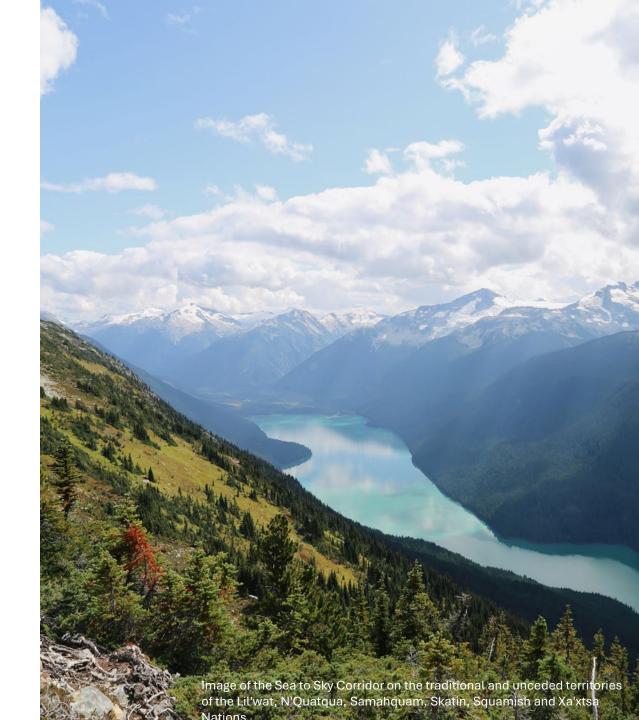


Territory Acknowledgement

Vancouver Coastal Health is committed to delivering exceptional care to 1.25 million people, including the First Nations, Métis and Inuit, within the traditional territories of the Heiltsuk, Kitasoo-Xai'xais, Lil'wat, Musqueam, N'Quatqua, Nuxalk, Samahquam, shíshálh, Skatin, Squamish, Tla'amin, Tsleil-Waututh, Wuikinuxv, and Xa'xtsa.

We wish to acknowledge that the land on which we gather is the traditional and unceded territory of the Coast Salish Peoples, including the x^wməθk^wəyəm (Musqueam), Skwxwú7mesh (Squamish) and səlilwəta (Tsleil-Waututh) Nations.





Agenda:

- Overview of Urgent MHSU Service Enhancement Framework
- 2. Program Specific Updates
- 3. Third Party Evaluation Summary



Framework Goals

- 1. Increase capacity of the system to respond in safe, health-focused and therapeutic ways to people who are in, or are approaching, a mental health crisis
- 2. Provide additional, improved services and earlier de-escalation support to both individuals in or near crisis, and the non-health partners who help them
- 3. Strengthen Indigenous approaches and improve Indigenous client experiences, outcomes, and access within all VCH urgent MHSU services



Implementation Timeline

Enabling the
Requisitioning
and Hiring of
100 New
Police Officers
and 100
Mental Health
Nurses
November
2022

Urgent MHSU
Service
Enhancement
grant
approved by
Council

February 2023

VPD
Operations
Command
Centre
Liaison
Nurse
June 2023

Mobile Crisis De-Escalation Team November

2023

Car 87/88 Capacity doubled December 2023

Indigenous Crisis Response Team August 2024

External Evaluation (Completed Jan 2025)

Indigenous-Led Evaluation (Planned for 2026)



Implementation Highlights (2025):

Expanded Access and Timely Support

- Over 8,000 individuals supported in 2025
- 546 visits by Indigenous Crisis Response Team (ICRT) from April June alone, supporting 57 active Indigenous clients with culturally grounded care
- Mobile De-Escalation Team (MoDe) expanded to 7 days/week, improving outreach and follow-up care

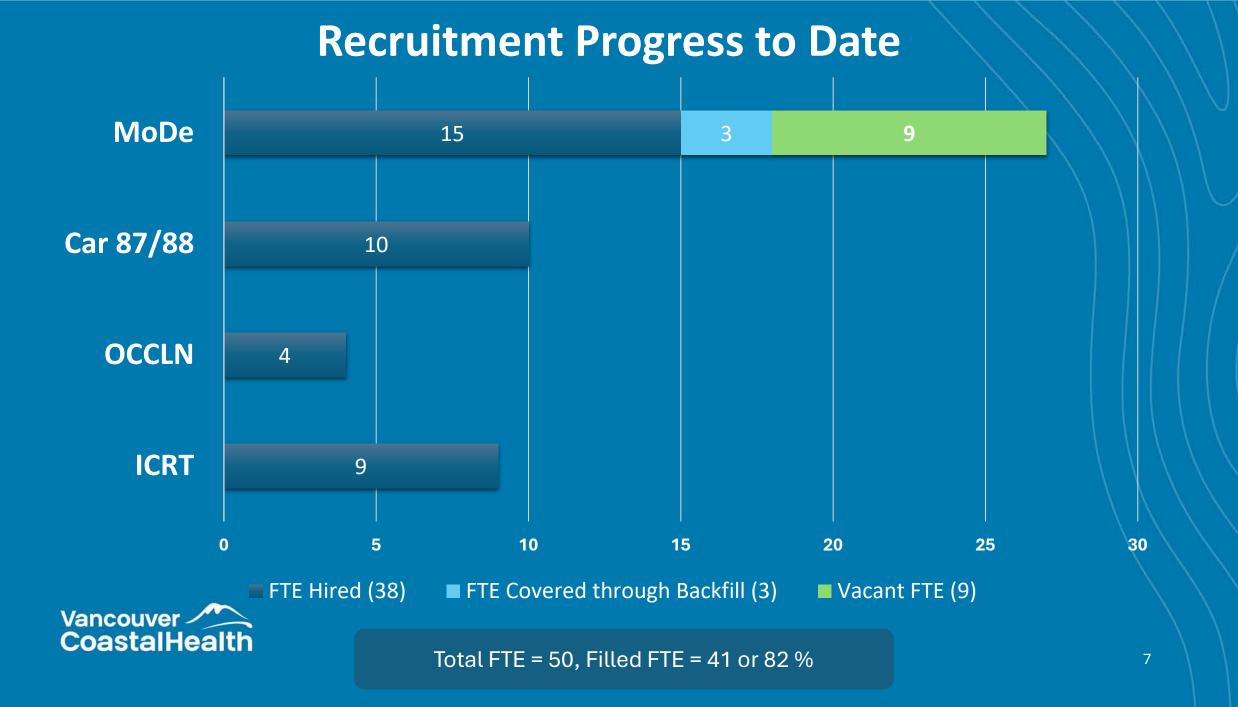
Safer Communities & Empowered Agencies

- 63% of agencies report feeling safer with Car 87/88 services available
- 70% of agencies say MoDe strengthened their capacity to respond to crises

System Outcomes

- MoDe reduced emergency visits by 38% post-intervention
- ICRT improved hospital engagement and reduced discharges against medical advice
- Programs diverted from police response to health-led response





Mobile De-escalation Team (MoDe)

Non-Police Crisis Response

Same day outreach for people in a mental health crisis, who require a clinical assessment with no active violence or physical aggression.

7 days a week.

Key Roles:

To provide assessment, intervention, and support services

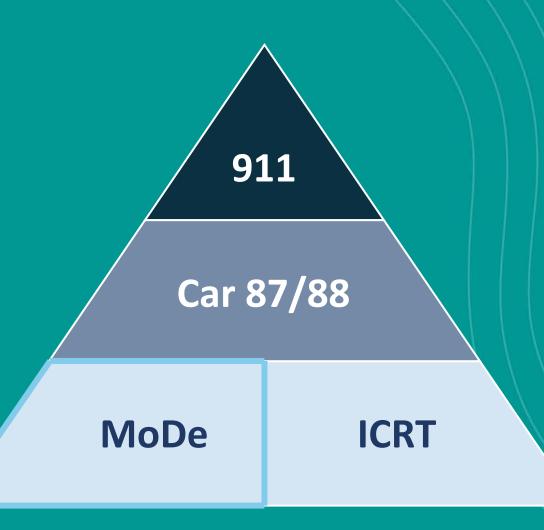
Team:

Nurses, Physicians, Social Workers, Care Coordinators, and Mental Health Clinicians

Referral Pathways:

Supported Housing, shelter and social service operators etc.



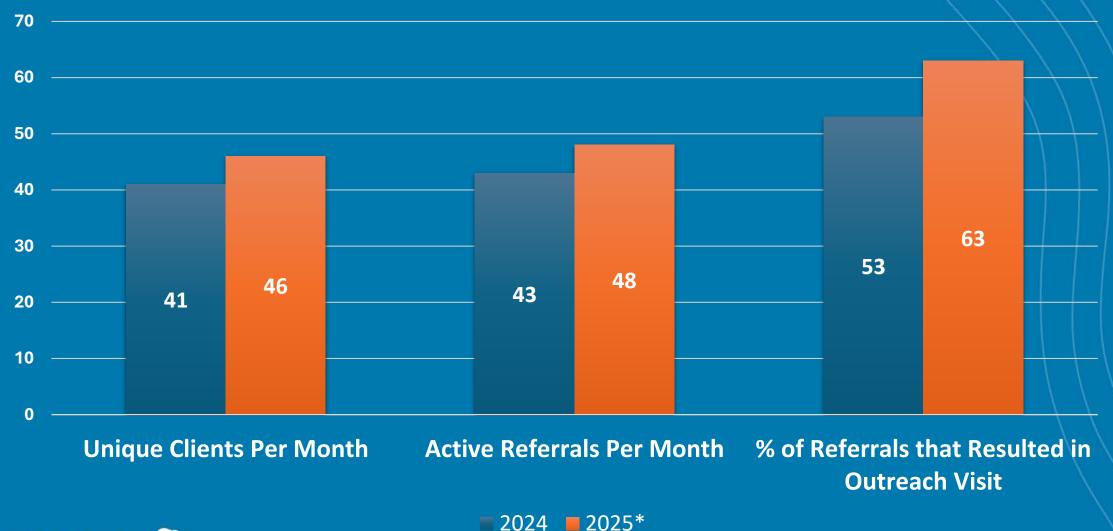


Mobile Crisis De-escalation Team (MoDe) 2025 Program Highlights

- Expanded to 7 days/week
 - Recruitment ongoing
- Updated referral and intervention data
- Expanded access pathways
 - Libraries
 - Community Policing Centers (in progress)

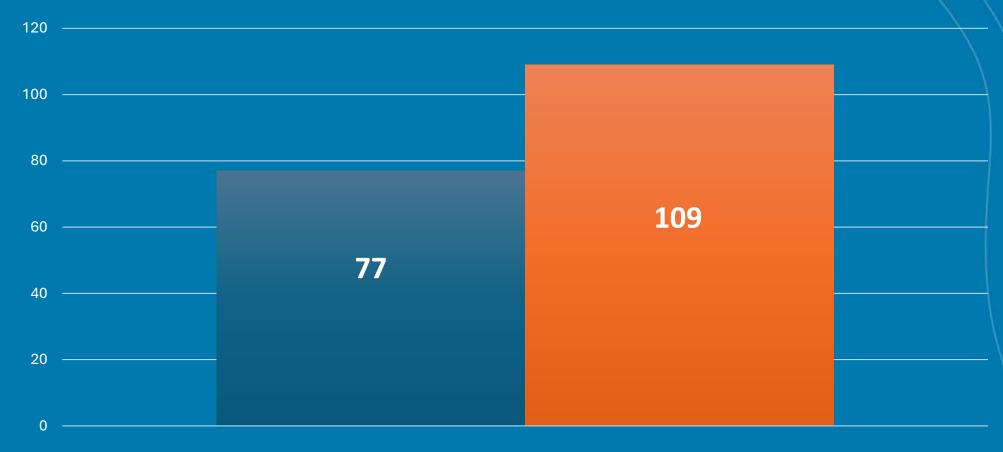


MoDe Clients and Referrals: 2025 & 2024



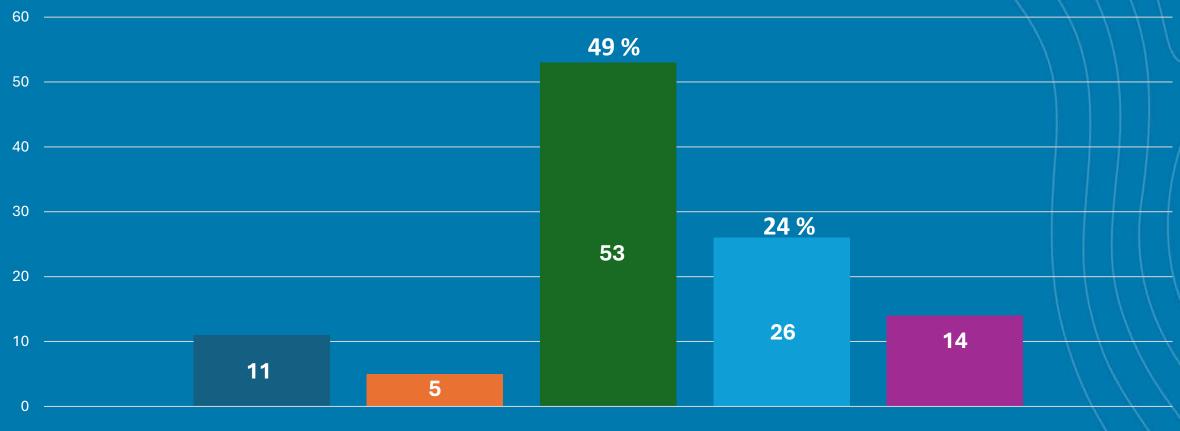


Referrals from MoDe to other VCH Programs – January – July 2025





Referrals from MoDe to other VCH Programs – January – July, 2025







Indigenous Crisis Response Team

The <u>first</u> Indigenous-specific crisis response service developed within the Regional Health Authorities in British Columbia.

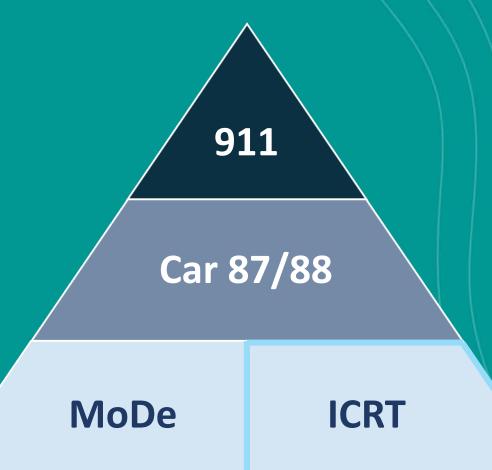
Provides wholistic, **relational**, non-police crisis response.

Key Roles:

- Connection and engagement to Indigenous cultural supports, and system navigation
- Critical incident and stress debriefing
- Wellness checks
- Short-term follow-up

Referral Pathways:

Community partners, health led programs, and self referrals





Indigenous Crisis Response Team (ICRT) 2025 Program Highlights

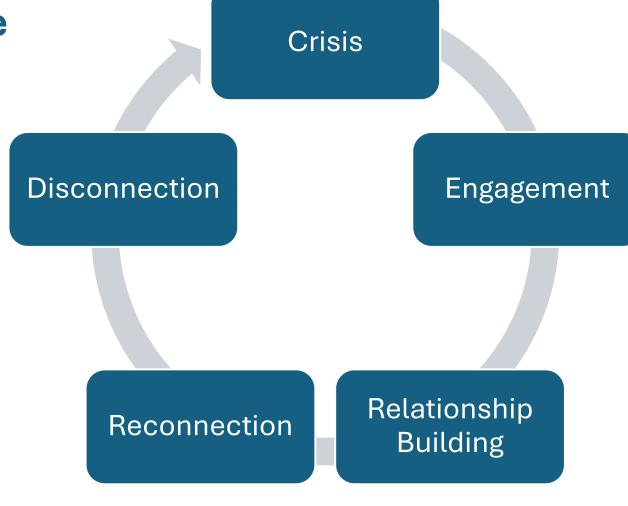
- First full year of operations
- Positive early outcomes and community feedback
- Strengthened partnerships with Indigenous-serving organizations
- Indigenous-led evaluation planned for 2026



Indigenous Crisis Response Team: Relational Health Care

Rooted in Indigenous Ways of Being

- Relational care prioritizes connection, trust, and cultural safety
- Healing is circular, not linear—focused on relationships over transactions
- Crisis is understood through spiritual, social, and historical lenses, not just clinical symptoms
- Colonial health systems can lead to fragment care for indigenous people, leading to disconnection and traumatization
- Indigenous-led care rebuilds trust in systems that have historically excluded or harmed



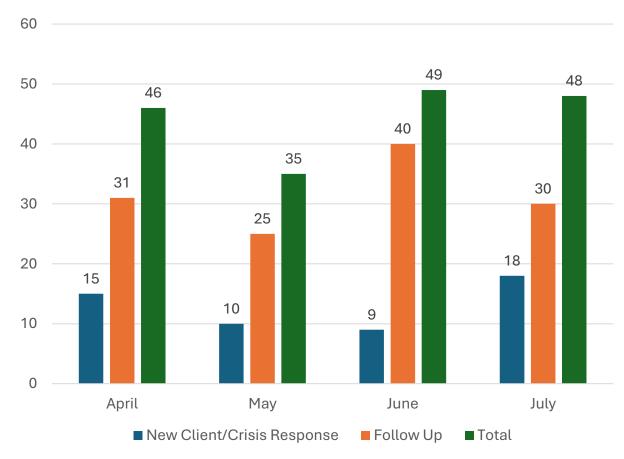


Indigenous Crisis Response Team: Crisis Calls April-July 2025

(Tracking started in March 2025)

- ICRT uses a culturally grounded definition of crisis that is aligned with Indigenous realities
- Elders and Indigenous advisors are integral to guiding ICRT's mandate to ensure culturally safe care
- ICRT builds trust through persistent, compassionate outreach
- Many clients are hard to locate and engage due to past trauma in healthcare
- Progress is measured in relationships each connection is a step toward healing

ICRT Crisis Calls





Car 87/88

Joint initiative between Vancouver Police Department (VPD) and Vancouver Coastal Health (VCH) to respond to mental health and substance use crises.

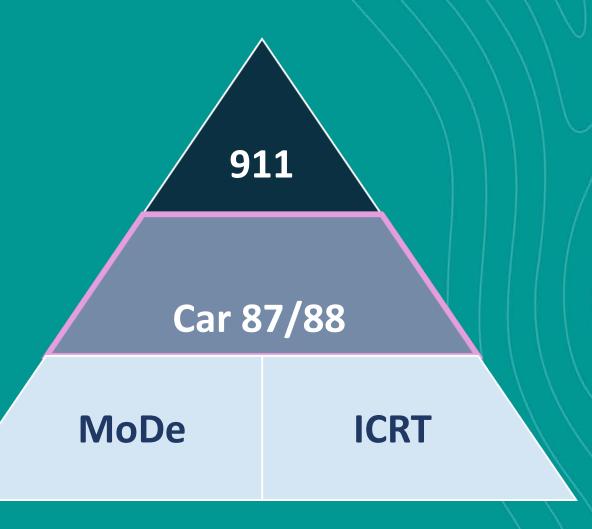
City wide program

Key roles:

- Crisis Response: VPD constable + VCH mental health nurse
- Apprehension: Conveyance clients apprehended under the Mental Health Act to hospital
- Support Services: Phone support through office-based clinicians

Requires a clinical assessment with risk level that requires support from police; may result in apprehension and transport to hospital.





Car 87/88 2025 Program Highlights

- Sustained expanded capacity
 - All lines filled and program doubled to 4 cars on the road since late 2023
- Implementation of interagency education
 - Car 87/88 and VPD joint education: violence prevention, harm reduction, and reducing stigma



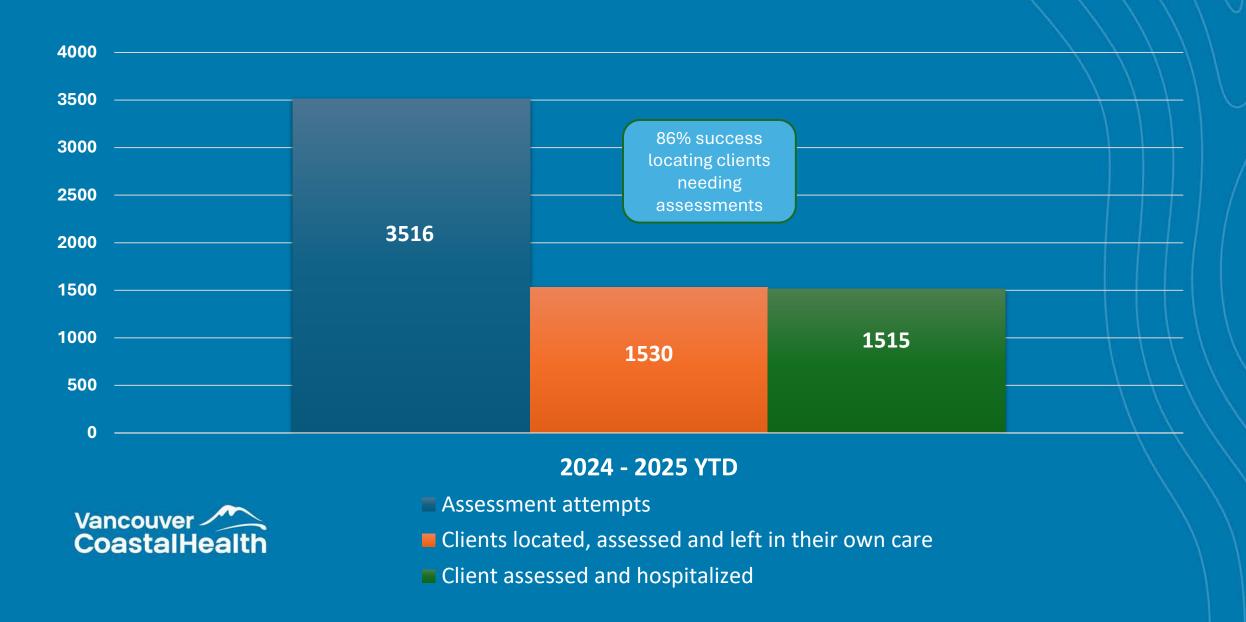
Car 87/88 Clients Served: 2023, 2024, and 2025 YTD





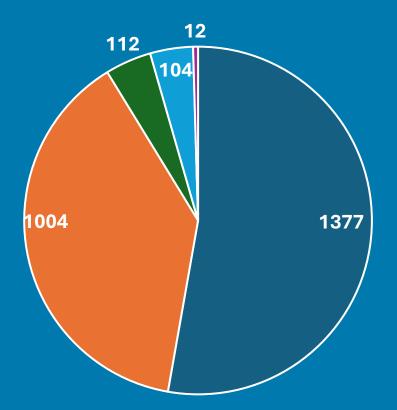
■ 2023 ■ 2024 ■ 2025 YTD

Car 87/88 Outreach

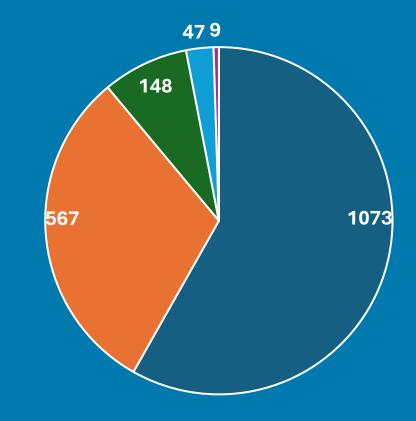


Car 87/88 Referrals by Source

2024 (2,609)



2025 January - July (1,801)





■ Community ■ Police ■ Self/family ■ Acute ■ Other

Operations Command Centre Liaison Nurse (OCCLN) Partnership

Innovative approach that embeds nurses in VPD Operations Command Centre (OCC) to triage and divert mental health calls

Key Roles:

- Review and divert calls to non-police responses
- Support active calls with clinical input
- Occasionally assess walk-ins at VPD HQ

Impact:

- Shifting from a patrol response to a health care response, when appropriate to do so
- Adds clinical info to improve safety and outcomes
- Flags risks like suicide, medical issues, or changes in functioning



VPD Operations Command Centre Liaison Nurse (OCCLN) 2025 Program Highlights

- OCCLN has reviewed 3365 from January July 2025
- Dashboard redesign underway:
 - Separating information-only requests from true diversion work, ensuring future reporting reflects the program's actual scope and outcomes.



VPD OCCLN Partnership – January to July, 2025

Two nurses per day working overlapping shifts from 7:30 a.m. – 6:30 p.m. and 12:00 p.m. – 11:00 p.m. seven days a week

Appropriate for 60 review by OCCLN 650 Received by VPD per day

50 Received during **OCCLN** shifts

Outside

Estimated # for in-depth review and diversion to a health-led response



Estimated # for in-depth review and return to VPD + with new information



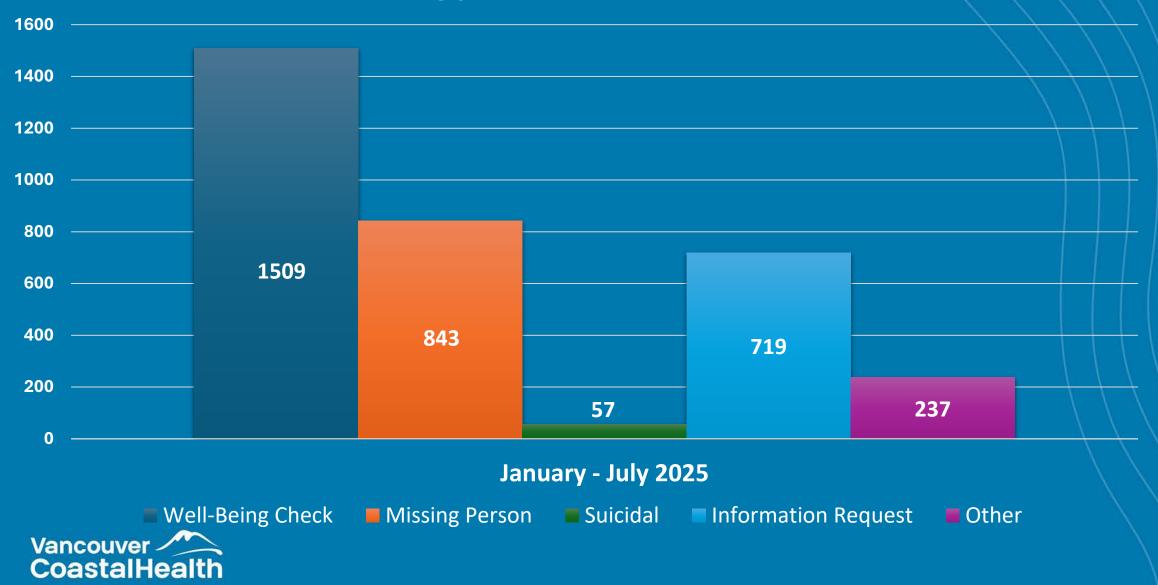


Consultation

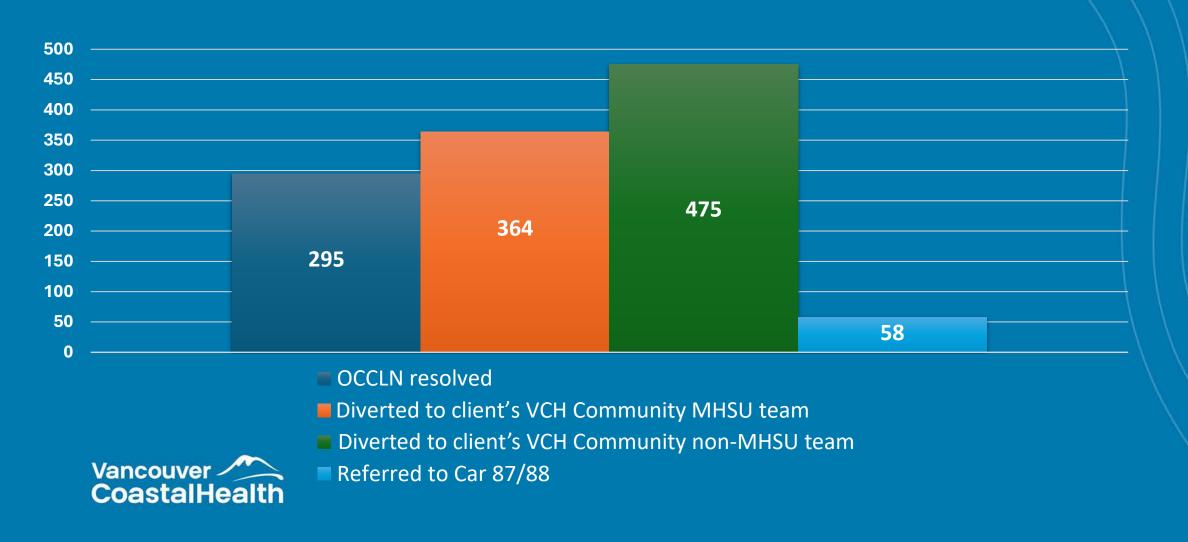


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OCCLN - Type of Call Received YTD



OCCLN – Calls Diverted to Health Care Response January to July 2025



Evaluation Overview

Independent evaluation of MoDe and Car 87/88

Completed in January 2025, data from 2024

Shared with the Urgent MHSU Service Enhancement Steering Committee in April 2025 and Council in June 2025



Summary of Evaluation: Community Impact

Mobile De-Escalation Team (MoDe):

Non-VCH community agencies:

- 40% reported MoDe made them feel safer
- 70% reported that MoDe helped to build awareness, skills, or knowledge

Car 87/88:

Non-VCH community agencies:

- 63% report Car 87/88 made them feel safer
- 95% report knowing when to call Car 87/88



Summary of Evaluation: Health System Impact

MoDe: Preventing unnecessary Emergency Department visits

- MHSU Emergency Dept visits dropped post intervention (-38%)
- Clients had increased use of community health care services post intervention
 - Primary Care (+25%)
 - Community MHSU (+29%)

Car 87/88: Connecting people to necessary services

- Increased in Emergency Department visits the first month following intervention (+38%)
- Clients had increased use of community health care services post intervention
 - Primary Care (+15%)
 - Community MHSU (+12%)



Summary of Evaluation: Diversion from Police Response

MoDe:

• In the months that followed a MoDe intervention, clients had reduced rates of referral to the Car 87/88 program (-34%)

Car 87/88:

- Clients had fewer interactions with police post intervention
 - 1 Month post intervention (-46%)
 - 6 months post intervention (-20%)



Identified Areas of Improvement

Community Awareness, Role Clarity & Resourcing

- Confusion around when to call MoDe vs. Car 87/88 or other outreach teams
- Misunderstandings about Car 87/88's mandate and MoDe's scope lead to mismatched expectations

Training & Education

Develop a standard orientation for incoming nurses and officers

Improved Data Tracking

- Challenges in managing data across systems for all teams
- Need for consistent metrics and shared tracking between MoDe and Car 87/88



Actions – Based on Evaluation Recommendations

Community Awareness	Education	Improved Data
Joint community engagement (Car 87/88,	Joint Car 87/88 and VPD Training & Orientation	Dashboards and Metrics:
MoDe and ICRT): Regular engagement	Violence prevention, harm reduction, and reducing stigma.	MoDe and Car 87/88 updated dashboards to track client interactions and
sessions to begin Fall 2025	Orientation package:	system impacts.
	The Mental Health Act, hospital admission, discharge processes, community care pathways, traumainformed practices	Car 87/88 is enhancing documentation and referral tracking



Thank you

