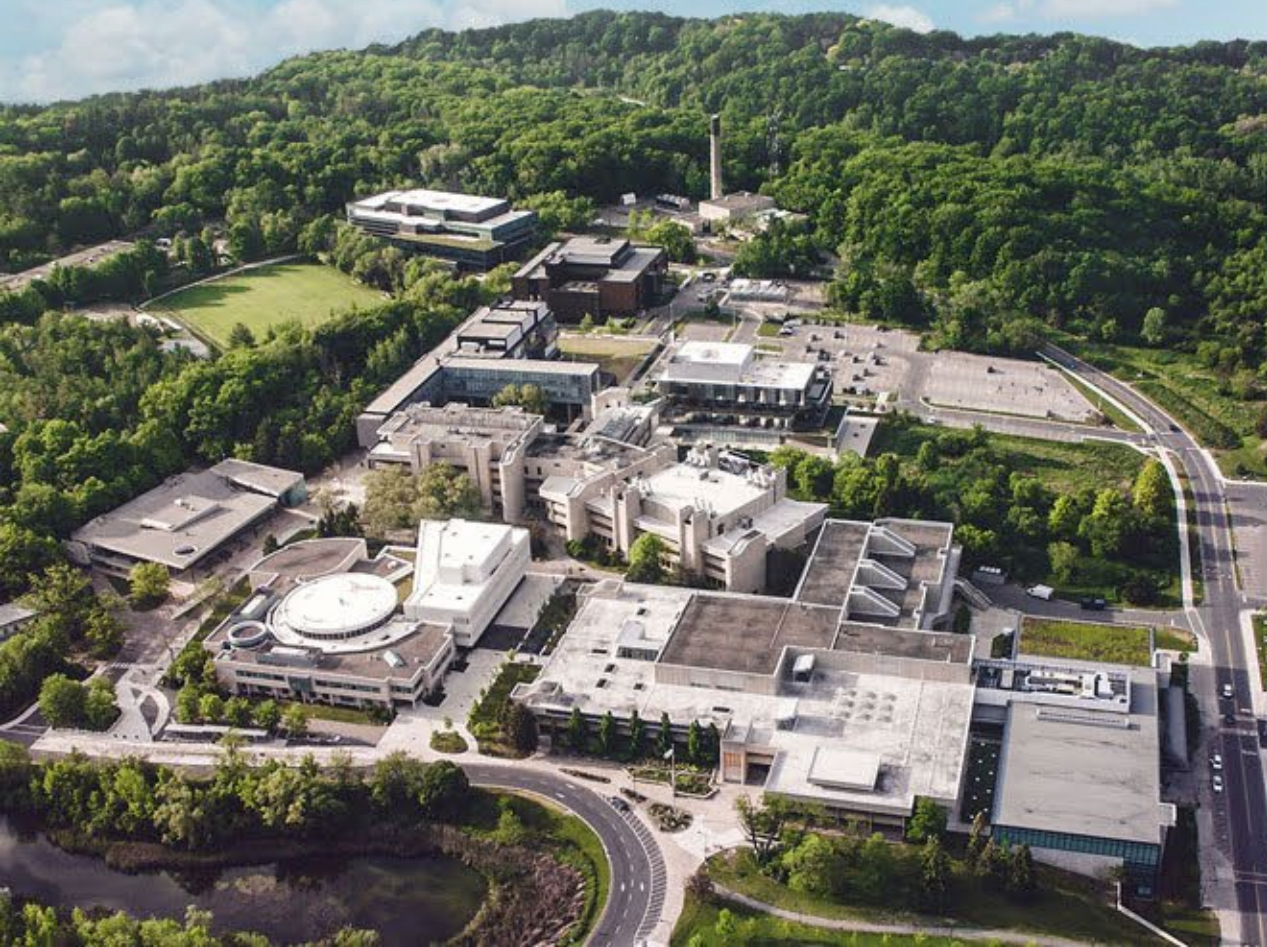**UNIVERSITY OF TORONTO** | **Student Mental Health**
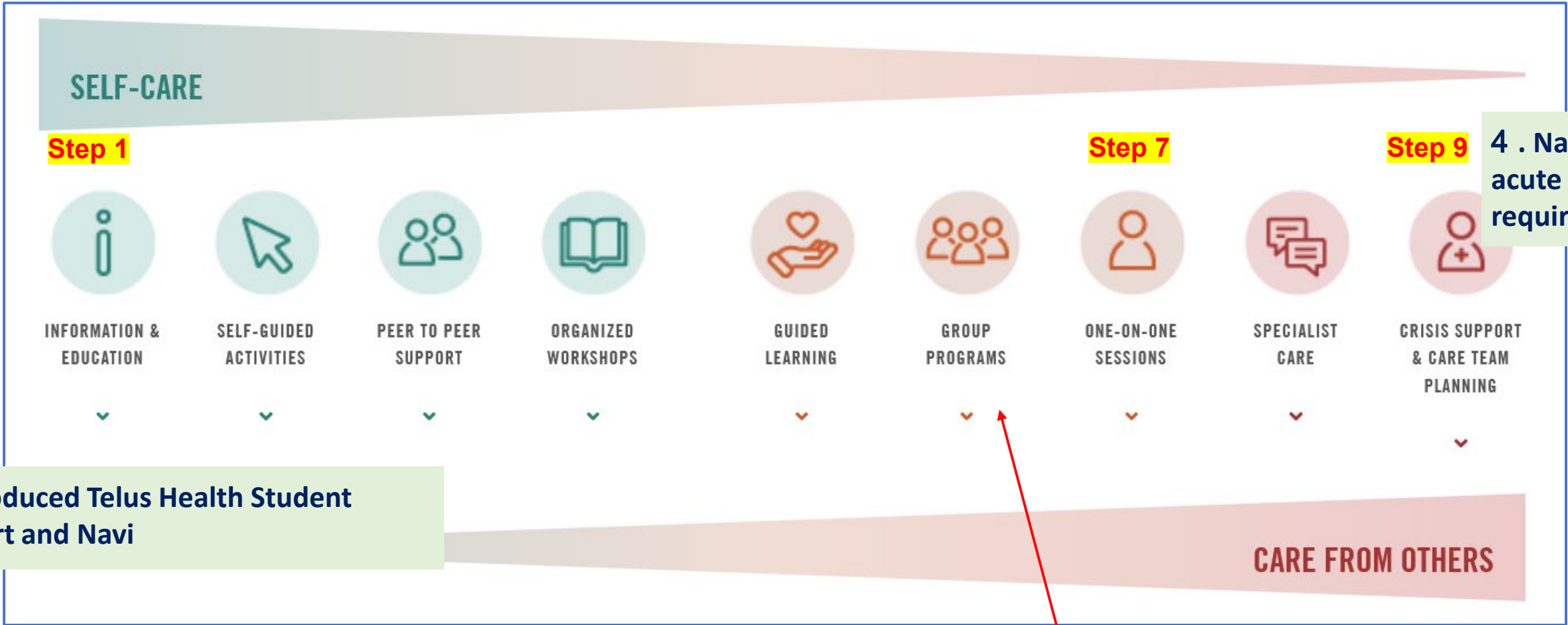Mississauga, Scarborough, St. George

DEFY GRAVITY

University Affairs Board
Mental Health Presentation

Chris Bartha Senior Executive Director
Student Mental Health
January 15, 2025

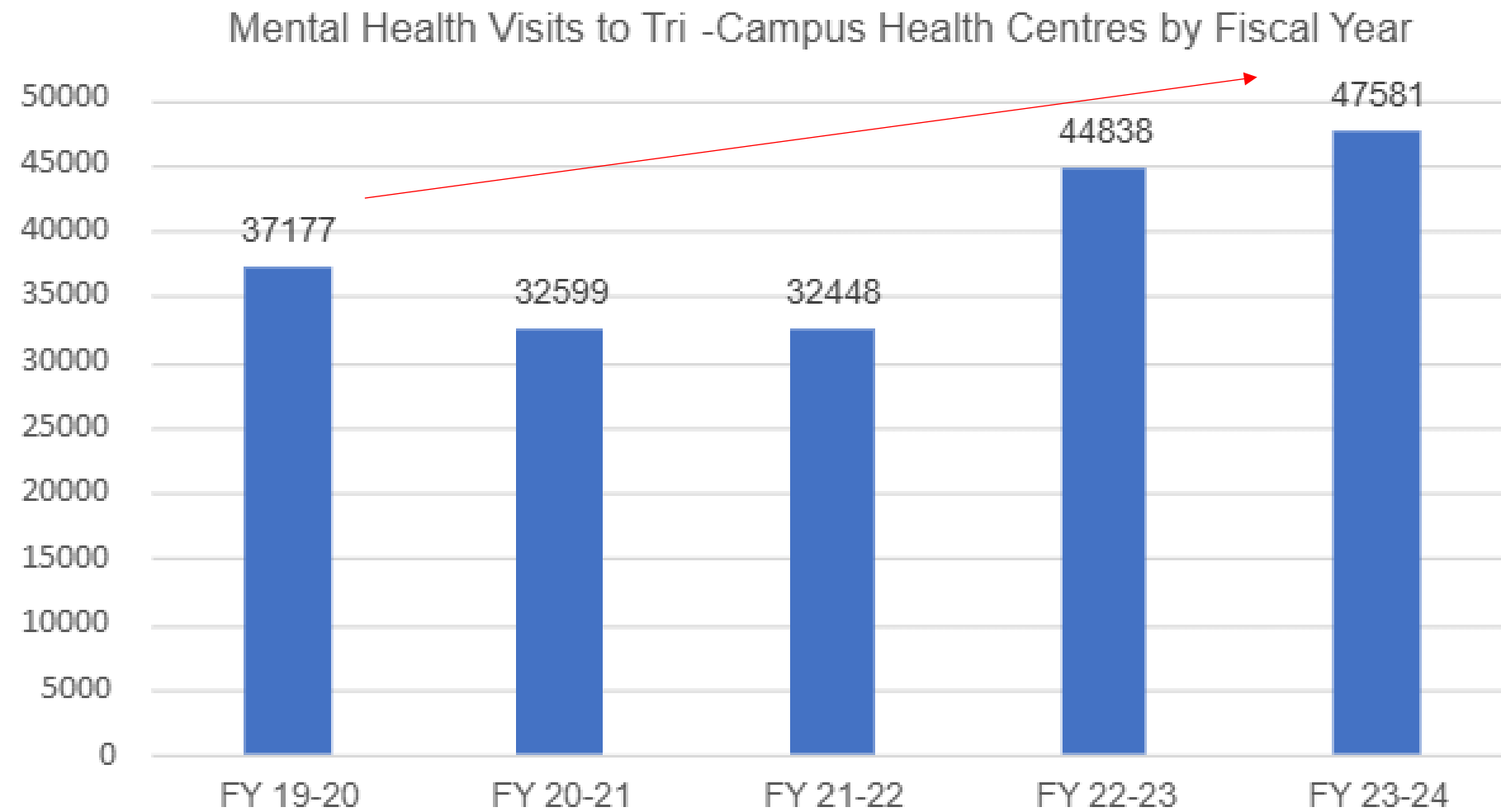# UofT Response – Tri Campus Stepped Care Model
Highlights (2020 to present)

SELF-CARE

Step 1

Step 7

Step 9

4 . Navigation Service - acute and complex care requiring hospitalization

| INFORMATION & EDUCATION | SELF-GUIDED ACTIVITIES | PEER TO PEER SUPPORT | ORGANIZED WORKSHOPS | GUIDED LEARNING | GROUP PROGRAMS | ONE-ON-ONE SESSIONS | SPECIALIST CARE | CRISIS SUPPORT & CARE TEAM PLANNING |

1. Introduced Telus Health Student Support and Navi

CARE FROM OTHERS

2. Health Centres - *NEW* OAAT counselling model
3. Electronic Medical Record (EMR) – 2021

Mental Health Commission of Canada 2021

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Mississauga, Scarborough, St. George

Impact – Access and Capacity
(Fiscal 2019-2024)

Mental Health Visits to Tri -Campus Health Centres by Fiscal Year

Fiscal Year	Visits
FY 19-20	37177
FY 20-21	32599
FY 21-22	32448
FY 22-23	44838
FY 23-24	47581

Growth in access and capacity:

- 2022-23 – 2023/24 YOY overall volumes up 6%
- Same day/next day access to counselling maintained

**estimate/data from 3 distinct systems

Key Results:

Mental Health access has improved while demand has increased

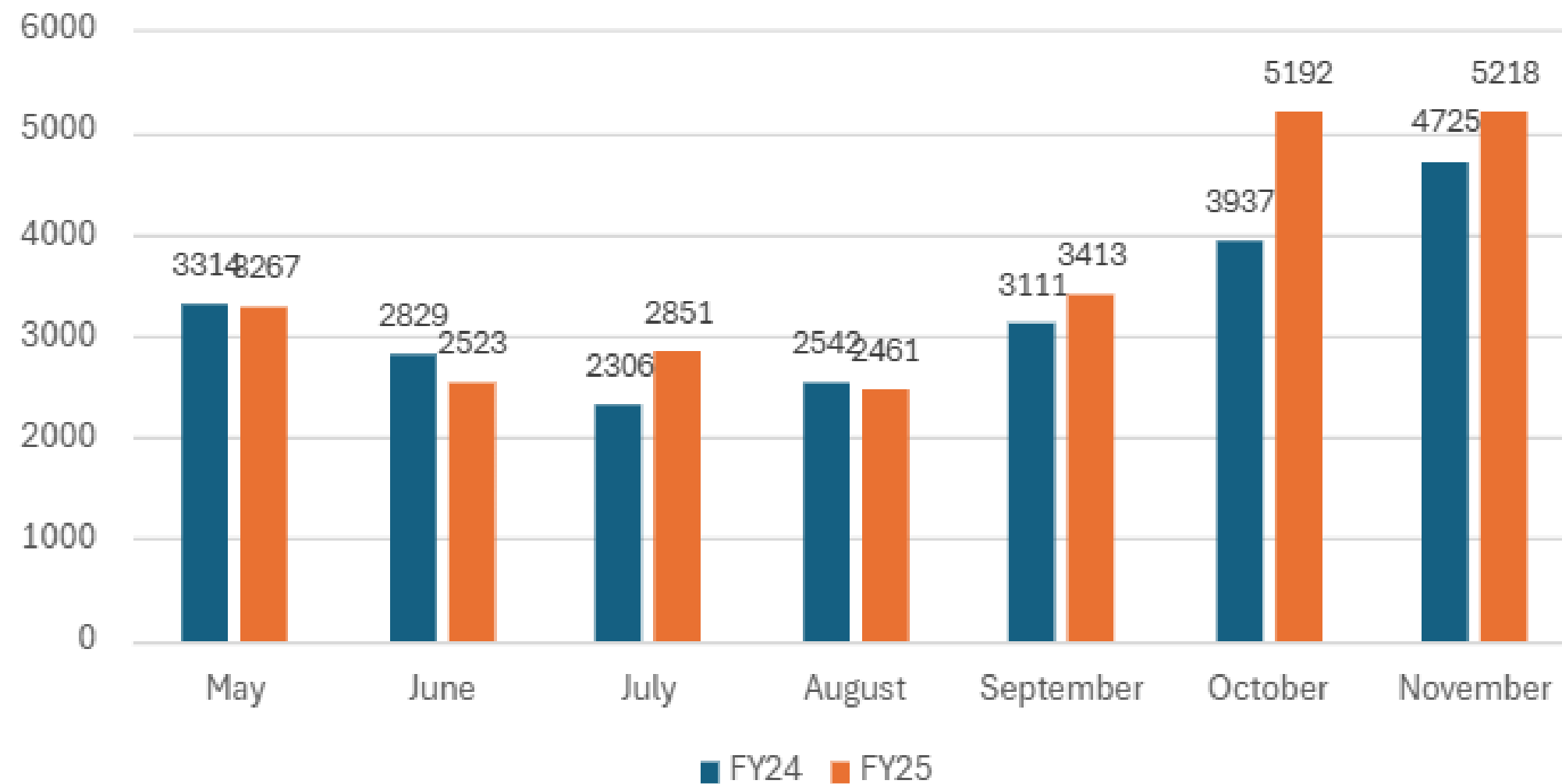Very good access to same/next day counselling has been maintained

Mental Health Data Quality Project

24/25 *NEW* baseline; improved capacity to drill into detail with reliable results

Foundational evaluation initiatives established

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Health Centre Total Mental Health Visits
(Single Session "OAATS", Psychiatry, GP/RN, Short Term & Group Counselling)

YOY Mental Health Visit Data

Chart data (FY24 / FY25):
- May: 3314 / 3267
- June: 2829 / 2523
- July: 2306 / 2851
- August: 2542 / 2461
- September: 3111 / 3413
- October: 3937 / 5192
- November: 4725 / 5218

Legend: FY24, FY25

Key Results:

New data set implemented in May 2024 capturing more mental health activity

Single Session – OAATs model well utilized

Access counselling:

2024/25 YTD ~ 90% requests booked same/next day

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NAVI Mental Health Data

New Bot & Added Promotion

NAVI Conversations with MH intents Tricampus

- FY 20/21: 6909
- FY 21/22: 7141
- FY 22/23: 6595
- FY 23/24: 9119
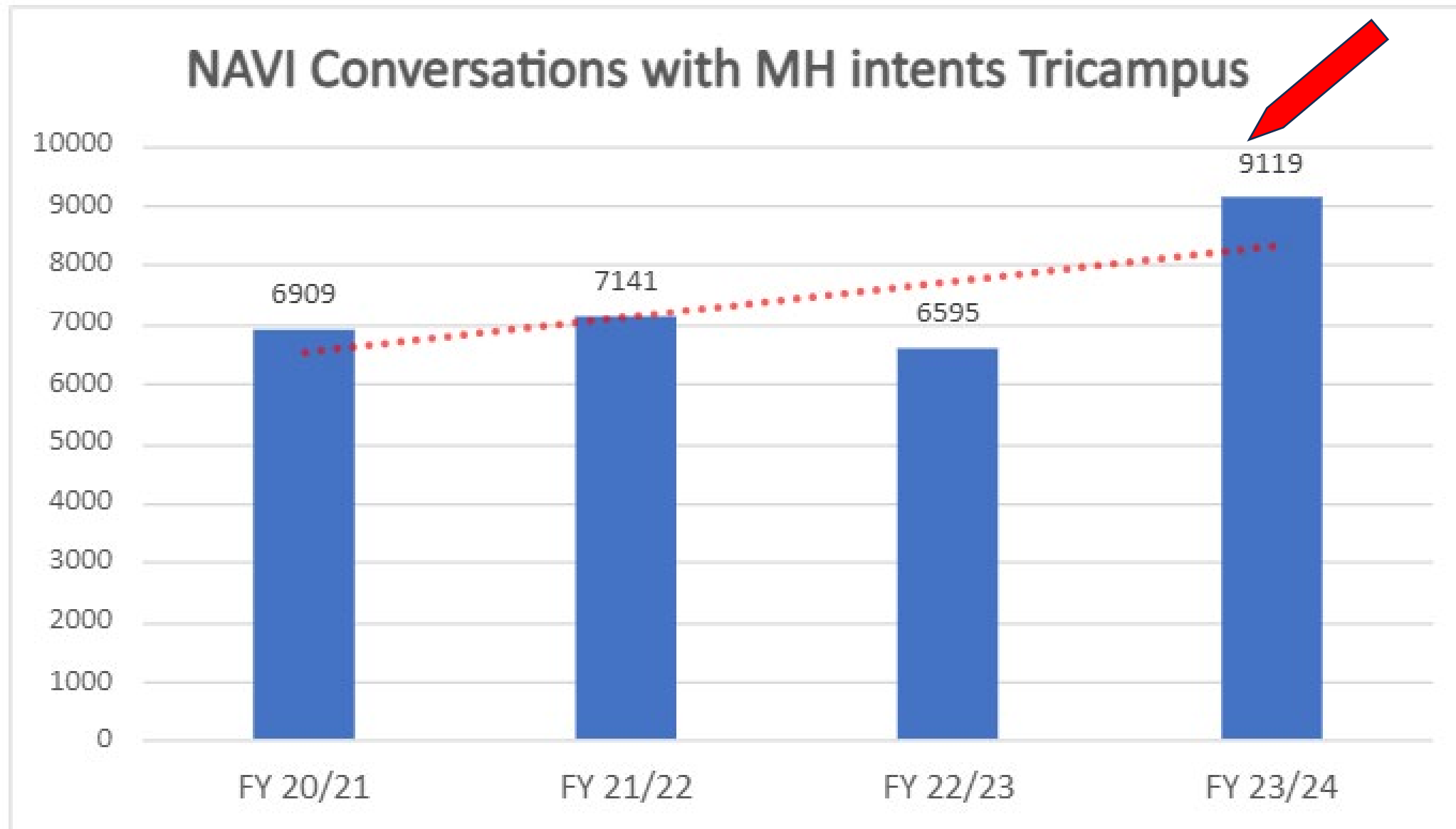
Key Results:

- In August 2023, **NAVI expanded to a general FAQ** chatbot; mental health activity now only represents part of overall utilization

- Increase in conversations (FY 23/24) likely due to added promotion of expanded chatbot capabilities

- Top 4 mental health topics 23/24
  - "talk to someone"
  - "definitions"
  - Healthcare access
  - Mental Health General

TELUS Health Student Support (THSS) Utilization

TELUS Health Student Support Counselling

Year	Value
FY 20/21	6408
FY 21/22	7085
FY 22/23	6498
FY 23/24	4712
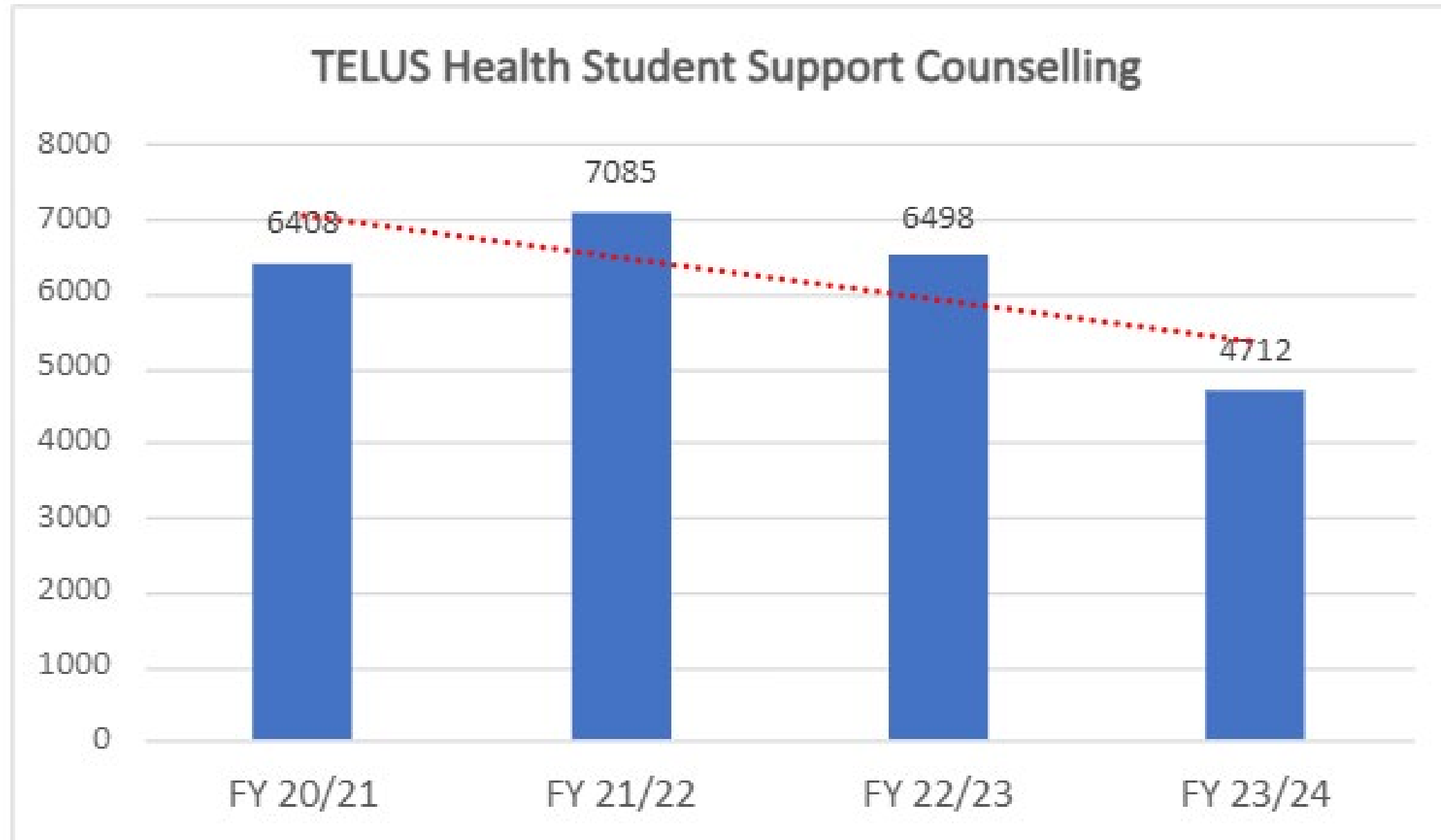
Key Results:

- Counselling data - online chat sessions, real time or prebooked phone counselling

- Phone counselling - 90% of student utilization; average 4 sessions per student

- 74% of utilization between 1 pm to midnight

- 45% of users are international students

- 24/25 use is increasing

Additional services include:

✓ THSS will arrange *in person* counselling

✓ Offer real time staff and faculty support

✓ Training in suicide prevention: safeTALK, Mental Health First Aid, ASSIST

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6

Mental Health Data Management Strategy
Goals: **Improve Data Quality – Enable Evaluation**

Data Strategy built around a Best Practices Framework

1. Privacy and reports: all data de-identified, anonymized, aggregated

2. Storage: centrally within secure EMR, REDCap

3. Analysis: standardized, transparent methodology

2024/25 Results – *NEW* tri-campus baseline year – more reliable and accurate

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Student Mental Health Project Updates

1. **Experience:** Perception of Mental Health Care Survey 2022, 2024

2. **Outcomes**: Single Session/OAATS Counselling and Measurement Based Care - 2024

3. **Outcomes**: CAMH-University of Toronto Navigation Service (2022-2024)

Student Experience
Student Perception of Mental Health Care Survey
Biannual Repeated Cross -Sectional Survey

Survey 1.0 – **Pilot Conducted November 2022; N=512 students (6%)**

Overall *good* results: most responses 4/5

Key opportunities for improvement:

1. Address phone queues during peak demand months (March, November)

2. Availability of 2SLGBTQAI+ counsellors

3. Communicate value of single session "OAAT" model & evaluate its effectiveness

Survey 2.0 - **November/December 2024**

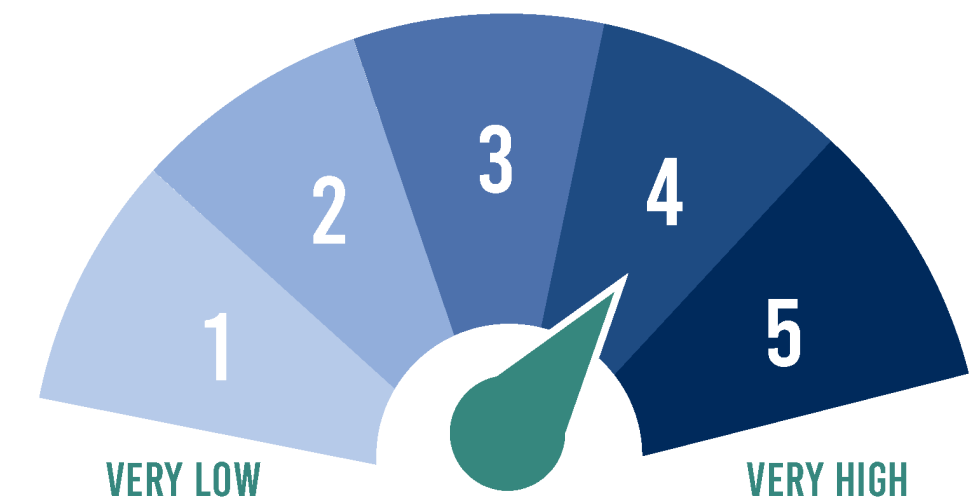Consulted with students re survey design, engagement

Improved outreach and communications

NEW **response rate - 13 to 15%**

YOU SPOKE, WE'RE LISTENING...

In November 2022, the three campus health centres collaborated to survey students who visited any campus health centre for mental health reasons.

Satisfaction with Mental Health Care on Campus

VERY LOW   VERY HIGH

Most people rated **most** questions 4 out of 5.

Responses gathered from more than 500 students were positive.

THERE'S STILL ROOM FOR IMPROVEMENT.
Students reported lower satisfaction with some visit types.
Some groups of students were more satisfied than others.

HERE'S WHAT WE'RE PLANNING:
1. Reduce phone waiting times.
2. Improve virtual care experiences.
3. Engage diverse student groups to help create inclusive spaces.

To access the full results of the survey, find out what's next and how you can be involved:

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**Student Outcomes
Single Session Counselling
"OAATs"**

Repeated measure feasibility study of Measurement Based Care & OAAT outcomes

Co-designed process and selection of tools with students & clinical staff

Adopted relevant pre-post session outcome measures endorsed by students, literature

Two adapted questionnaires completed by students:

Measures of **emotions & distress**

Measures of **session outcomes**

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Single Session/OAAT Evaluation Phase 1 (July-August 2024): Results demonstrated *significant* positive change in emotions and distress

Emotions and Distress:

Emotions at time of session

Pre to Post OAAT session self assessment

Score of 5.9 declined to 3.7

Immediate significant reduction

n= 212 2.2 difference (p<.001)

Psychological Distress
(Kessler 6 item questionnaire)

Pre session to 2 weeks post session

Score of 13.2 declined to 10.6

Significant reduction maintained

n= 137 2.6 difference (p<.001)

Session Outcomes:

77% agreed that today's appointment mostly or very much helped them develop next steps or gain new understanding to address their problem (n=323)

Students overwhelmingly "**felt listened to**"
n=318 average score – 2.6/3

Two weeks post appointment – mean score on **goal attainment** 6/10 (n=152)

Table 1: Means and SDs of the K-6 items and total score.

(Kessler Psychological Distress Scale) Item	Mean	SD
Nervous	1.68	1
Hopeless	1.61	1.2
Restless or Fidgety	1.63	1.1
Depression	1.46	1.2
Everything was an effort	1.82	1.2
Worthless	1.17	1.3
Total score	**9.39**	**5.5**

Table 2: Descriptive statistics for the scales.

Scales	Mean	SD	Cronbach's α
Kessler Psychological Distress Scale-6	9.39	5.48	0.87
SCL-90-R subscales			
Anxiety (ANX)	5	4.16	0.89
Depression (DEP)	15.81	12.17	0.91

Management of Acute Mental Health Concerns

U of T Navigation Service (UTN) @ CAMH

Two CAMH clinicians **–** support U of T students transitioning from Emergency Dept & inpatient units to campus/community

Collaborate with Health Centres, Registrar, Accessibility, International Office, many other university teams to support students.

Inlight & CAMH - Evaluation & Research: 2023/24

1.   ~500 visits seen in CAMH ED annually
2.   ~90% of students engaged with UTN did not return to ED within 6 months

Next Steps:

Build similar models for UTSC and UTM with local hospitals

Share findings: host progress updates via *Inlight* dedicated page

U of T Mental Health Strategy – Key Takeaways

Successes

1. Access to care and services has improved
2. Data Quality has improved
3. Hospital partnerships underway
4. Evaluation initiatives have been launched

    Student engagement/co-design

    Tri campus collaboration

5. **Positive student feedback** re services but still find navigation of resources difficult

Opportunities

1. Improve on-line communications, simplify information across websites
2. Improve services for specific populations:

- International students
- 2SLGBTQAI+ students
- *Students with Concurrent Mental Health and Learning/accessibility concerns*

New Provostial Priority: Concurrent Mental Health & Accessibility: Improving support and outcomes for students

NEW INTEGRATED SERVICE FOR:
Students with or suspected to have both complex mental health and accessibility related conditions (e.g. Depression & ADHD)

camh
mental health is health

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Mental Health Team
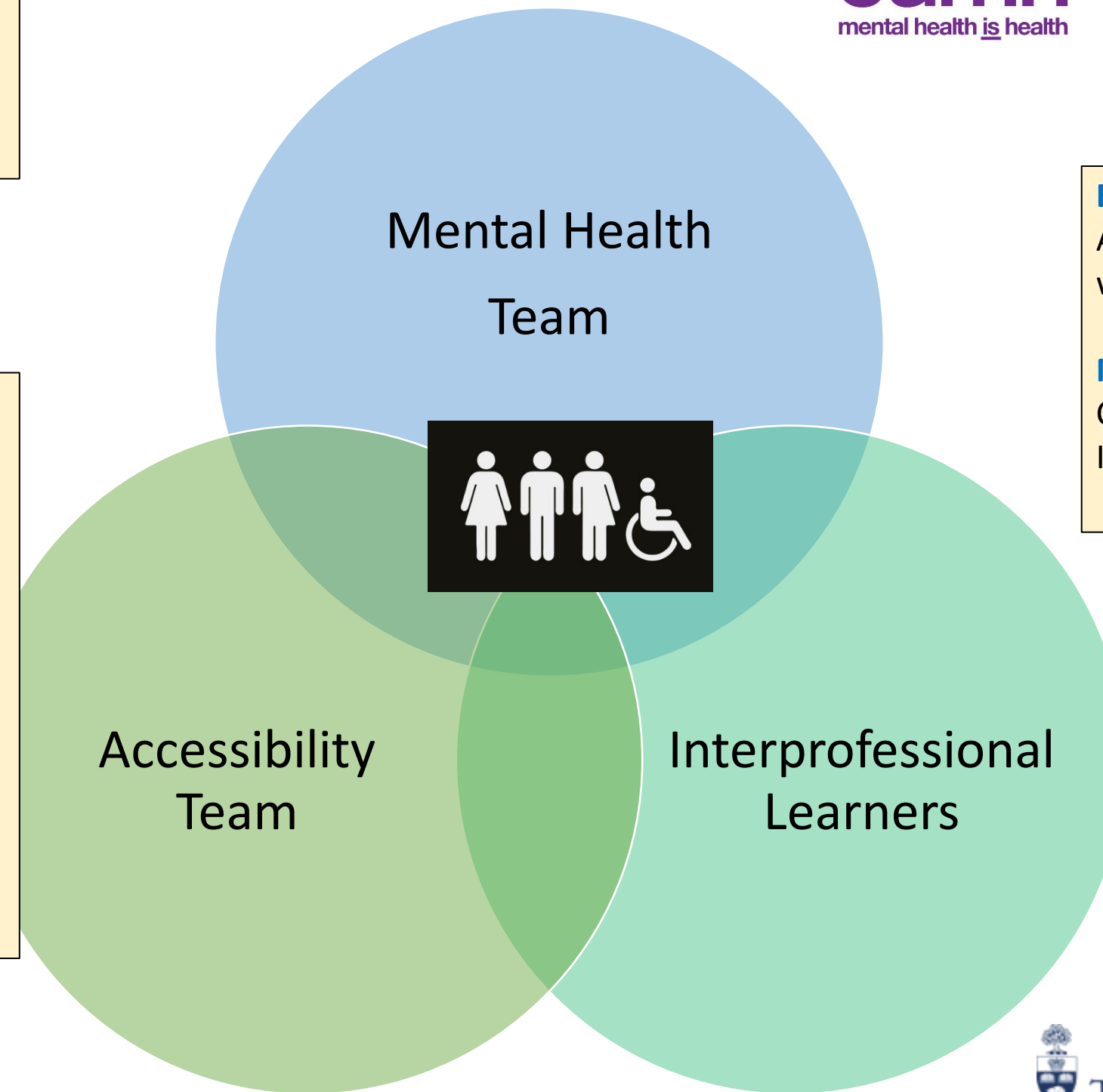
BUILD SYSTEM CAPACITY
An integrated service/learning environment with inter-professional learners

MEASURE AND EVALUATE
Collect data across service continuum
Integrate Measurement

BUILD ON PARTNERSHIPS:
U of T & CAMH
UTSG - Health and Wellness & Accessibility Services (launch site)

GOALS:
1. Improve student access
2. Improve end to end clinical workflow
3. Improve implementation of recommendations with faculty

Accessibility Team

Interprofessional Learners

WORKPLAN NOW UNDERWAY
Joint Model Service Pathway Development
Staff and MD engagement
Space, scheduling, logistics
Communication plan

PHASE 1 - UTSG Soft Launch July 1, 2025

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Questions and Discussion