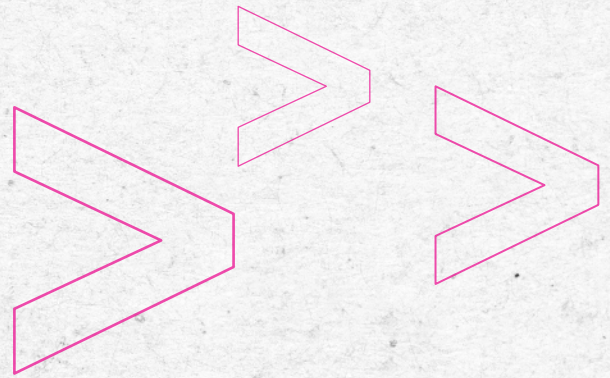


# NavMAP Standards

Guidance for Youth Mental Health  
and Addictions Navigation Services  
across Canada



Family  
Na>igation  
Project

at Sunnybrook



**Sunnybrook**

HURVITZ BRAIN SCIENCES PROGRAM

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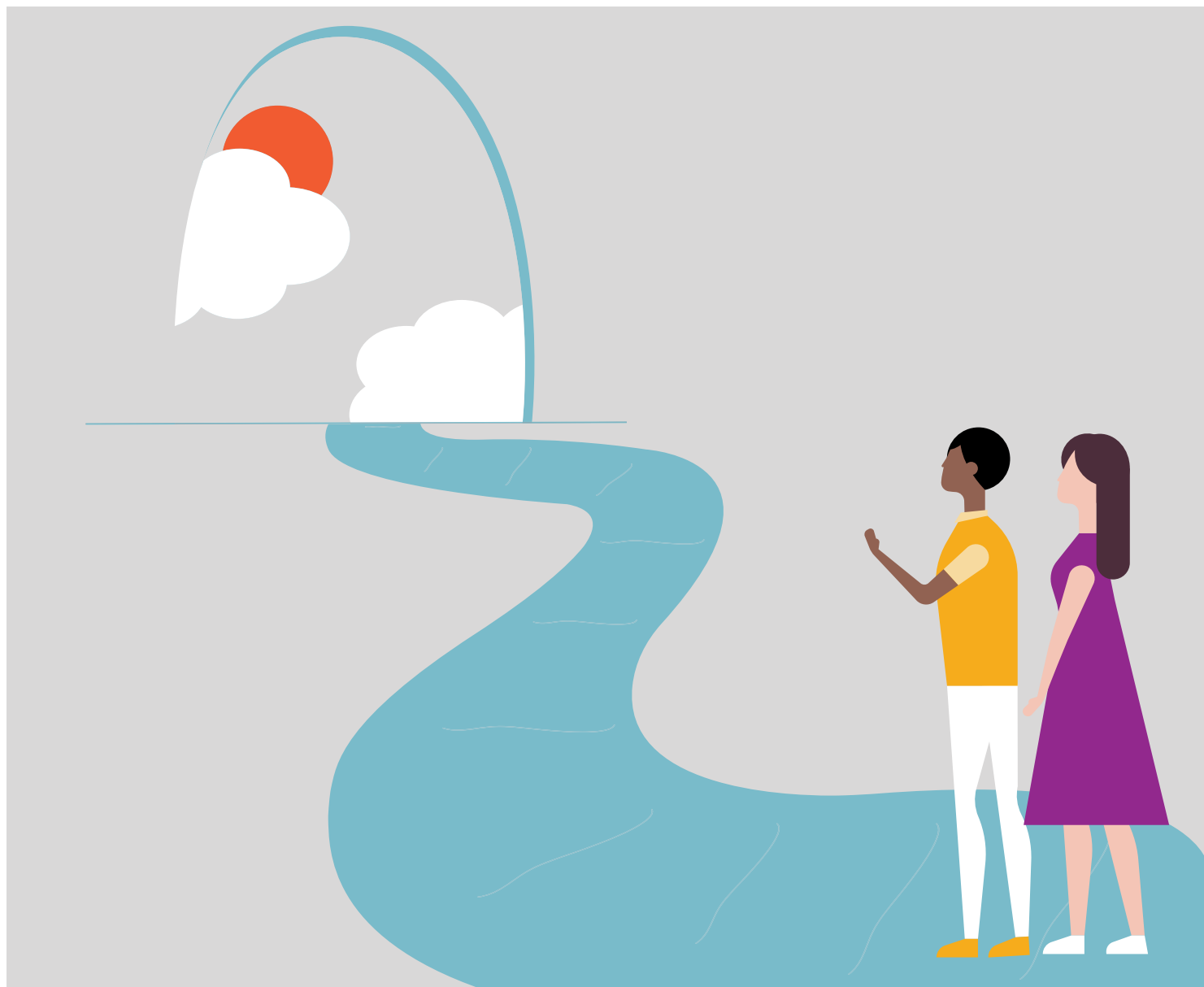
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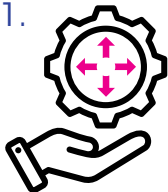
# Executive Summary


Youth mental health and/or addictions (MHA) navigation programs are emerging across Canada. These programs are an important way to help youth with MHA concerns and their families overcome barriers to care and ensure continuity of care. Currently, navigation program practices and models vary. This document synthesizes existing evidence and practices into standards. These standards can guide navigation program practices and promote consistency. Evidence (including published academic papers and web sources) was extensively reviewed and dozens of youth MHA navigation programs across Canada were interviewed to develop these standards. National community consultations were also conducted which included community members interested in this topic.

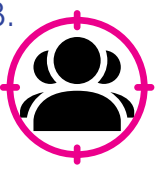
This document discusses the context (why and how these standards were developed), application/usage, and description of the standards. These standards are a voluntary resource and are intended to guide MHA navigation programs across Canada. Each navigation program is unique and their use of these standards will depend on the scope, local context, capacity, and other qualities of the navigation program.




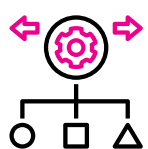
# Summary of Standards

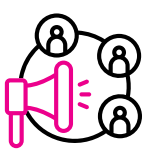
- **1. Service Delivery**


Navigation program determines and communicates service hours, catchment area, eligibility criteria, method of referral, caseload, duration of support, modality of support, consent process, privacy and confidentiality process, elements of the navigation process, types of support provided as a complement to navigation, and waitlists.
- **2. Navigation Team Composition and Credentials**


Navigation program includes a multidisciplinary team with relevant credentials and offers program staff with onboarding training and opportunities to engage in community for learning.
- **3. Needs of Target Population**


Navigation program understands its local context and addresses individual and systemic needs, barriers, and gaps.
- **4. Elements of Access to MHA Care**

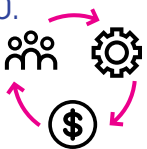
Navigation program enhances access to the program for current and potential clients by using different strategies and improves access to the MHA system by addressing barriers to care.
- **5. System Resource Options**

Navigation program helps clients navigate the MHA system and/or any system needed. Navigation program maintains a database and/or file system with specific and relevant information about services in the community.
- **6. Lived Experience and Outreach**

Navigation program values lived experience by actively promoting youth and family-centeredness, offering peer support, implementing and engaging with advisory councils, and spreading awareness about MHA and the MHA system in general.
- **7. Community Collaboration**

Navigation program identifies, builds, and maintains relationships with community services and service providers.
- **8. Equity, Diversity, Inclusion, and Health Equity**

Navigation program adopts and regularly reviews policies and practices that meaningfully promote equity, diversity, inclusion, and accessibility among program staff and youth/families.
- **9. Outcomes**

Navigation program gathers feedback from clients, community members, and service providers to determine the impact and effectiveness of the program. Feedback results are used to inform changes within the program.
- **10. Sustainability**

Navigation program makes efforts to secure and sustain funding for the program.

# Introduction

Less than 20% of children and youth with mental health and/or addictions (MHA) concerns in Canada receive appropriate MHA treatment. Many adults trace the onset of MHA concerns back to their youth. Early intervention is needed to reduce burden and ensure ideal wellbeing. However, youth with MHA concerns and their families face many barriers when accessing and transitioning through youth MHA services. This can cause interruptions in care and prevent youth and families from engaging in care. A coordinated solution is needed to help youth with MHA concerns and their families access and transition through the MHA system.

Navigation services are one way of enhancing service access and continuity. Navigation programs are emerging across Canada to support patients in finding their way through complex care systems, and overcome barriers to care. Presently, youth MHA navigation programs across Canada vary in their models, practices, and approaches. These standards will promote consistency, set expectations, and guide policies and practices within these programs. The scope of these standards include navigation programs located in Canada and serving youth with MHA concerns and/or their families. These standards can be used by youth and families, to inform their understanding and expectations of navigation services; navigation program staff, to inform their practices; and decision makers, to inform development, implementation, and delivery of new and existing youth MHA navigation services.



# Methodology

## Defining the scope



The project team and individuals across Canada (including ones with interest in youth MHA navigation, individuals with lived experience, service providers, and decision makers) were consulted to help determine the scope of the standards. As a result, the guiding review question, a search strategy, and a data extraction template were developed.

## Searching for evidence



With the support of a librarian, academic (e.g., published academic papers on Medline) and grey literature (e.g., web sources such as program websites, job postings, etc.) were reviewed. Youth MHA navigation programs across Canada were identified and interviewed.

## Appraising studies and extracting data



A quality assessment rubric was utilized to determine the quality of available literature. Data from literature sources and interviews was extracted.

## Synthesizing evidence and developing conclusions



The NavMAP standards were generated after the information was analyzed and synthesized.

## External consultation and disseminating findings



The standards were posted online for public comment and a national community consultation was held to gather feedback. The standards were revised based on feedback from these activities and finalized for posting.

# How to Use the Standards

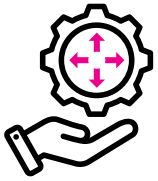
These standards aim to ensure quality navigation services. Implementation of these standards will differ based on various factors, such as the scope of the navigation program, local needs and barriers, organizational policies and practices, etc. Navigation programs can identify the ways in which the standards apply to the program and associated strengths, weaknesses, and opportunities.

Given that youth MHA navigation practices vary and these programs are emerging across Canada, adhering to standards can promote consistency, guide current and future navigation programs, inform policies and procedures, improve quality, and help sustain and scale navigation programs. They can connect with other youth MHA navigation programs and/or navigation programs in other areas of healthcare, to mutually learn about and share their practices. Programs can also monitor, review, and revise processes to enhance their services. Navigation programs can also consider going beyond these standards to enhance the quality of the program.

## Standards

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## Service Delivery

Navigation program determines and communicates service hours, catchment area, eligibility criteria, method of referral, caseload, duration of support, modality of support, consent process, privacy and confidentiality process, elements of the navigation process, types of support provided as a complement to navigation, and waitlists.

### 1. *Service hours*

- 1.1 Maintain service hours based on the needs of clients (e.g., regular business hours on weekdays and/or provide service in the evenings, on weekends, and/or 24/7 to allow clients to reach out after work or school).

### 2. *Catchment Area*

- 2.1 Clearly identify catchment area, and support clients within a specific jurisdiction (e.g., town, region, province, etc.).
- 2.2 Provide brief, limited, or partial navigation support to clients outside the catchment area.

### 3. *Eligibility criteria*

- 3.1 Determine and communicate age requirements, diagnosis requirements, types of clients, and other eligibility criteria, if any.
- 3.2 Limit or exclude eligibility criteria to minimize barriers to accessing the program.

### 4. *Method of referral*

- 4.1 Accept self-referrals and/or referrals from service providers.
- 4.2 Accept referrals through program referral forms and/or via phone calls, emails, and/or appointment booking systems.
- 4.3 Make and accept referrals to and from other navigation programs as determined by client eligibility.

### 5. *Caseload*

- 5.1 Maintain a manageable caseload, determined by the mandate of the program, and by guidance from program administration.

### 6. *Duration of support*

- 6.1 Support clients for a specific period of time and/or as long as needed, depending on the mandate of the program and/or the needs and goals of the clients.

### 7. *Modality of support*

- 7.1 Offer to connect with clients in-person and/or virtually.

### 8. *Communication*

- 8.1 Use different methods to communicate with clients and/or providers in client's circle of care. Communication methods may include phone, email, text, video conferencing platforms, and/or in-person at the office/client's home/in the community.

### 9. *Frameworks used*

- 9.1 Use different frameworks to guide, support, and build rapport with clients (e.g., trauma-informed approaches, strengths-based approaches, and/or anti-oppressive approaches).

### 10. *Waitlist*

- 10.1 Maintain a waitlist if navigators are unable to accommodate additional clients.
- 10.2 Implement initiatives to avoid exceeding appropriate caseloads if the program does not maintain a waitlist.
- 10.3 Offer alternative resources, preferably ones without a waitlist, to clients on the program's waitlist.
- 10.4 Triage and/or manage waitlist based on the needs of the clients.

## 11. Support provided

- 11.1 Provide additional support (e.g., peer support, group support, and/or workshops to build skills, learn, communicate, etc.) while clients are supported by the navigators.

## 12. Consent

- 12.1 Connect with the client to obtain consent and inform and review the consent process. Discuss age of consent and family involvement, especially if a family member reaches out on behalf of a youth.
- 12.2 Enable clients to provide consent in different ways (e.g., verbal consent, written consent, using consent forms, and/or obtaining consent through referral forms).
- 12.3 Obtain consent according to the organizations and/or regulatory bodies' consent policies and procedures. Navigators can obtain consent to:
  - 12.3.1 initiate and continue the navigation service
  - 12.3.2 communicate via email, text, and/or other virtual formats
  - 12.3.3 make referrals, provide, and/or obtain information to community services/service providers on behalf of clients
  - 12.3.4 advocate for clients
  - 12.3.5 involve minors as clients (dependent on local age-based laws, regulations and/or guidelines on consent).

## 13. Privacy and Confidentiality

- 13.1 Adhere to organizational and/or regulatory bodies' privacy and confidentiality policies and procedures.
- 13.2 Share the following information with clients:
  - 13.2.1 what to expect in the navigation process
  - 13.2.2 limits of confidentiality
  - 13.2.3 the process of sharing, collecting, and using information
  - 13.2.4 how to obtain copies of personal health information that resides with the navigation program
  - 13.2.5 cancellation/revoking consent process
  - 13.2.6 what information is needed and why.
- 13.3 Create plans to manage risk of an inadvertent privacy breach and ensure client privacy/confidentiality.
- 13.4 Store, access, and discuss information according to policy and on a need-to-know basis.
- 13.5 Consent materials contain clear information about privacy and confidentiality.

## 14. Elements of Navigation Process

### 14.1 Intake and assessments:

- 14.1.1 Contact clients as quickly as possible.
- 14.1.2 Conduct comprehensive and relevant assessments, including risk assessments, in a timely and person-centered manner.

### 14.2 Collecting and providing information about resources:

- 14.2.1 Consult with navigation program staff, online resources, and community service providers to obtain information on available services for clients.
- 14.2.2 Identify resource options that meet the needs of clients and present these options in a thoughtful way, taking into account the needs, limitations, and strengths of the client.
- 14.2.3 Offer clients alternative options if they need to wait to connect with their preferred resource option. Emergency services also offered to clients if needed.

### 14.3 Supporting clients:

- 14.3.1 Create plans, educate, empower, advocate, offer strategies, and collaborate with clients throughout the navigation process.
- 14.3.2 Help clients navigate and connect to services (e.g., attending services with clients; completing referral forms; conducting warm transfers).
- 14.3.3 Address additional needs related to social determinants of health (e.g., financial needs, social and community needs, food insecurity, and geographical limitations).

### 14.4 Completing navigation:

- 14.4.1 Remain flexible and provide follow-up support (e.g., after connection to a service, after navigation process is complete, if clients are waiting to receive service, etc.). Follow-up support may include asking clients about the service being received and/or encouraging client to reconnect with the navigation program, as needed.
- 14.4.2 Determine if the match was appropriate and offer alternative suggestions and connections to services if needed.
- 14.4.3 Offer clients opportunities to participate in navigation program research, evaluation, and/or quality improvement initiatives.



## Navigation Team Composition and Credentials

Navigation program includes a multidisciplinary team with relevant credentials and offers program staff with onboarding training and opportunities to engage in community for learning.

### 1. Team composition

- 1.1 Include various professionals (e.g., navigators, intake workers, peer supporters, managers, and other service providers (such as psychiatrists, psychotherapists, youth outreach workers, etc.).

### 2. Navigator credentials

- 2.1 Ideally have a minimum of a post-secondary education in a relevant discipline (e.g., Social Worker, Social Service Workers, Registered Nurse, Occupational Therapists, etc.).
- 2.2 Navigators offering peer support have lived experience of navigating the MHA system, with or without post-secondary education.

### 3. Staff training

- 3.1 Navigation program staff complete onboarding training and in-house trainings tailored to the local context to help them get acclimated to the new organization and role. Onboarding training can include trainings about privacy, confidentiality, databases, and health and safety policies along with shadowing other navigators and/or colleagues, and/or any other training relevant to the needs of the program and community.
- 3.2 Navigation program staff attend trainings in the community that contribute to their ongoing professional development (e.g., therapeutic modalities, crisis intervention, EDI, etc.).
- 3.3 If the navigation program is newly developed, utilize educational background, professional experiences, and/or personal experiences to develop the navigation role and support clients.
- 3.4 Navigators learn from and consult with staff at other navigation programs.
- 3.5 Navigation program staff familiarize themselves with services in the community and the MHA system (e.g., by networking with key service providers, learning about the client's support system, learning about how community services operate, etc.).



## Needs of Target Population

Navigation program understands its local context and addresses individual and systemic needs, barriers, and gaps.

### 1. Gathering client information and assessing needs

- 1.1 Collect information when initially connecting with clients and throughout the navigation process.
- 1.2 Conduct a comprehensive assessment and collect information about client needs:
  - 1.2.1 Consent
  - 1.2.2 Eligibility criteria
  - 1.2.3 Demographics
  - 1.2.4 History
  - 1.2.5 Presenting concerns
  - 1.2.6 Goals and needs
  - 1.2.7 Mental health and/or addictions concerns
  - 1.2.8 Current supports
  - 1.2.9 Family functioning/situation
  - 1.2.10 Determinants of health (personal, social, economic, and environmental factors)
  - 1.2.11 Risk screening (e.g., suicide risk assessments, substance use risk assessment, etc.).

### 2. Local needs/barriers/gaps

- 2.1 Assess for and address the following needs, barriers, and gaps:
  - 2.1.1 Individual needs, including:
    - 2.1.1.1 Newcomer needs
    - 2.1.1.2 Increasing MHA needs/challenges
    - 2.1.1.3 Educational/vocational needs
    - 2.1.1.4 Circumstances in the home
    - 2.1.1.5 Language/literacy needs
    - 2.1.1.6 Financial needs
    - 2.1.1.7 Transportation needs
    - 2.1.1.8 Technology needs
    - 2.1.1.9 Knowledge about MHA navigation
    - 2.1.1.10 Stigma.
  - 2.1.2 Systemic barriers, including:
    - 2.1.2.1 Geographic barriers
    - 2.1.2.2 Need for access to physician care
    - 2.1.2.3 Need for MHA-specific services and supports
    - 2.1.2.4 Need for consistency in care
    - 2.1.2.5 Lengthy waitlists
    - 2.1.2.6 Need for housing
    - 2.1.2.7 Need for access to and understanding of MHA services/system (e.g., services hours conflicting with work/school, unclear information, etc.)
    - 2.1.2.8 Barriers that limit the engagement of youth/families (e.g., consent laws, lack of time/resources, etc.)
    - 2.1.2.9 Need for funding.



## Elements of Access to MHA Care

Navigation program enhances access to the program for current and potential clients by using different strategies and improves access to the MHA system by addressing barriers to care.

### 1. Outreach into the Target Population

- 1.1 Use various outreach methods (e.g., conduct presentations, distribute posters/brochures, word of mouth, newsletters, social media promotion, and workshops) to inform youth and families about the program.
- 1.2 Adopt a person-centered approach and conducts outreach in settings where youth and families are naturally present, (e.g., community services and events, schools, youth hubs, etc.).
- 1.3 Provide contact information (e.g., email, website, and phone number) to address questions about the program.

### 2. Access to Navigation Services

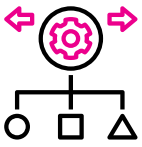
- 2.1 Identify the different and/or common ways clients learn about and access the program (e.g., asking clients during intake and/or through surveys).

### 3. Access Issues Addressed in the Mental Health system

- 3.1 Address barriers to access by using individualized and person-centered approaches, comprehensive assessments (e.g., needs, strengths, biopsychosocial, etc.), referrals, warm hand offs, psychoeducation, advocacy, liaising, and follow-ups.
- 3.2 Collaborate with equity-deserving communities to understand and address their needs by implementing equitable, diverse, inclusive, and accessible policies and practices.
- 3.3 Address social determinants of health through different strategies (e.g., partner with community services and advocate on behalf of or with clients for additional funding, affordable housing, accessible services, etc.).
- 3.4 Offer clients opportunities to voice their opinions and obtain support from individuals with lived experience (e.g., peer support and opportunities to be part of advisory councils).
- 3.5 Co-design the program with youth, families, and service providers to address barriers hindering access to and through the mental health system.

### 4. Technology

- 4.1 Utilize appropriate technology tools and resources to improve access to the program (e.g., online resources, chat/text option, and virtual clinics).



## System Resource Options

Navigation program helps clients navigate the MHA system and/or any system needed. Navigation program maintains a database and/or file system with specific and relevant information about services in the community.

### 1. *Systems navigated*

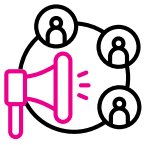
- 1.1 Support clients in navigating the MHA system and/or related systems (i.e., education system, justice system, developmental services, etc.) based on the clients' needs and goals.

### 2. *Service database/file system*

- 2.1 Utilize secure databases, other digital solutions, and/or analogue file sharing (e.g., storing notes in binders or spreadsheets, collecting pamphlets/literature about other community programs, etc.) to collect, and track service information in their catchment area and share this information with colleagues.

### 3. *Service information monitored*

- 3.1 Gather and monitor specific information about services (e.g., contact information, hours, criteria, wait times, referral process, fees, population served, website information, etc.) within their catchment area and convey relevant information to clients.



## Lived Experience and Outreach

Navigation program values lived experience by actively promoting youth and family-centeredness, offering peer support, implementing and engaging with advisory councils, and spreading awareness about MHA and the MHA system in general.

### 1. Youth-centeredness

#### 1.1 Role of navigation program:

- 1.1.1 Based on the mandate/criteria of the program, efforts are made to center and empower youth, even when involving families.
- 1.1.2 Acknowledge and accommodate for the unique differences between youth and families.
- 1.1.3 Locate program in a youth-friendly environment (physical space) or manner (virtual programs).
- 1.1.4 Offer additional support and opportunities for engagement (e.g., youth-centered events, peer support for youth, and developing youth advisory committees).
- 1.1.5 Include youth-friendly staff and engage staff in youth-centered trainings.
- 1.1.6 Engage youth in research and program evaluation efforts.
- 1.1.7 Develop and advance the program in collaboration with youth.

#### 1.2 Role of navigators:

- 1.2.1 Assess and understand youth needs and perspectives.
- 1.2.2 Adopt a person-centered approach and meet youth where they are.
- 1.2.3 Offer specific options tailored to the youth's needs and goals.
- 1.2.4 Provide education, build relationships, and empower youth.
- 1.2.5 Understand and address barriers in the local contexts of youth clients (e.g., academic, rural, or urban settings).
- 1.2.6 Collaborate with and support service providers to help youth.

1.2.7 Include the youth even when a family member is the primary client (with consent).

1.2.8 Engage in youth-centered trainings and research.

### 2. Family-centeredness

#### 2.1 Role of navigation program:

- 2.1.1 Offer support and opportunities for family involvement (e.g., family-centered events, peer support for family, and developing family advisory committees).
- 2.1.2 Involve families in research and program evaluation efforts.
- 2.1.3 Include family-friendly staff and engage staff in family-centered training.
- 2.1.4 Develop and evolve the navigation program in collaboration with families.

#### 2.2 Role of navigators:

- 2.2.1 Assess and understand family's needs, dynamics, and perspectives.
- 2.2.2 Adopt a person-centered approach and meet families where they are.
- 2.2.3 Offer specific options tailored to the family's needs and goals.
- 2.2.4 Provide education, build relationships, and empower families.
- 2.2.5 Understand and address barriers in the local contexts of family clients (e.g., academic, rural, or urban settings).
- 2.2.6 Collaborate with service providers to bridge differences in perspectives between youth and families.
- 2.2.7 Include families to support youth (with consent).
- 2.2.8 Engage in family-centered trainings and research.

### 3. Peer Support

- 3.1 Role of navigation program:
  - 3.1.1 Offer peer support to address client's needs.
  - 3.1.2 Train and supervise peer support staff.
  - 3.1.3 Involve and obtain input from peer support staff.
- 3.2 Role of peer support:
  - 3.2.1 Offer one-on-one and/or group support.
  - 3.2.2 Remain connected as long as needed.
  - 3.2.3 Utilize knowledge from lived experience and provide education.
  - 3.2.4 Advocate for clients to address barriers in the system, access services, etc.
  - 3.2.5 Support the system navigation process and/or provide system navigation.
  - 3.2.6 Engage in system navigation training.

### 4. Advisory Councils

- 4.1 Engage one or more types of advisory councils in the program (e.g., client advisory councils, MH advisory councils, Elder councils, youth advisory councils, family advisory councils, etc.).
- 4.2 Inform advisory councils about program needs, barriers, and trends.
- 4.3 Role of advisory councils:
  - 4.3.1 Engage in decision-making regarding program design, strategy, initiatives, research and evaluation efforts, training initiatives, and outreach efforts.
  - 4.3.2 Offer guidance to navigation program staff.

### 5. Awareness and education

- 5.1 Conduct outreach about MHA and the system to enhance learning, promote clients' wellbeing, and build relationships with youth.
- 5.2 Spread awareness about the MHA system, community resources, and wellbeing through networking, education, newsletters, social media platforms, and/or courses.
- 5.3 Provide education on diverse MHA-related topics (e.g., self-care, available MHA resources, connecting with MHA resources, and navigating the MHA system).
- 5.4 Tailor outreach efforts to specific groups (e.g., youth, families, community services, and service providers) based on their needs and goals.



## Community Collaboration

Navigation program identifies, builds, and maintains relationships with community services and service providers.

### 1. *Information-gathering about service options*

- 1.1 Learn from clients and conduct online searches to offer options that best match clients' needs.
- 1.2 Share knowledge about community resources with each other on an ongoing basis.
- 1.3 Visit or host community services to learn about their processes for clients.
- 1.4 Network and consult with community services.

### 2. *Relationships with other providers*

- 2.1 Meet with community services and advocate for clients' needs.
- 2.2 Partner with community service providers to sustain relationships.
- 2.3 Attend and present at different community events (e.g., conferences, cultural events, etc.).

### 3. *Facilitating connections to services*

- 3.1 Collaborate with community service providers and conduct warm transfers when connecting clients to services.
- 3.2 Work collaboratively with clients to make connections to services. Navigators connect to services on the clients' behalf, with their consent and/or navigators provide clients with information about the referral process to enable them to complete self-referrals.

### 4. *Service outreach*

- 4.1 Network and present information about the navigation program to community services using different methods (e.g., presentations, social media promotion, newsletters, attending community events, meet and greet committees).



## Equity, Diversity, Inclusion, and Health Equity

Navigation program adopts and regularly reviews policies and practices that meaningfully promote equity, diversity, inclusion, and accessibility among program staff and youth/families.

### 1. Focus on equity-deserving groups

- 1.1 Support equity-deserving groups and engage with them for co-design and strategic planning.

### 2. Languages offered

- 2.1 Offer services in diverse languages to engage clients, through staff who are fluent or via access to translators and interpreters.

### 3. Diversity/inclusion efforts

#### 3.1 Role of navigation program:

- 3.1.1 Program's hiring policies and practices complement EDI efforts.
- 3.1.2 Leadership and committees support EDI efforts.
- 3.1.3 Provide EDI trainings and assessments (e.g., knowledge, skills, competency, and sensitivity) to program staff. Utilize online resources and consult with experts to adopt and implement EDI principles.

#### 3.2 Role of navigator:

- 3.2.1 Implement a person-centered approach and be respectful and non-judgmental.
- 3.2.2 Understand and accommodate for clients' EDI needs.
- 3.2.3 Support and engage with diverse youth, families, and service providers.
- 3.2.4 Offer inclusive options for resources and services (e.g., resources that are sensitive of language needs, culturally responsive, etc.).

### 4. Accessibility

#### 4.1 Role of navigation program:

- 4.1.1 Use different ways (e.g., virtual and in-person methods) to communicate with clients.
- 4.1.2 Offer support to address additional accessibility needs (e.g., lack of finances, transportation issues, overnight accommodations, etc.).
- 4.1.3 Maintain little or no waitlist.
- 4.1.4 Offer service free of cost.
- 4.1.5 Host the program in an accessible environment or provided in an accessible manner (e.g., virtual programs), conducive to the accessibility needs of clients.
- 4.1.6 Allow referrals from youth, families, and service providers.
- 4.1.7 Adopt technology to offer accessible services.
- 4.1.8 Maintain flexible hours to accommodate for clients that are working or attending school.

#### 4.2 Role of navigators:

- 4.2.1 Understand and accommodate for accessibility needs (e.g., physical, visual, hearing needs, etc.).
- 4.2.2 Refer clients to services that accommodate for different accessibility needs.



## Outcomes

Navigation program gathers feedback from clients, community members, and service providers to determine the impact and effectiveness of the program. Feedback results are used to inform changes within the program.

### 1. Evaluation conducted

- 1.1 Elicit feedback using formal methods (e.g., survey and interviews) and/or informal methods (e.g., check-ins during sessions and feedback through regular correspondence, emails or text messages).
- 1.2 Seek feedback from clients and if possible, offer incentives for their feedback.

### 2. Client satisfaction/experience

- 2.1 Obtain feedback from clients about the program (e.g., if they will recommend the service, if they are satisfied with the program, etc.) and the navigation process (e.g., satisfaction with the method of referral, modes of communication, etc.).
- 2.2 Explore clients' experiences with the navigation program staff (e.g., the navigator, intake coordinator, research staff, etc.).
- 2.3 Gather feedback about specific navigator skills, such as timeliness, youth-friendliness, communication, education provided, timely access to care, and the navigators' ability to respect their clients' identities (culture/ethnicity, gender identity, sexual orientation, etc.).
- 2.4 Determine if clients were satisfied with the navigator's suggestions, knowledge, and expertise about MHA resources.

### 3. Staff satisfaction/experience

- 3.1 Acquire feedback from navigation program staff to learn about their experience and satisfaction with their roles.

### 4. Reduce crisis

- 4.1 Determine if connecting with the navigation program affects the number of contacts or admissions clients have to the hospital, the emergency department, crisis services, distress lines, and/or similar services.

### 5. Continuity of care

- 5.1 Identify barriers and facilitators to continuity of care.
- 5.2 Explore clients' experiences during and after the navigation process and their opinions of the ongoing involvement of navigators in support of continuity of care.

### 6. Appropriate match to service

- 6.1 Track referrals made for clients (e.g., types of referrals made and whether or not clients connected with resources provided).
- 6.2 Follow up with clients to determine if suggested resources met their needs and goals.

### 7. Improved mental health

- 7.1 Regularly review and track changes in clients' MHA symptoms, and/or using valid and reliable scales where possible.

### 8. Cost/benefit

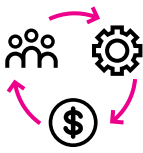
- 8.1 Conduct a cost/benefit analysis to determine if the service is feasible, effective, and useful.

## 9. Other outcomes observed

- 9.1 Track and measure additional outcomes, including the following:
  - 9.1.1 Health outcomes
  - 9.1.2 Self-care
  - 9.1.3 Negative and/or unintended outcomes
  - 9.1.4 Timeliness of service
  - 9.1.5 Increased knowledge and skills
  - 9.1.6 Referral sources
  - 9.1.7 Number of clients served and demographics
  - 9.1.8 Reduced feelings of isolation
  - 9.1.9 Reduced wait times
  - 9.1.10 Community service provider experiences interacting with the navigation program.

## 10. Evaluation reported

- 10.1 Report evaluation results within the organization (e.g., navigation program staff, leadership team, Board of Directors, advisory committees, youth, and families).
- 10.2 Report evaluation results externally (e.g., present at conferences, publish academic articles, report results on social media platforms or the program website, and share information with community services and service providers). Navigation program reports to local, provincial, and federal government, and funding bodies, to advocate for investments in youth MHA navigation services.



## Sustainability

Navigation program makes efforts to secure and sustain funding for the program.

### 1. Funding source

- 1.1 Draw on various public (e.g., federal government, provincial government, etc.) and private (e.g., philanthropic) funding sources.

### 2. Program Sustainability

- 2.1 Conduct research and/or program evaluation to learn, monitor, adapt, and report on these activities.
- 2.2 Engage in efforts to secure funds to sustain or scale the program.
- 2.3 Conduct outreach, build and maintain relationships with community services.
- 2.4 Improve quality and sustain the service by continuously implementing additional initiatives (e.g., provide information to support research projects, implement evidence-based best practices, staff development/retention efforts, refine navigation program model/theory, etc.).

## Conclusion

Thank you for taking the time to review these standards. These standards were developed to deepen the understanding of youth MHA navigation programs across Canada. These standards can assist new and existing youth MHA navigation programs in understanding how to offer quality services and best serve their clients. These standards can help current and future navigation programs make evidence-based decisions regarding program considerations, approaches to navigation, and supporting youth and families in their MHA care.

It is important to note that the role of navigation is ever-changing and dynamic. Several factors will affect the way these standards are used and eventual outcomes. Navigation programs must consider their local contextual factors when implementing these standards, continually review the implementation process, and revise policies and practices accordingly. Navigation programs should engage their own stakeholders (e.g., youth, families, program staff, funders, decision makers, etc.) extensively in these processes. Navigation programs are also encouraged to communicate processes and outcomes with the navigation community locally and nationally/internationally to further deepen our collective understanding of this innovative model of care.

Individuals and programs are also encouraged to provide feedback on the standards by contacting Dr. Roula Markoulakis (Nominated Principal Investigator) at [roula.markoulakis@sunnybrook.ca](mailto:roula.markoulakis@sunnybrook.ca) and/or the FNP research team at [fnpresearch@sunnybrook.ca](mailto:fnpresearch@sunnybrook.ca). Feedback will be reviewed and revisions will be made every three to five years.

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# Glossary

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<b>Accessibility</b>	the practice of making information, activities, and/or environments usable and meaningful for everyone.
<b>Caregiver</b>	a family member who supports the youth.
<b>Caseload</b>	number of individuals supported by a service provider in a particular period.
<b>Catchment area</b>	a geographical area served by a service/organization.
<b>Client(s)</b>	the individual(s) (i.e., youth and/or family member(s)) served by the navigation program.
<b>Confidentiality</b>	the principle of keeping secure information given by or about an individual.
<b>Cost/benefit</b>	the relation between the cost and benefits of an activity.
<b>Consent</b>	when an individual provides permission or agreement.
<b>Crisis</b>	a situation involving difficulty or danger. Crisis is self-defined and experienced differently by different individuals.
<b>Community</b>	a group of people sharing common characteristics.
<b>Community services</b>	programs designed and delivered to aid individuals, groups, or communities.
<b>Diversity, Equity, and Inclusion</b>	principles, policies, and practices designed to promote the representation and participation of diverse individuals (e.g., racial, ethnic, socioeconomic, and cultural backgrounds, physical and/or developmental disabilities, etc.) who may otherwise be excluded.
<b>Family</b>	biological or non-biological immediate or extended family, friends, or others of importance to the youth, who have a role in the youth's care.
<b>Family-centered</b>	the act of engaging and supporting families based on the belief that families can help meet a client's needs.
<b>Person-centered</b>	a strategy that views clients as equal partners in planning, developing, and monitoring care. Decisions are guided by the client's needs, goals, and values.
<b>Group support</b>	a group of individuals meeting and receiving service.
<b>Hiring practices</b>	strategies used to recruit, select, and hire new employees.
<b>Indigenous peoples</b>	Indigenous peoples are the original inhabitants of a land. In Canada, this includes three groups: First Nations, Inuit, and Métis. These peoples are unique in their cultures, histories, languages, and spiritual beliefs, and practices.

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# Glossary

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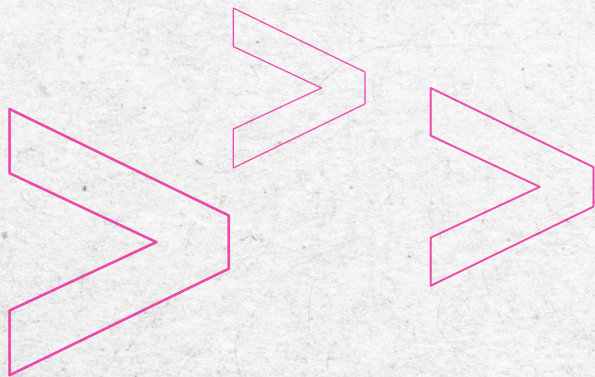
<b>Lived experience</b>	knowledge and expertise based on first-hand experience.
<b>LGBTQ2S+</b>	a term that encompasses multiple gender identities and sexual orientations (e.g., Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Two-Spirit, plus other identities).
<b>Navigator</b>	navigation program staff focused on supporting clients in navigating and finding appropriate services.
<b>Navigation program staff</b>	individuals employed by the navigation program.
<b>Navigation</b>	the process of helping clients and their families find, access, and transition through mental health care services and resources. Navigation services help clients overcome barriers to care, provide person-centered support, and support integrated care.
<b>Outcome</b>	the result or effect of service.
<b>Outreach</b>	efforts made to spread awareness and provide information.
<b>Peer support</b>	people with lived experiences offering support to others, which can include emotional and social support, guidance, information, etc.
<b>Privacy</b>	protecting an individual or a groups' information.
<b>Referral</b>	directing a client to a service.
<b>Retention</b>	the act of keeping navigation program staff.
<b>Self-referral</b>	the act of referring oneself to a service.
<b>Service providers</b>	individuals with professional designations and/or lived experience, offering mental health and/or addictions services to youth and/or families.
<b>Standards</b>	considerations intended to ensure quality navigation services. Standards are generally accepted norms that can set expectations and accountabilities.
<b>Warm transfer</b>	process intended to help clients feel supported through transitions. Can involve one service provider conveying information to another service provider, making introductions, attending initial meetings with the new provider alongside the client, etc.
<b>Youth</b>	the period between childhood and adulthood.

# Acronyms

MHA – mental health and/or addictions

PHI – private health information

EDI – equity, diversity, inclusion



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